

ACCELERATING CHANGE

# *by the numbers*



# 2016

Annual Report of the UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting: Accelerating Change



## ACKNOWLEDGEMENTS

UNFPA and UNICEF, on behalf of the UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting, wish to thank the people and governments that have contributed to this work.

Specifically, we thank the governments of Finland, Germany, Iceland, Ireland, Italy, Luxembourg, Norway, Sweden and the United Kingdom for their generous financial contributions. We also express our deep appreciation to the European Union, which joined the group of donors in 2016. And we acknowledge, with gratitude, the members of the Joint Programme's Steering Committee for their support and technical guidance throughout 2016.

Our appreciation is extended as well to each national and local government and to civil society organizations for their collaboration in accelerating the abandonment of FGM/C through their in-depth local perspectives and for their political support, without which the achievements in this report would not have been possible.

This report was produced by the Joint Programme Global Coordination Team: Nafissatou J. Diop, Mar Jubero, Berhanu Legesse and Stephanie Baric. We give sincere thanks for the support of Janet Jensen, consultant.

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on Female Genital Mutilation/Cutting: Accelerating Change**





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## ABBREVIATIONS

<b>ASRO</b>	Arab States Regional Office
<b>AU</b>	African Union
<b>CSO</b>	Civil Society Organization
<b>DHS</b>	Demographic and Health Survey
<b>ESARO</b>	East and Southern Africa Regional Office
<b>FGM</b>	Female Genital Mutilation
<b>FGM/C</b>	Female Genital Mutilation and Cutting
<b>GBV</b>	Gender Based Violence
<b>HQ</b>	Head Quarters
<b>MICS</b>	Multiple Indicators Cluster Survey
<b>SDG</b>	Sustainable Development Goals
<b>UN</b>	United Nations
<b>UNFPA</b>	United Nations Population Fund
<b>UNICEF</b>	United Nations Children’s Fund
<b>UN Women</b>	United Nations Entity for Gender Equality and the Empowerment of Women
<b>WCARO</b>	West and Central Africa Regional Office
<b>WHO</b>	World Health Organization



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# EXECUTIVE SUMMARY

As the largest global programme addressing FGM/C, the UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting: Accelerating Change plays a critical role in achieving Target 5.3 which calls for the elimination of all harmful practices by 2030, under the Sustainable Development Goal 5.

In 2016, the Joint Programme completed the third year of Phase II. Substantial progress was made across the three focus areas of intervention. All the countries supported by the Joint Programme have put in place a functional national coordination mechanism, and have continued to implement an integrated and comprehensive approach towards galvanizing the new social norm of keeping girls intact. Implementation in Yemen, however, was limited as a result of the dire political and humanitarian situations faced by the country.

Three important targets for Phase II have already been accomplished, along with other significant achievements, as outlined below.

## Policy and legal environment

Although no additional countries supported by the Joint Programme adopted legislation criminalizing female genital mutilation/cutting (FGM/C) in 2016, important progress has been made. This includes amendment of law to tighten the penalty on perpetrators (Egypt), endorsement of an amendment to the Criminal Act by introducing a new article criminalizing FGM/C by the Council of Ministers (Sudan), passage of the Children Act Amendment into law and a National Policy on Elimination of Gender Based Violence (GBV) that recognizes FGM/C as a form of GBV (Uganda), and adoption of bills that ban FGM/C and impose legal sanctions for perpetrators by the Council of Ministers on GBV and Reproductive Health (Mauritania). All these achievements resulted from many years of advocacy by national stakeholders, in collaboration with multiple actors and activists.

With action by Mauritania and Uganda, the number of countries establishing national budget lines to specifically address FGM/C increased from 10 in 2015 to 12 in 2016. As a result, this year, the Joint Programme has met and surpassed the overall target for this indicator.

During the year, 90 individuals were arrested, 253 cases of FGM/C were brought to court and 77 individuals were convicted. Countries are incrementally strengthening and improving the implementation of legislation on FGM/C – important steps towards ending impunity for perpetrators. The effort made in the Gambia to prosecute a case just two months after the introduction of legislation banning FGM/C is an encouraging step forward.

## Provision of quality services for protection and care

In 2016, more than 1.5 million (1,547,378) girls and women received services for protection and care related to FGM/C, bringing the total number of girls and women who have received services since 2014 to nearly 2.4 million. Thus, the target for Phase II has already been achieved.

## Galvanizing community movements towards social change

In 2016, more than 3,000 communities, involving nearly 8.5 million individuals, made public declarations of abandonment of FGM/C. This brings the total number of public declarations to more than 6,000, and the number of individuals reached to more than 18 million since the start of Phase II in 2014. In addition, more than 1,000 Egyptian families have declared abandonment of FGM.

