GETTING EVERYONE UP TO SPEED

UNFPA-UNICEF Joint Programme on FGM/C
A review of progress in 2016 and Phase II
Considerable progress has been made in gaining greater government support in the legal and policy arena. All 17 programme countries in Phase II now have a national coordination mechanism in place, and 12 countries have established budget lines to specifically address FGM/C, compared to only six at the start of Phase II.

Laws and policies are not designed simply for deterrence and punishment – they can also be a tool for advocacy and reinforcement of social norms. However, historically, even where laws against FGM/C were in place, few cases were reported and fewer were brought to court, undermining their effectiveness and allowing for impunity of offenders. The last few years have seen rapid progress in this arena, as captured in Figure 2.

By 2016, the Phase II target for services has been surpassed by more than a factor of two (Figure 3). In many countries, information on prevention of FGM/C has now been integrated into the curricula of schools, from grade schools through college. In some, prevention and care of survivors is part of medical, paramedical and social worker training programmes.

The provision of quality FGM/C-related services – including through health, education, social welfare, and law enforcement systems – carries multiple functions. It extends protection and care to women and girls who may be marginalized, disempowered, or suffering, and thus helps to right a global wrong. Training of service providers encourages greater understanding of and advocacy about the issue. And such services reinforce the new social norm that girls and women should remain intact.

As Figure 1 shows, by 2016, the Joint Programme had met or exceeded targets in key areas. All targets will likely be met by the end of Phase II. Importantly, in all 17 countries, management information systems have been developed to track and share data on FGM/C. These metrics of progress assist in achieving greater efficiency of operations, enhanced analysis and decision-making, and pave the way for a successful Phase III.
Some 25 million girls, women, boys, men and leaders in 18,756 communities have publicly declared to abandon FGM/C (Figure 4).

Community declarations – often celebrated with great fanfare and the participation of local and even national leaders – are key moments in the adoption of a new social norm. Declarations typically take place following months or years of patient work changing hearts and minds at the grass-roots level. They represent the culmination of a process of creating platforms for community discussion, providing credible information about the practice and the abandonment movement, and amplifying voices that support it. And they provide a powerful and palpable show of support for abandonment.

Phase III will continue to work for an end to FGM/C by 2030.

In line with target 5.3 of the Sustainable Development Goals, the Joint Programme will encourage intergenerational change, so that girls in the immediate term are kept intact and future generations of mothers are empowered to let their daughters remain uncut. It also aims to transform social and gender norms.

Phase III is specifically directed to women and girls who face a high risk of being affected by FGM/C in 16 countries. This phase of the Joint Programme aims to reach 8 million girls with preventative services and 4 million with protection and care related to FGM/C. In addition, more than 10,000 new communities, comprising approximately 23 million people, will be encouraged to participate in public declarations to abandon FGM/C across programme countries, helping to ensure that girls be spared from FGM/C.

The Joint Programme galvanized political will to end FGM/C through high-level panels and special events, and worked through its regional offices to gain a clearer understanding of the issues.

On the International Day of Zero Tolerance for Female Genital Mutilation, former United Nations Secretary-General Ban Ki-moon launched a new international symbol for FGM/C at a global advocacy event that received extensive media coverage, and generated significant social media traffic involving more than 1,000 tweets and about 20 million potential impressions.

At the regional level, new research and methodologies were piloted. The “building bridges” approach encouraged communication between communities of practice among diaspora communities and countries of origin. A two-day workshop resulted in commitments from parliamentarians across Africa to accelerate the elimination of FGM/C through national and regional activities.

A Ugandan parliamentarian who escaped FGM/C participated in a regional cross-border marathon in Kenya and Uganda (see cover shot), which gave hope to girls and women affected by FGM/C. More than 3,000 people took part, including high-level political and religious leader and prominent athletes from both countries.

**Programme Countries**
17 Ways to End FGM/C: Lessons from the Field

While the main 2016 Annual Report focused on quantitative results, this companion piece employed a narrative approach to examine in greater detail the challenges, complexities and achievements on the ground. It explores the innovative approaches that Joint Programme teams, local partners and advocates employ to deconstruct the social norms that allow FGM/C to persist in many communities and to build support for a new consensus.

1. FIND SILVER LININGS
2. ACCENTUATE THE POSITIVE
3. ORCHESTRATE LOCAL EFFORTS
4. BUILD UP SOCIAL CAPITAL
5. CREATE WEBS OF PROTECTION
6. SUPPORT COMMITMENTS
7. WORK FROM WITHIN
8. STAY OPEN TO OPPORTUNITIES
9. PUT IT ALL TOGETHER
10. IMPLEMENT SANCTIONS PROGRESSIVELY
11. END IMPUNITY
12. USE MEDIA CREATIVELY
13. BUILD BRIDGES
14. MAN UP
15. ENLIST TRIBAL ELDERS
16. POWER UP PARTNERSHIPS
17. WORK WITH THE GRASS ROOTS