

Quarterly Activity Progress Report (QAPR)

1. Name of implementing partner: Health promotion and Development Organisation (HePDO)	2. Activity number and description: Engaging Positive Deviance in twenty (20) communities as communicators and advocates against Female Genital Mutilation or Circumcision (FGM/C)
3. Date and place activity took place:	
1 st December 2017 – 28 th February 2018 Foni Bintang and Foni Kansala	
4 Expected outputs as per RWP:	
Individuals, families, communities are equipped with the necessary knowledge and skills that enable them to disapproved FGM/C.	
5. Progress achievement:	

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Background

Female Genital Mutilation/cutting (FGM/C) is defined by the World Health Organization (WHO) as “all procedures that involve partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons.” The practice is done on girls from weeks after birth to puberty with or without anesthesia. In many instances, the practice is associated with complications uncontrolled bleeding, fever, wound infection, sepsis, and in severe cases death. Due to its severity and the health complications it has become necessary to halt the practice permanently as it is undesired and impact on the health and wellbeing of those who undergo it.

Ending the undesired FGM/C (75%) has proven very complex because they are deeply rooted cultural traditions and if we are going to end the practices it is imperative that we understand the social norms and enforcement mechanism used by the different communities to continue the practice. Stopping the practice of FGM/C for posterity requires shifting from the traditional externally fuel style of community engagement to an internally fuel approach to influence attitudes and beliefs. Thus Positive Deviance (PD) approach reinforced by media campaign was proposed as change model to gradually contribute in ending FGM/C.

The PD model was chosen for piloting in an effort to end FGM/C as it is a community-based approach designed to identify solutions to community problems within a Community. The approach enables communities to discover successful uncommon behaviors/ strategies and as well as what enables some members of a community (the “Positive Deviants”) to find better solutions to pervasive problems than their neighbors who have access to the same resources. Success registered by the use of the model in nutrition improvement led to its application in many other program areas such as HIV/AIDS risk reduction, etc led to it been piloted by HePDO in the drive to end FGM/C which is funded by UNICEF .

The piloting of the behavioral change model involved the selection and training PDs who were assigned to work as volunteers within their own neighborhood sharing their experiences that led to them been successful in overcoming social norms. Each PD was assigned to a number of household to adopt as his/her area of intervention. Under this approach, the Female PDs were referred to as ANUTY and the Male PDs call UNCLE.

Strategic approach

The core strategy to inform the communication and social mobilization component for both men and women to disapprove FGM/C was focused on:

- Equipping participants with the required knowledge and skills to effectively advocate against the practice of FGM/C
- Encourage the maintenance of best practices that can contribute to the elimination of FG/C in the intervention communities

Scope of the strategy

The purpose of this strategy was to outline immediate steps that UNICEF and other partners can take to rapidly intensify public momentum and amplify the sense of urgency to stop FGM/C and Child marriage. This operational plan of the strategy focused on the short-term, specific, measurable, and achievable interventions.

U **Goal:** Equip, Individuals, families, communities with the necessary knowledge and skills that enable them to disapproved FGM/C.

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To enhance better understanding and application of the PD approach in the area of FGM/C, several activities were conducted key among them listed below.

Orientation Meeting with the Regional Health Management Team, District and Village heads

Prior to the commencement of the implementation of the project, orientation meetings were held with the Regional Health Team (RHT), the District Chiefs with village heads representatives. of the intervention communities in Foni Bintang and Kansala and the MDFTs (Multidisciplinary Facilitation Teams). The aim of these meeting was to brief the different stakeholders on the rational of the project, its implementation strategies with view to soliciting for their support during implementation.

During the meeting with the RHT, the concept note was shared with them and they expressed their appreciation for choosing their region whist at the same time gave permission for HePDO to work with their Field staffs that are based in the intervention communities.

In the orientation meeting with the District Chiefs and communities representatives a thorough and detail explanation about the project and the reason for choosing their communities was discussed. Following the explanation of the project concept and strategies, all those present welcomed the idea and cited that this is a new approach which have never been tried in their communities. They expressed happiness as it is an approach that will recruit and trained people from their own communities who will in turn engage and support them to eliminate FGM/C rather than outsiders coming to tell them what to do. The District Chiefs and Village representatives vowed to work with HePDO and UNICEF to eliminate FGM/C as it is incumbent upon them since a law has been passed banning practice in the Gambia, They further went on to accept supporting the identification of volunteers from their communities to be trained as communicators and advocates against the practice of FGM/C.



