



to female genital mutilation

ACHIEVE OVC REPORT



FEMALE GENITAL MUTILATION

Female genital mutilation refers to the partial or complete removal of the external female genitalia. It is typically done between infancy and the age of 15, but adult women may also undergo the procedure.

The practice is thought to have started before the advent of either Christianity or Islam and it is most common in the north-eastern, western, and eastern regions of Africa, and some parts of the Middle East and Asia. It is estimated that more than 200 million girls and women alive today have undergone female genital mutilation in the countries where the practice is concentrated and an estimation of 3 million girls at risk of undergoing female genital mutilation every year.

–WHO

There are basically three types of FGM;

1. Clitoridectomy; this is the partial or total removal of the clitoral glans (the external and visible part of the clitoris, which is a sensitive part of the female genitals), and/or the prepuce/ clitoral hood (the fold of skin surrounding the clitoral glans).
2. Excision; this is the partial or total removal of the clitoral glans and the labia minora (the inner folds of the vulva), with or without removal of the labia majora (the outer folds of skin of the vulva).

Continues on page 1...

In February 2020, ACHIEVE OVC continued implementation of planned community and facility activities, followed up with SDS for registration certificate. Attended a two days UNESCO participation program: Strengthening the Capacity of NGOs of Non-Formal Education Sub Sector in Promoting Literacy and Lifelong Learning Activities for the Achievement of SDG4, attended a two days training of Enhanced Adherence Counselling, attended an IHVN organized meeting between CBOs and health facilities on strengthening collaboration, conducted FY20 volunteers' step-down training and participated in NPOC verification exercise.

A total of 3246 (M=1154, F= 2092) were served, forty-two (42) beneficiaries participated in gender norms meeting at Kabusa communities, sixty-one (61) beneficiaries across Kapwa and Sabo-lugbe communities participated in Better Parenting Program...

Continues on page 2



Dear friend of the family,

We welcome you to another interesting edition of our Monthly Newsletters. Female Genital Mutilation (FGM), also known as Female Genital Cutting (FGC) in Nigeria accounts for the most female genital cutting/mutilation (FGM/C) cases worldwide. As of 2012, 27% of Nigerian women between the ages of 15 and 49 were victims of FGM. FGM is recognized intentionally as a violation of the human rights of girls and women. It reflects the deep-rooted inequality between sexes, and constitutes an extreme form of discrimination against women. It is nearly always carried out on minors which is a violation of the rights of children. Despite then President Goodluck Jonathan signing a federal law banning FGM on May 2015, no single case has been tried, because thousands of Africans who practice this act are unwilling to change due to some false beliefs.

CFHI joined the rest of the world on the 6th of February to commemorate FGM via tweet chat, where we discuss issues around FGM and how to end the inhuman practice. Kindly find the article on Female Genital Mutilation (zero tolerance to female genital mutilation.), reports on ACHEIVE Orphans and Vulnerable Children, Diabetes Awareness and Care (DAC), 4GATES OVC, CCAP (Capacity Building And Community Awareness Project) featured in this publication.

Do have a pleasant reading.
Kind regards,
Princess Osita-Oleribe
Executive Director, CFHI

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3. Infibulation; this is the narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the labia minora, or labia majora, sometimes through stitching, with or without removal of the clitoral prepuce/clitoral hood and glans.

Most of these operations are still performed worldwide by traditional practitioners, often in unsanitary conditions, with serious health implications. FGM is sometimes called female circumcision, but the implications of female circumcision are totally different from those of male circumcision.

Centre for Family Health Initiative has through WYNE (Women and Youth Ngor Okpala Empowerment) project, been able to raise awareness and sensitize the locals to the negative impact female genital mutilation has on its victims, but more should be done. Social and behavior change communication is never a one-off activity. Many, including females are still comfortable with the tradition and are unwilling to change.

2020 VALENTINE'S DAY AT CFHI



February 14, often know as a day set aside to share love and gifts among loved ones. It was not an ordinary day for us here at CFHI. We were able to take advantage of the later part of the day, where we shared love and bounded at the Millennium Park, Maitama, Abuja. It was an evening decorated with love and games, with awesome food and every member of CFHI that was present took part shoving off the official personalities. We got to know each other and played, as well as danced all through the times we spent there.

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...460 children across Wumba, Dape, Jahi, Sauka-kahuta participated in Kiddies' Club. They were engaged in in-doors and out-door games and 351 adolescents across Shereti, Old Karmo, Angwa-sayawa, and Saburi 2 communities participated in Adolescent Club.

adolescent girls club. The team discussed with the girls the basic anatomy of the Female Reproductive System, Puberty, Menstruation including teenage pregnancy and its effect. At the Child Protection Committee in Wumba, a Child Protection Committee (CPC) was inaugurated at the Nigeria Police Force in Wumba.

CFHI team had a meeting with the representatives of the National Population Commissions on collaboration in the provision of birth certificates for children in assigned communities, school visit and performance assessment was conducted for one hundred and forty-seven (147) children across LEA Gosa, LEA Angwa-sayawa, LEA Saburi, LEA Sabon-lugbe, LEA Jiwa and LEA Lugbe and five (5) girls were supported to transit from primary school to secondary school.