## Regional dynamics to support countries efforts

In addition to providing technical support and facilitating programme implementation at the country level, UNFPA and UNICEF Regional Offices have continued activities at the regional level. Some of their initiatives include the following.

### *Regional and national networks of faith-based organizations (FBOs) in the Arab States*

A regional FBO network was operationalized during a regional meeting organized in Khartoum, Sudan. Four national FBO networks were also established – in Djibouti, Egypt, Somalia and Sudan. The networks help ensure solidarity among members, and align and reinforce efforts and ideas in support of the abandonment of FGM/C in the region.

### *Partnership with the Pan African Parliament in ending FGM/C*

More than 50 parliamentarians made commitments to support the acceleration of the elimination of FGM/C through regional activities. The parliamentarians identified five priority areas for commitment and collaboration: implementation, community engagement, legislation, policy advocacy and resource allocation. The Eastern and Southern Africa Regional Office is coordinating the partnership with the Pan-African Parliament.

### *Regional analysis of existing legal frameworks on FGM/C*

In 2016, a comprehensive regional analysis was conducted of the legal frameworks on FGM in eight countries, supported by the Joint Programme in the West and Central Africa Region. The analysis includes country profiles, a case study analysis of law reinforcement in Burkina Faso, and areas for further in-country research and concrete advocacy recommendations.



### *The FGM Cases' Tracking Tool*

A tracking tool was developed to address the challenge of effectively monitoring reported FGM cases. The tool promotes accountability during the reporting, investigation and prosecutorial stages of FGM cases. It also allows for authorities to track success stories where the girls were spared the practice due to proactive judicial mechanisms and alternatives to criminal prosecution, including injunctions, parental agreements and other effective methodologies. The information gathered by the tool will help to inform various stakeholders about where interventions are most needed, to ensure that FGM legislation is successfully implemented and the practice is eliminated. This is a joint initiative of UNFPA East and Southern Africa Regional Office, and Equality Now Africa Office.

### *Building Bridges between Africa and Europe to tackle FGM/C*

Led by AIDOS, the Building Bridges Initiative aims to increase the effectiveness of actions against FGM/C, and improve the living conditions of girls and women in Africa and Europe. This is done by building bridges between young people from CSOs, professionals (media, health, psycho-social, etc.) and communities from targeted African countries and migrant communities in Europe. Bridges are established by sharing good practices, strengthening links and adapting existing best practices in a mutual learning and exchange perspective.

### **Global strategic interventions**

In 2016, the Joint Programme has also collaborated with different partners on the following strategic initiatives:

#### *Development of the Training Manual on Gender and FGM and a policy note on strengthening the policy linkages between different forms of violence*

The training manual promotes the understanding of FGM/C as a harmful practice and a form of violence against women and girls. It will supplement the Manual on Social Norms and Change (developed by the Joint Programme in 2014). The policy note explores policy and programming interlinkages, and considers entry points to advance the shared objectives of ending FGM/C and other forms of violence against women and girls. The documents represent a collaboration between the Joint Programme and the United Nations Entity for Gender Equality and the Empowerment of Women.

#### *Guidelines on the management of health complications from FGM/C*

The Joint Programme partnered with the World Health Organization to develop new standards and guidelines, to enable health workers to provide comprehensive and quality prevention, care and protection services related to FGM/C. The Joint Programme funds was used to commissioned research, scoping exercises, expert group meetings and the production of the guidelines. A wide dissemination of the guidelines was done in 2016, including a launch at the Women Deliver Conference.

### *United Nations General Assembly resolution on FGM: “Intensifying global efforts for the elimination of female genital mutilation”*

The Joint Programme provided technical input for preparation of the resolution document adopted by the Third Committee (Social, Cultural and Humanitarian) of the General Assembly in 2016. The resolution (A/Res/71/168) welcomes the adoption of the 2030 Agenda for Sustainable Development and underscores the importance of eliminating FGM. It also calls upon the international community to strongly support, including through increased financial support, Phase III of the UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting.

### *UN Secretary-General report on FGM: Intensifying Global Efforts for the Elimination of FGM*

The Joint Programme provided technical input and actively participated in the preparation of the United Nations Secretary-General report on FGM in 2016. The report recognized the work being supported and undertaken by the UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting.