Orientation meeting with District and Village heads at Sibanorr about the PD approach

Another one day orientation meeting was organized with the MDFTs comprising, HePDO, Community Development Assistants and Community Health Nurses to brief them on the project objectives and activities to be conducted. During this meeting, the project implementation strategy was clearly explanation and their required level of involvement especially in terms of monitoring the PD volunteers.

The training manual, data collection forms and monthly supervision forms for the positive deviance volunteers was shared with them and they were tasked with the monthly supervision of the positive deviance volunteers' activities.

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At the end of all the orientation meetings the participants expressed happiness citing that this is a new strategy which will empower them to identify the solution to their own problems rather having solution imposed on them by others. They said the coming of this type of project activities is timely and will go a long in addressing the negative health; social and psychological consequences suffered by women and children especially the girl child as a result of FGM/C.

Assessment to establish baseline data and information to ensure accountability of the strategy

In order to determine how successful the intervention will be, a rapid assessment was conducted in the intervention communities to establish a starting point against which HePDO will measure the impact of using Positive Deviant approach in eliminating FGM practices in the targeted areas. The study gathered and assessed quantitative data from a small, but diverse sample of 20 villages in the districts of Foni Bintang and Kansala. Its findings represent a first step in HePDO's ongoing attempts to gain a deeper understanding of community's knowledge, attitude and practice towards FGM. It was anticipated that the findings of the rapid assessment will be useful for Government, International and local organizations for future scale up interventions.

Objective of the assessment

The main objective of this rapid assessment was to gather baseline information about the intervention communities' knowledge, attitude and practice on FGM/C

The assessment interviewed 89 participants drawn from 20 communities in Foni Bintang and Foni Kansala where FGM is known to practice

Summary of key assessment findings

The assessment revealed that knowledge on the practice of FGM/C is high with about 90% indicating that they have heard about the practice and is actually carried out in their communities. Majority of the respondents were females whilst about 37.65% and 25.88% had no form of schooling or some schooling respectively. The assessment further revealed that even though 59.55% of the respondents said FGM is not a mandatory religious practice and 70.79% said they have seen girls with complication after FGM/C, but the practice still continue to take place at community level simply because it is considered as deeply rooted cultural practice spanning for more than a century.

Although knowledge was found to be high, but there is still need to further intensify social and behavioral change efforts so that the knowledge gained through the awareness campaigns can be translated into practice. Adopting innovative Behavioral changes approaches that refocuses the current interventions from externally fuel methods to internally fuel methods will make the community members identify FGM/C as an issue that affect their health, wellbeing and socioeconomic development and thus helping them to formulate and enforce solutions to end the practice

Finally based on the findings of the small scale assessment, it is recommended that a bigger assessment that will be country representative be conducted to determine the actual situation country wide.

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Identification, selection and Training of Positive Deviants Individuals (Volunteers)

The primary objective was to harness local human resources to become actively engage in advocating, communicating and mobilizing people to change social norms. This particular process has the ability and can improve community participation, ownership, increase credibility and acceptance of the intervention. The recruitment of PDs was guided by selection criteria developed and in consultation with community heads/representatives as follows.

1. The person must be resident in the community selected for the intervention
2. The person must have been identified by the community
3. The person must have refuse FGM/C to be performed on his/her girl child
4. The person must be willing to discuss the issue of FGM/C openly with community members
5. The person must be ready to attend the training
6. Willing to conduct home visit and face to face counselling for disapproval of FGM/C

Upon completion of the selection, 80 PDI's (volunteers) from twenty (20) communities were invited for training on the PD approach but seventy seven (77) participants attended. On average a maximum of 5 PDs and minimum of 3 were selected from big and small communities respectively. The training took place at Kampant from 19th to 22nd December 2017. .

As part of the training a guide was developed focusing on building the knowledge of the participants on the impact of FGM/C on the girl child and as well enhanced their home visiting and counselling skills so as to enable them serve as communicators and advocate against FGM. During the training participants' knowledge on the definition, cultural belief and consequences of FGM was discussed in detail. The participants were also exposed to conducting home visiting and counselling techniques which are crucial in promoting positive behavioral change.