Other activities carried out include; infant and young child support group meeting at Saburi 1 and Kapwa, food demonstration activity at Old Karmo, older out-of-school adolescent skills acquisition programmes supervised in different communities, SILC activities at Jahi, Sabo-lugbe, Gosa and Wumba communities, and needs assessment conducted for one hundred and thirty-six (136) caregivers across assigned communities.



The unit participated in an enhanced adherence counseling training which is aimed at helping the VC with unsuppressed Viral Load achieve viral suppression. The organization's representative who attended the training, did a step-down for other team members, where sixty-one (61) community volunteers participated

A total of Twenty (25) referrals were received across assigned facilities. Sixteen (16) were retained by CFHI, seven (7) were referred to other Institute of Human Virology Nigeria CBOs in FCT while two (2) to a CBO in Nasarawa.

DIABETES AWARENESS AND CARE PROJECT

CFHI team conducted four advocacy visits to the Dean of Student Affairs, Imo State University, Alvan Ikoku College of Education both in Owerri Municipal, the Traditional ruler of Umurido Ubaha Autonomous community of Okigwe and the Principal of School of Health Technology Okporo in Orlu L.G.A. The team had a roundtable meeting with representative from St Damian's Hospital Okporo and the management of School of Health Technology Okporo.

The meeting aimed at improving diabetes outcome in the Community. At the end of the meeting, it was agreed that students and lecturers will go for check-up (screening on T2DM) at St Damian's Hospital at least once in a school session and physical activities should be included in their weekly routine.

Community awareness exercise was carried out in seven communities: Umurido, Ubaha, Amosu Umulolo communities in Okigwe Local Government Area, Amawom in owerri municipal, Federal University of Technology Owerri (FUTO), School of Health and Technology and Okporo market.



The team sensitized participants on T2DM, its risk factors, complications, signs and symptoms and prevention.

At the School of Health and Technology Okporo, the team sensitized and screened the students and teachers. Consequently, four thousand, five hundred (4500) individuals were reached with prevention message of T2DM, with Seven hundred and forty-nine (749) individuals screened for Type2 Diabetes Mellitus.

4 GATES OVC PROJECT

CFHI has through the CCFN OVC funded program (4GATES) set out to kick start the programme in Imo state, covering Owerri North/West/Municipal and Mbaitoli LGAs. Through community mapping and advocacies, stakeholders' engagement and recruitment of community volunteers.

This month, activities such as; participation in a 5-days OVC planning and budget development workshop for key staff of the project, Stakeholders' engagement and advocacy visits to thirty two (32) communities, Stakeholders' engagement and advocacy visit to four (5) health facilities: Federal Medical Center Owerri (FMC), Holy Rosary Hospital Emekuku, Ihitte Ogada Primary Health Center, Mbieri General Hospital, and Nworieubi PHC, Visit to the office of the National Population Commission (NPopC) to seek for partnership and support in the area of birtvulnerable certificate registration for our children.

The team held strategic meetings with the representatives of CFHI, and the relevant stakeholders., facilitated a 3-days step down training for volunteers of the 4GATES OVC programme and coordinated stakeholders' engagement with Global Alliance for Public Health Intervention (GAPHI), an NGO with people living with HIV (PLHIV) in a bid to pool a selected few to be trained as volunteers.

The team got the case files and contact of 94 Clients in Holy Rosary Hospital Emekuku, 23 clients in Mbieri General Hospital and 20 clients in Nwaoruibi PHC. The tripartite partners' meeting between CFHI, CCFN and CRS was productive as work done so far and challenges were discussed. The team also received Data Capturing Tools from CCFN.

Successfully completed the step down training of sixty eight (68) volunteers for the OVC programme implementation in communities.

A total of sixty two (62) volunteers attended at least two days of the training and were duly recruited for the programme.

CAPACITY BUILDING AND COMMUNITY AWARENESS PROJECT

The team held a strategic meeting with the coordinator of reproductive health, Imo state ministry of health to discuss on working together and how to get a comprehensive list of TBAs in the state, training manual to be used for the training and topics to emphasize on during the training.

The team worked on getting the comprehensive list of traditional birth attendants in the state from the state ministry of health which they were able to contact some of the Head of Departments of health and the RH coordinators in the 27 Local Government Areas of the state.

The team also prepared and submitted a letter of introduction and collaboration to the Permanent Secretary of Imo state ministry of health. The team will however be working with Imo state Ministry of Health, HODs of health and the RH coordinators for the successful implementation of the project.

The team further held meetings with 3 Head of Departments of Primary Health Care Department in Owerri municipal, Owerri north, Owerri west.

*Interested in helping
In any aspect of our
work?*

Persons interested in donating to our activities, offering volunteer services or partnering with us, are always welcome. All CFHI's projects are community based and family-centred, so that our beneficiaries are reached with activities that proffer sustainable solutions. Therefore, individuals or groups concerned with improving community health, sustainable socio-economic empowerment and the development of family-centred policies should kindly do so through the channels below.

For Donations and/or others:
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Number: 5080117843
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