### *Development of a framework for measuring social norms change on FGM/C*

The Joint Programme partnered with experts from Drexel University (Philadelphia) on metrics for assessing programme communication and social change. The aim is to assemble methodologies for tracking change and to develop a measurement framework. The framework will serve as a reference for other areas of work, most notably child marriage and violence against children. In 2016, a desk review was undertaken, and a participatory workshop was organized that brought together global experts to review the initial draft summary of the Drexel team’s findings and provide inputs for the development of the draft framework.

### *Value-for-money assessment*

The Joint Programme collaborated with the Department for International Development (United Kingdom) in its value-for-money assessment at global and country levels. The exercise aimed to assess value for money of the targeted and enabling elements of the programme, and to develop a framework to improve measurement of results and effectiveness. The assignment will be completed in early 2017, and the findings and recommendations will inform the next phase of the Joint Programme.

For the first time, in 2016, the Joint Programme’s annual report includes profiles of each of the countries (except for Yemen). The profiles present facts about the national context, summarize key achievements, and share operational and financial information. These profiles outline key aspects of operations, and the reports generated by the countries themselves discuss the details of strategic interventions adapted to each local context.

An additional innovation of the 2016 annual report is the companion booklet, *17 Ways to End FGM/C*, which uses a narrative style to examine the achievements, challenges and

complexities of this work in more detail. It explores the innovative approaches that enable national partners and communities to deconstruct the social norms that allow FGM/C to persist in many communities. It also shows the lengths that teams go to, and the many relationships they forge, to respond to the specific situations they encounter, and the various cultural meanings and attitudes that hold the practice in place.

The year 2017 marks the end of Phase II. Throughout the year, the Joint Programme will redouble its efforts to finalize implementation of Phase II. This will include in-depth reflection on the approach and effectiveness of the Joint Programme, and development of a programme document for Phase III (2018-2021), as requested by the United Nations General Assembly.

Other key focus areas for 2017 include finalizing the social norms change framework, completing the value-for-money assessment and using it to inform the way forward, and strengthening engagement with regional political bodies to enhance political mobilization and commitment towards the elimination of FGM/C.

## Conclusion

Much has been learned and accomplished in the first two phases of the Joint Programme. We look forward to applying this learning and enlisting our network of strengthened partnerships for an accelerated push in Phase III. The aim is to ensure that all girls are spared from the cut by 2030 at the latest, as called for by the Sustainable Development Goals.

None of our 2016 accomplishments could have been achieved without the financial contributions and technical guidance of our Steering Committee, and the generous support of the governments of Finland, Germany, Iceland, Ireland, Italy, Luxembourg, Norway, Sweden and the United Kingdom. We are very grateful to them and to the European Union, which joined the group of donors in 2016.



Float ride against FGM/C in Nigeria  
© Kori Habib



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# INTRODUCTION

Since 2008, UNFPA (the United Nations Population Fund) and UNICEF (the United Nations Children's Fund) have worked together to implement the Joint Programme on Female Genital Mutilation/Cutting: Accelerating Change. Phase II (2014-2017) of the Joint Programme works with governments, civil society, communities and individuals to accelerate abandonment of female genital mutilation/cutting (FGM/C) in 17 countries. It also supports regional and global initiatives towards this end. As the largest global programme addressing FGM/C, the Joint Programme plays a critical role in achieving Target 5.3, which calls for the elimination of all harmful practices by 2030, under the Sustainable Development Goal 5.

FGM/C is recognized internationally as a violation of the human rights of girls and women. It reflects deep-rooted inequality between the sexes and constitutes an extreme form of discrimination against women. It is nearly always carried out on minors and is thus a violation of the rights of children. More than 200 million girls and women have experienced FGM/C in 30 countries across three continents, the vast majority in Africa and the Middle East.<sup>1</sup> As many as 30 million girls are at risk of being cut over the next decade should current trends persist.

Despite these alarming numbers, girls in countries where FGM/C is prevalent are about a third less likely to be cut than 30 years ago. Trend data show that the practice is becoming less common in more than half of the 29 countries with available data. In countries such as Burkina Faso, Guinea and Mali—three countries with high prevalence rate—prevalence has fallen significantly among younger women.<sup>2</sup> As an example, in Burkina Faso, 5 per cent of girls aged 0-4 years (the age range when cutting is most likely to take place) have undergone FGM/C, compared with 89 per cent of women aged 45-49 years.<sup>3</sup> The low prevalence rate among young girls suggests that abandonment of FGM/C is under way.