In addition, the participants were also trained on proper record keeping using pictorial reporting forms so as to enable them record their activities such as home visits made, people met and face to face counselling conducted during their advocacy activities against FGM/C



Cross section of PDs been trained at Kampant as Communicators and Advocates against GM/C

The training sessions were interactive and elicited ideas from participants and provoked very interesting discussions on their local context. At the end of the training, participants applied what they learned by demonstration on the health and social consequences of FGM/C practices.

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The participants also developed and presented action plans as part of the post workshop activities in ensuring the message, knowledge and skills gained during the training were maintained, and disseminated to their community peers. The participants agreed to meet with their community leaders and the circumcisers (“NyangSimbaas”) members to sensitize them and discuss with them the health, social and legal implications of practicing FGM/C. Each of the trained PDs was to in turn identify and train five others whom they have trust, that are trainable and willing to advocate for the disapproval of FGM/C.

Home visits and face to face counselling by PDs

Following the completion of training of recruited PDs, each was tasked to be conducting home visits and counselling in their own communities to advocate against the practice of FGM/C. House hold visits and individual face to face counseling were conducted in all the intervention communities with. Overall a total of 3800 households were visited with a total of 45491 individuals met, counseled and encouraged to disapprove the practice among their families and reject having it performed on their own girls. Each of the households was visited repeated times to ensure that family members who were not met during the first or second visits were not left out.

These home visits and face to face counseling has created a lot of interest among people met and was able to make them begin contemplating disapproving the practice by weighing the goods against bad effects. This community engagement has created a space for dialogue between community members and has raised the momentum of contemplation on the urgency to eliminate FGM/C practice.

Radio Program

Live phone-in radio program which supported social mobilization was also conducted using Bwiam Community Radio station. The radio programs which were meant to share relevant information on FGM/C with audiences and as well as to create a forum for direct discussions between the listeners and panelist on FGM/C. A program guide was developed by which entailed; the procedures for conducting the radio talk show and guide the content of the discussion. A total of 6 live-phones in radio program were conducted reaching an estimated population of about 20,000 individuals within and outside the Foni districts

In each program, six panelists were identified who speak different languages such as Mandinka, Jola, Wolof, Sarahulay and Fula.. The panelists presented on topics such as; complications of FGM/C and its impact of FGMC on the girl child, women and the society. Before the end of each program, listeners were allowed to make phone calls by either contributing to the topics, ask questions or clarifications on issues not clear.

Most of those who called during the programs appreciated the initiative but recommend its continuation and scaling up to other districts and regions countrywide. They acknowledge that FGM/C goes with complications and could be term as an inhuman act in addition to violation of girls’ and women’s human right. Some sent text messages commending Unicef for funding such a laudable project and urge them to continue supporting HePDO for long term if communities are to realize the benefit. Some cited FGM/C as deeply rooted practice which require long term advocacy for it to be eliminated. UNICEF and HePDO were also congratulated for having the courage to pilot PD approach in eliminating FGM/C and for choosing WCR as a pilot area. Other callers also suggested the involvement of males and participation of youths in and out of school.

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Mid activity assessment to establish outcome and impact

In the mid of the activity implementation, an assessment to determine if progress was been made was conducted. The aim was to get an insight of communities understanding of the strategy and level of willingness to disapprove FGM/C based on their own will and not just in compliance with the law that banned the practice.

The principle objective of assessment was to hear from the PD advocates how they perceive the willingness of people to dis approve FGM/C. All the 77 were PDs were assessed.

Summary of key Findings

All the 77 PDs who were involved in the home visits indicted that almost all the households they visited have had a family member who went under FGM/C in the past indicating that the practice has been existence for decades. As a result of the ongoing home visiting to counsel community member to end the FGM/C, 65 PDs representing 84.5% taking part in the pilot said they have encountered no problem in their home visits to discuss with family members to disapprove the FGM/C. In their own opinion between 50-60% of the people met and counselled were willing to stop the practice and have committed to ensuring that none of their girls would be subject to FGM/C in the future. The remaining 11 PD indicated that during their first visits they were not welcome to openly discuss FGM/C with every member of the family but with selected few. However with repeated visits to the same families, they were able to convince them to discuss the issue with every family member met in a group.

