



World Health
Organization

Addressing FGM in the Health Sector - Opinion Leaders and Social Network Mapping Among Sudanese Obstetricians

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FGM Situation in Sudan - a recap

- High FGM prevalence with severe typology
- Increasing trend of medicalization notably by midwives
- Reported re-infibulation in last 12 months is 23 – 31.2% among 15-39 years¹
- 61% of women after delivery experience tightening vulvar operations (including those without FGM) after delivery in 2 hospitals²

Why are we interested in Obstetricians?

- Primary carers of FGM complications in girls and women
- Respected and have an influential role within the health community and general population
- Directly supervise midwives who are the main cadre involved in FGM medicalization (primary and secondary/re-infibulation)
- However, they play a limited role in FGM prevention (primary and secondary) in work setting and community

Current Situation among Sudanese Obstetricians

- FGM KAP survey³ among Obs/Gyn indicated
 - High exposure to FGM complications (76%)
 - Not well equipped to provide FGM care (21%)
 - Few believe FGM has religious benefits (8%)
- Low scores on perceptions of their efforts to address FGM especially among Specialists⁴
- A late female Obs/Gyn specialist established a clinic to train other health care providers and conduct "Sunna" FGM

³ 2016 FGM KAP Survey among Obstetricians in Professional Annual Conference in Sudan

⁴ Modified REPLACE tool used for Obs/Gyn in 2017

Interventions focus based on findings

- Build knowledge and skills in FGM care
- Address values of FGM
- Change attitudes and initiate behavior change to provide FGM prevention services

To change
behavior and
attitudes we
need to
understand

- Who shapes Obstetricians' values/opinions on FGM and how to act/behave?
- How do Obstetricians network with each other within workplace and social circles?

Methods

- Short Questionnaire (4 items) was distributed to participants in The Obstetrics and Gynecology Society of Sudan annual conference :
 - *Whose opinion or advice would you most want to help to know about FGM prevention and care?*
 - *Whose opinion or advice would you most want to help to know about religion and FGM?*
 - *Whose opinion or advice would you most want to help to know about how to decline FGM request from community?*
 - *Which Health or non-health persons do you commonly interact with at work and socially*
- Data entered into excel
- Univariate analysis

Findings (1)

- Participants Profile (N=106)
 - Sex: Female (62%)
 - Age: 26 -34 years (48%), 35-43 years (25%)
 - Experience: under training (35%), specialists (41%)
 - Service: public (77%)

Findings (2)

	Top 3 Opinion shapers/Action influencers
FGM prevention and care	<ul style="list-style-type: none">• Specialists and consultants• Past Experience• Books/guidelines
FGM and religion	<ul style="list-style-type: none">• Religious leaders• Specialists/consultants• Religious text
How to decline request to perform FGM	<ul style="list-style-type: none">• National guidance• Specialists/consultants• Midwives/Other colleagues

Findings (3)

	Top 3 Opinion shapers/Action influencers
Interaction at workplace and social circles	<ul style="list-style-type: none">• Report interaction with health personnel at workplace (78% female, 75% male)• Report interaction with community in social circles (78% females/58% males)• Report interaction with health personnel in social circles (10% males/8% females)

Summary

- Obstetricians can potentially play an important role in FGM care and FGM prevention
- Existent evidence indicates limited role and preparedness to meet these tasks
- Assessment key findings from primary analysis
 - Specialists/consultants and national guidance to be are main shapers of opinions and skills
 - Obstetricians interact widely within workplace and social circles with different audience and can potentially have a high impact

Conclusion

- Findings may not be generalizable however most of prominent Obstetricians attend the meeting
- Programmatic interventions may need to focus on specialists/consultants and national guidance through
 - Skill building in FGM care and behavioral change communication
 - Sensitization to and wide dissemination of national guidance on FGM care and prevention
- Intersectoral collaboration between Ministry of Health and Ministry of Guidance on FGM to review and adapt WHO/UNICEF publications on FGM and Islam as references
- Next steps – conduct further analysis on data set

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