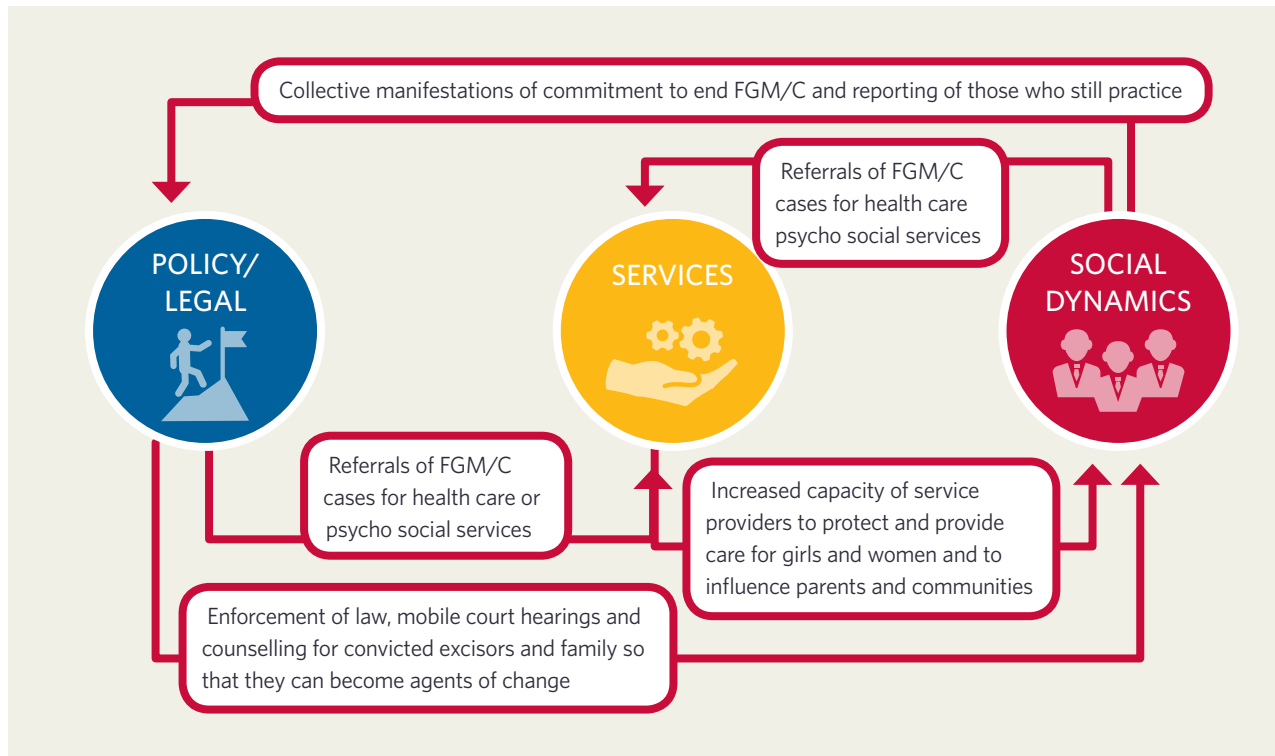
Even where the practice continues, attitudes are changing. The majority of women and girls in countries with high prevalence rates, such as Djibouti, Egypt, Eritrea, Ethiopia and Somalia, believe that FGM/C should end. Information on the attitudes of men and boys towards FGM/C is available in 16 of the 29 countries where the practice is concentrated. In nine of these countries, the majority of men and boys favour abandonment. Shifting attitudes towards the practice present an opportunity for the international community, through the Joint Programme, to effectively reduce and eliminate FGM/C as a complex and deeply rooted social norm.

<sup>1</sup> [https://www.unicef.org/media/files/FGMC\\_2016\\_brochure\\_final\\_UNICEF\\_SPREAD\(2\).pdf](https://www.unicef.org/media/files/FGMC_2016_brochure_final_UNICEF_SPREAD(2).pdf)

<sup>2</sup> UNICEF, *Female Genital Mutilation/Cutting Country Profiles: 2016*

<sup>3</sup> Burkina Faso Demographic and Health Survey, 2010

**FIGURE 1: INTERLINKAGES AND FEEDBACK LOOPS FOR SOCIAL NORM CHANGE**



BY THE NUMBERS

### Theory of change

The strategic underpinning of Phase II is the theory of change, which focuses on prevention of FGM/C by galvanizing a new social norm, while also addressing the needs of girls and women who suffer the consequences of the practice. The Joint Programme’s Results Framework distils the holistic, integrated and multisectoral approach into three linked, interactive and mutually reinforcing outcome areas: the law and policy arena, services provision, and activities in the social sphere to galvanize a new norm of leaving girls intact (Figure 1). These three areas work individually and synergistically to galvanize a new social norm of leaving girls intact.