The findings from the mid activity assessment suggest that the intervention is building people's knowledge on the impact of FGM/C and thus their willingness to have it discuss openly in their household and among family members. Furthermore it has shown that continuously targeting those who resist change with precise messages supported by evidence can result to gradual acceptance of change of behavioral.

These findings are promising given that the project was only at its sixth week of implementation. It is recommended that this approach be replicated in other communities since it has the potential to influence change which is critical in disapproving FGM/C practice.

Monitoring and Supervisory Visits

Monitoring and Supervision which was crucial in ensuring that there is active and documented community engagement by the volunteers was carried out on monthly basis by HePDO monitoring unit. The MDFTs on the other hand were carrying out bi-weekly supervision to ensure proper recording of activities by the volunteers Both the monitoring and supervision had helped to identify some of the challenges that were faced by the volunteers especially during the first two weeks of active community engagement. Other than identify challenges, the monitoring was also crucial in ensuring that there were improvement in current and future management of outputs, outcomes and impact.

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Some of the PD volunteers been engage by Monitoring officer during monitoring visit

During the first monitoring visits conducted, it was found out that about 21 PDs were not very clear about first and second visits whilst 8 of them shaded wrongly the number of household visited in place of family members met. On the spot advice and guidance was carried out to remedy the situation. In the second and third monitoring visits there was marked improvement as no recording error was found from the data reviewed in the PDs files.

Graduation and certification of trained Positive Deviants Individuals (volunteers)

Following the completion of the three month pilot project in in 20 communities in the districts of Foni Bintang and Kansala, the Positive Deviants who were recruited and trained as communicators and advocates against FGM/C, were certified in a colorful ceremony. The graduation ceremony held at Kampant on the 1st of March 2018 was grace by the Child Protection Officer on behalf UNICEF Country Represented, Director of Regional Health Management Team WCR 2, Chairman, HePDO Board of Directors, National Assembly Member for Foni Kansala, the two District Chiefs and community members.

During the graduation ceremony several speakers highlighted the need for FGM/C to be abandon as it just a cultural practice but not ordain by any religion and above all it has severe impact on the health and wellbeing of the girl child.

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Cross section of the PD members during the Graduation and Certification ceremony

The Guest speaker on the occasion advised the graduating PDs and all those present that it is high time we change some of the cultural practices including FGM/C that harmful. She said FGM/C was considered as religious ordain but today research has shown that it is not part of our religion. Shen went on to say women who underwent the practice do encountered lot of pain especially during labour. She urged the people to desist form the practice.

Delivering a speech on behalf of the UNICEF Country Representative, Mr Eustace Cassell said Children are highly affected by the harmful traditional practices within their families and communities, sometimes including violence, abuse, and exploitation. He said an estimated 75 percent of Gambian women and girls between 15 and 49 years of age had undergone some form of FGM/C from 2004 – 2015, and 56 percent of girls aged 0 to 14 years old had undergone FGM/C between 2010-2015. The 2013 Demographic and Health Survey (DHS) indicated that the overall prevalence of FGM/C among women aged 15-49 years in The Gambia is 75 percent and higher among women in the rural areas at 79 percent, than in urban areas at 72 percent. According to him, the 2013 DHS has revealed that 66.8 percent of girls between the ages of 15 and 19 years, and 67 percent of women aged 45 to 49 years still believe that the practice should continue. The belief to have the practice continue is highest in Basse with 90% followed by Mansakonko 81.7% 38.5 percent in Banjul.



Right: The Guest speaker Mrs. Oumie Sisso and on the **Left:** Invited dignitaries

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In his address the National Assembly Member for the area told the graduating PDs that if they want to influence change, they must be seen to adopt the change been advocated for themselves. He went on to say though all his daughters were subjected to FGM/C because he didn't know the impact then but from now on if he is ever bless with a girl child again she will not be subjected to FGM/C. He also vowed that he will do whatever it takes to ensure that none of his younger brothers' daughters are subjected to FGM/C. Other speakers echoed similar sentiments and advocated strongly for FGM/C to be abandoned.