Several drivers of FGM/C also relate to violence against girls and women, child

marriage, and other forms of gender-based violence. The Joint Programme recognizes that efforts undertaken to further the abandonment of FGM/C require simultaneously addressing other human rights violations.

As a result, integrating FGM/C provisions into child protection systems, and sexual and reproductive health services strengthens the overall aim of prevention, protection and care. The Joint Programme’s theory of change also includes pursuing strategic actions at the regional and global levels. When countries see that others are committed to ending FGM/C, and are supporting policies and action accordingly, they are more likely to adopt similar policies.

Major regional and global platforms and mechanisms, including the Summits of the African Union, the United Nations General Assembly, the United Nations Commission on the Status of Women, and the Human Rights Council, provide mechanisms for dialogue on these issues among Member States. Commemoration of the International Day of Zero Tolerance for Female Genital Mutilation further bolsters commitments for keeping girls intact across countries.

The Joint Programme contributes to these platforms through the preparation of reports on FGM/C by the United Nations Secretary-General and by providing technical assistance to Member States for the drafting of relevant resolutions. It also supports Member States in organizing high-level events to enhance the visibility of commitment and actions to end FGM/C. Additionally, the Joint Programme works with regional and international media to amplify the impact of these platforms and mechanisms through extensive media coverage.



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# OVERALL PERFORMANCE ANALYSIS

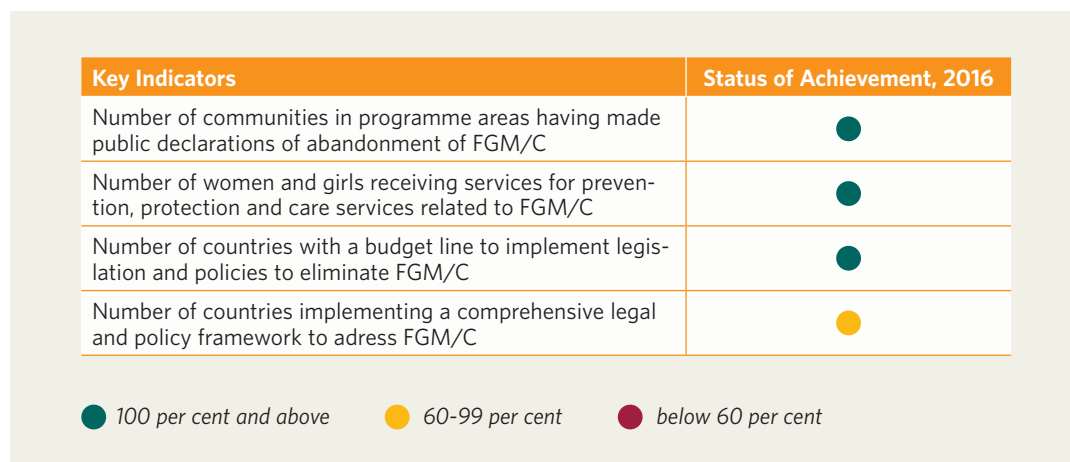
## Summary of key indicators

In 2016, the Joint Programme made significant advances in meeting planned targets for the key programme indicators. As outlined in Figure 2, the programme has already met and surpassed targets for all key indicators, except for the indicator relating to implementing a comprehensive policy and legal framework. Strikingly, for the indicator pertaining to the number of girls and women receiving FGM/C-related services, the programme's achievement is more than double the initial projection. The programme is close to meeting its planned target for the indicator on legal and policy framework.

### 1. Programme countries enact legal and policy frameworks for eliminating FGM/C which are appropriately resourced and implemented (in line with African Union and United Nations resolutions)

As shown in Figure 3, which presents the yearly results for this indicator since 2013, 11 Joint Programme-supported countries had legal and policy frameworks in place to address FGM/C in 2014. In 2015, legislation was enacted in Nigeria and Gambia, raising the total number of countries to 13. The situation in 2016 remained unchanged. Mali, Somalia, Sudan and Yemen have not yet developed and/or enacted legislation to address FGM/C. Although Mauritania has

**FIGURE 2: PROGRAMME PERFORMANCE FOR KEY INDICATORS**



legislation in place, it has been considered weak by the Convention on the Elimination of all Forms of Discrimination Against Women committee. Although there is no national-level legislation on FGM/C in Sudan, there is state level law in four states (South Kordofan, South Darfur, Gedaref and Red Sea).

Considering that, at baseline (2013), only 10 countries had legal and policy frameworks to address FGM/C, overall, the Joint Programme is on track to meet the target (15 countries). To achieve this target, at least 2 additional countries need to adopt legal frameworks to address FGM/C in 2017.