In his vote of thank one behalf of the graduating PDs, the Alaklo of Sibanorr a trained PD urged his colleagues to reach every household to encourage them disapprove the practice of FGM/C. He concluded by thanking UNCEF for funding the activity and implored them to have it supported for sustainability and scaling up. He also thank HePDO for leading the implementation and promised they as trained PDs will continue to advocate ending FGM in their communities as its responsibility entrusted on them

Summary of key outcomes of the activities

- The baseline information had served as a bench mark which will be used to determine if the PD intervention had an effect in making communities disapproved the practice of FGM/C and have it abolished in totality.
- The orientation meeting held with the district and village authorities had created an opportunity for a frank discussion on the impact of FGM/C on the girl. It had also built better understand for the communities which will enable them recognize the need for the elimination of FGM/C practice
- The training of Positive Deviant volunteers on a new behavioral change model had equipped them with knowledge and skills to effectively serve as communicators and advocates against FGM/C. It had also enable them to discuss and shared their experience on what have been seen or known about FGM/C and consequences on those who have undergone it. Another important achievement of the training was the information shared by the trainers had instilled among the trainees the zeal to work tirelessly in order to eliminate FGM/C practice in their communities.
- The house hold visits and face to face counselling had resulted in greater awareness of the dangers associated with FGM/C and as well as make communities felt that that stopping FGM/C practice is their own responsibilities since its continue practice will impact on their health and social development.
- The radio program had supported the activities of PDs as most of the individuals became aware of the efforts of UNCEF and other stakeholders are doing to eliminate the practice of FGM/C.

Key achievements of the PD pilot

A total of 77 Individuals are now trained and certified on the PD approach as Communicators and Advocates against FGM/C. These trained individuals are an asset to the intervention communities and can always serve as councilors and role model in the drive to end FGM/C. In addition within the three months period, they have been able to visit cumulatively a total of 3800 households and also met with 45491 **persons** on a face to face meeting. Instead of recruiting and focusing on 5 households per PD, each of the PDs have managed to reach almost all the households in their communities due to the enthusiasm they have in promoting the disapproval of FGM/C as a result of their knowledge on the negative effects of the practice. This community engagement has created a space for dialogue between community members and has raised the momentum of contemplation on the urgency to eliminate FGM/C practice.

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The project activities has also raised awareness level and built communities' confidence on the approached since the expected change of behaviour is driven and promoted by their own community members. Furthermore, as a result of this PD approach intervention, the issue of FGM/C can now be openly discussed regardless of the sensitive nature of the matter, this is a breakthrough and worth replicating in all other neighboring villages and districts country wide.

6. Constraint experienced:

At the beginning of the project implementation, identifying the right people especially among the men folk who were willing to be trained as Communicators and Advocates was a bit difficult due to sensitive nature of FGM//C and the cultural significance attached to it by most communities.

Furthermore, there was need for intense monitoring and supervision of the activities so as to ensure guidance and success given that this was pilot project. However limited resources affected the intense monitoring and supervision as HePDO has to rely on other project vehicles and thereby having to meet the cost of wear and tear of these vehicles which was not funded under this project.

Lastly another challenge which we feel can affect full compliance is the proximity of these communities to the border region of Cassamance. Those who resist change can easily cross with their children to Cassamance to have FGM/C perform on them. In view of this last challenge, we feel there is need for cross boarder dialogue between The Gambia and Senegal so that lasting solutions can be found.

7. Follow-up and priorities for this activity in the next quarter – if applicable:

There is need to continue funding and expanding PD approach as a model to influence behaviour if FGM/C is to be eliminated in Gambian communities where it is practice. This argument is premised on the fact that about 67% of women belief that the practice of FGM/C should continue. In view of the high number of women who belief that FGM/C should continue, there is need for strengthened and continue active community engagement in order to convince majority of women to disapprove FGM/C practice.

The already trained Communicators and Advocates against FGM/C will continue to promote the disapproval of FGM/C whilst other neighboring villages have expressed interest to have some of their member capacities to enable them conduct the same behavioral change activities. Thus there is need for continuity of support so that the already trained PDs can be supervised and monitored whilst new communities enroll into the program.

Amount requested: GMD1,065,614.00

Amount spent: GMD1,065,614.00

Balance: GMD 0.00

I certify that all supporting documents (receipts/invoices) amounting to Dalasi(s) **GMD1, 065,614.00** have been checked and kept in file.

Sincerely,



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Official stamp

Omar Malleh Ceesay, 2nd March 2018: (Executive Director)