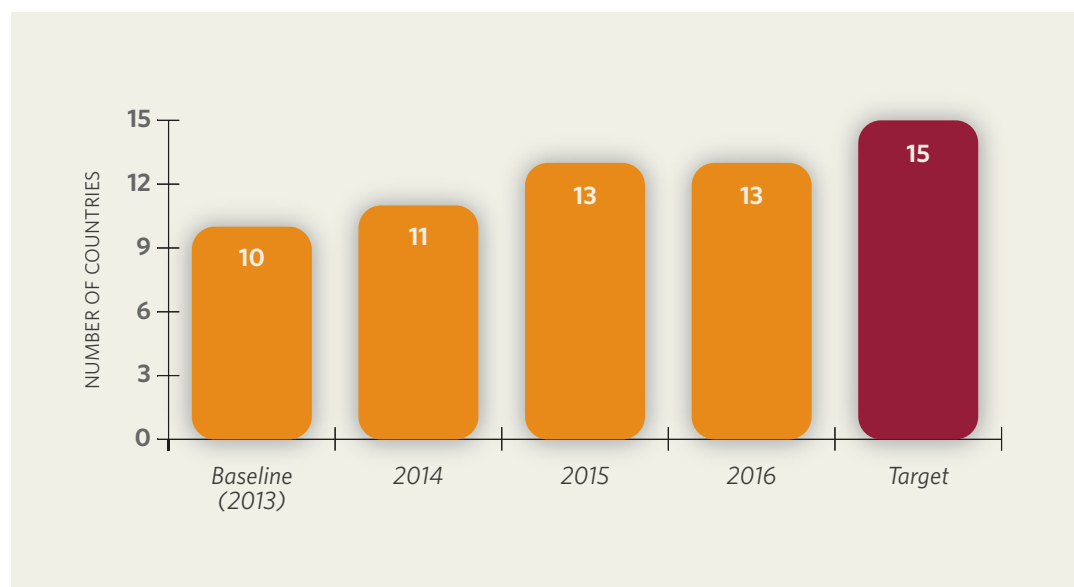
In 2016, a total of 90 individuals were arrested, 253 cases of FGM/C were brought to court, and 77 individuals were convicted, as outlined in Figure 4. Overall instances of enforcement significantly decreased from 2015 to 2016. Whereas 498 arrests were made in 2015, this number dropped to 90 in 2016. On the

positive side, however, 2016 saw more cases being brought to court and more convictions than in the previous year—figures for these sub-indicators have almost doubled. In addition that not all countries have been able to put in place a mechanism to fully and systematically track cases of enforcement. Hence, the reported achievements might be underestimated. Efforts are under way to improve the reporting mechanism.

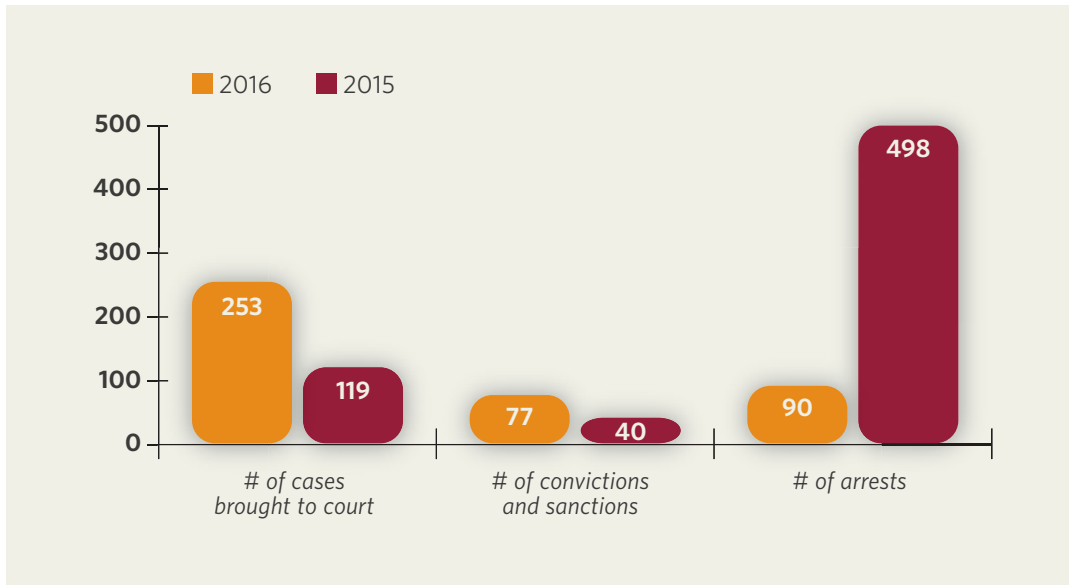
***Availability of a budget line to implement legislation and policies to eliminate FGM/C***

Considering that, at baseline (2013), only six countries had established budget lines to address FGM/C, the Joint Programme has made considerable advances on this front. As shown in Figure 5, the number of countries with budgetary provisions to implement legislation and policies to eliminate FGM/C increased to 10 in 2014. In 2016, FGM/C-related budget

**FIGURE 3: AVAILABILITY OF A COMPREHENSIVE LEGAL FRAMEWORK FOR ADDRESSING FGM/C, 2013-2016**



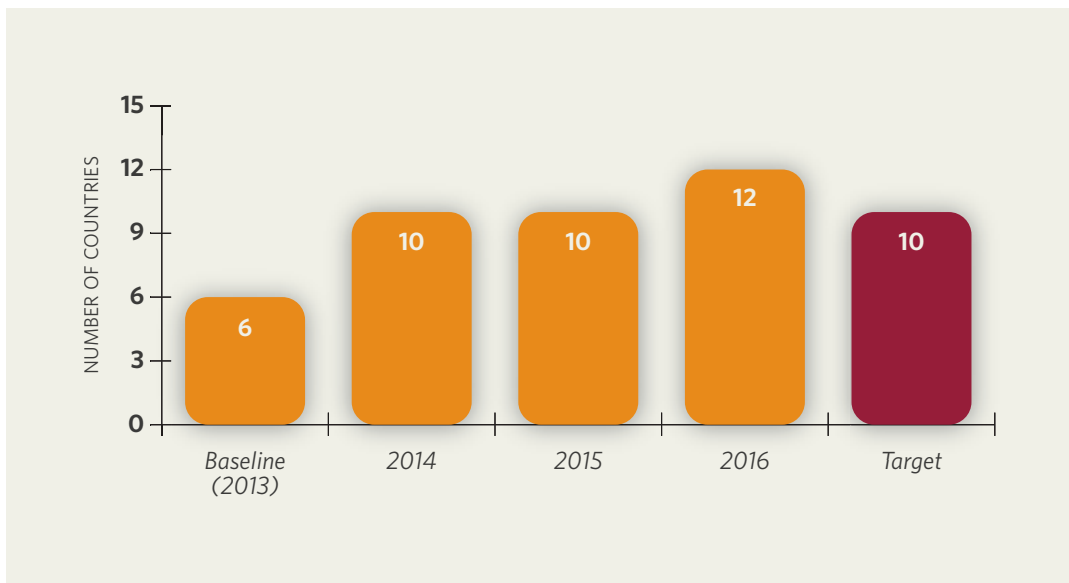
**FIGURE 4: NUMBER OF ARRESTS, CASES BROUGHT TO COURT, CONVICTIONS AND SANCTIONS, 2015 AND 2016**



lines were introduced in Mauritania and Uganda, raising the number of countries with FGM/C-related budgetary allocations to 12.

As a result, this year, the Joint Programme has met and surpassed the overall target for this indicator.

**FIGURE 5: AVAILABILITY OF A GOVERNMENT BUDGET LINE TO ADDRESS FGM/C, 2013-2016**





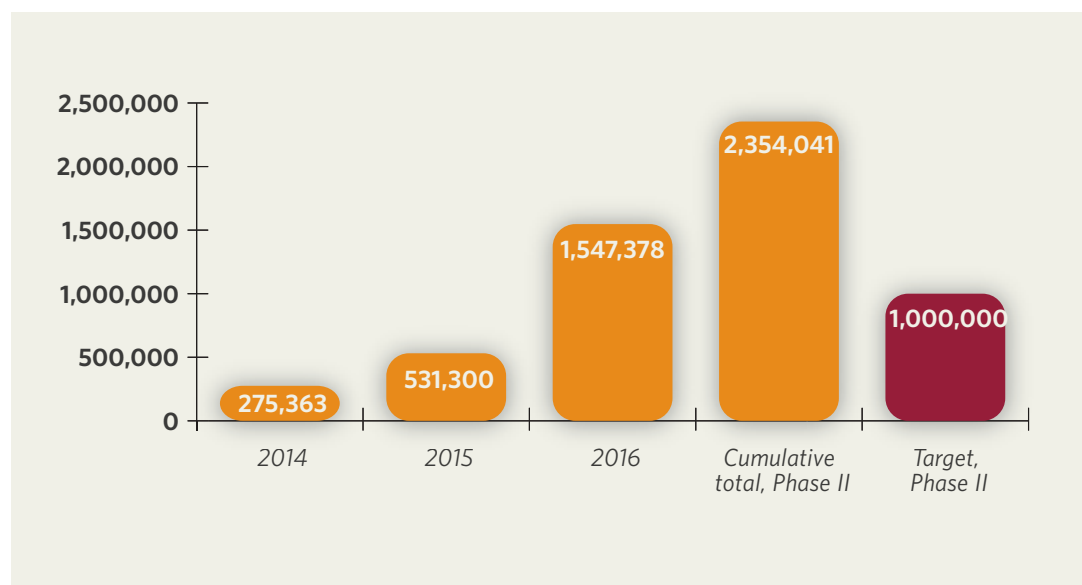
*On the positive side, however, 2016 saw more cases being brought to court and more convictions than in the previous year—figures for these sub-indicators have almost doubled.*

## 2. Service providers provide timely, appropriate and quality services to girls and women at risk of, or having experienced, FGM/C in selected districts in programme countries

In 2016, a total of 1,547,378 girls and women received services for protection and care related to FGM/C across 15 countries supported by the Joint Programme. As seen in Figure 6, service provision almost tripled in 2016 compared with the previous year. Since the start of

Phase II of the Joint Programme in 2014, a total of 2,354,041 girls and women have benefited from Joint Programme-supported FGM/C-related services. Thus, in 2016, the Joint Programme surpassed the target for this indicator (1,000,000 girls and women). Service provision is an intervention area introduced into the Joint Programme in Phase II, and defining and tracking the indicator is still evolving. This is partly the reason for the wide annual variation.

**FIGURE 6: NUMBER OF GIRLS AND WOMEN RECEIVING SERVICES RELATED TO FGM/C PROTECTION AND CARE, 2014-2016**

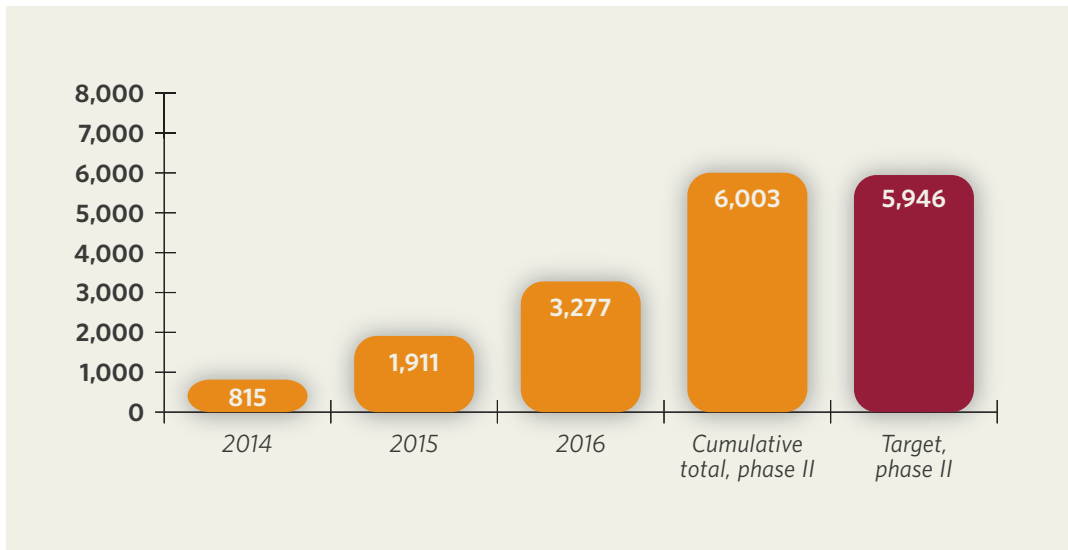


### 3. A majority of individuals, families and communities in programme areas accept the norm of eliminating FGM/C

As shown in Figure 7, a total of 3,277 communities across 14 countries made public declarations of support for abandonment of FGM/C in 2016. An

additional 1,080 families in Egypt also made such declarations. Community declaration is the culmination of a process that includes continuous engagement with communities to build awareness and acceptance of the norm of keeping girls intact. In Senegal in 2016, 170 communities engaged in a process of FGM/C abandonment, and 184 villages

**FIGURE 7: NUMBER OF COMMUNITIES IN PROGRAMME AREAS HAVING MADE PUBLIC DECLARATIONS OF ABANDONMENT OF FGM/C, 2014-2016**



Girls in a school with slates of messages against FGM/C and Child Marriage in Mali © UNICEF Mali, Balanzan Pixel

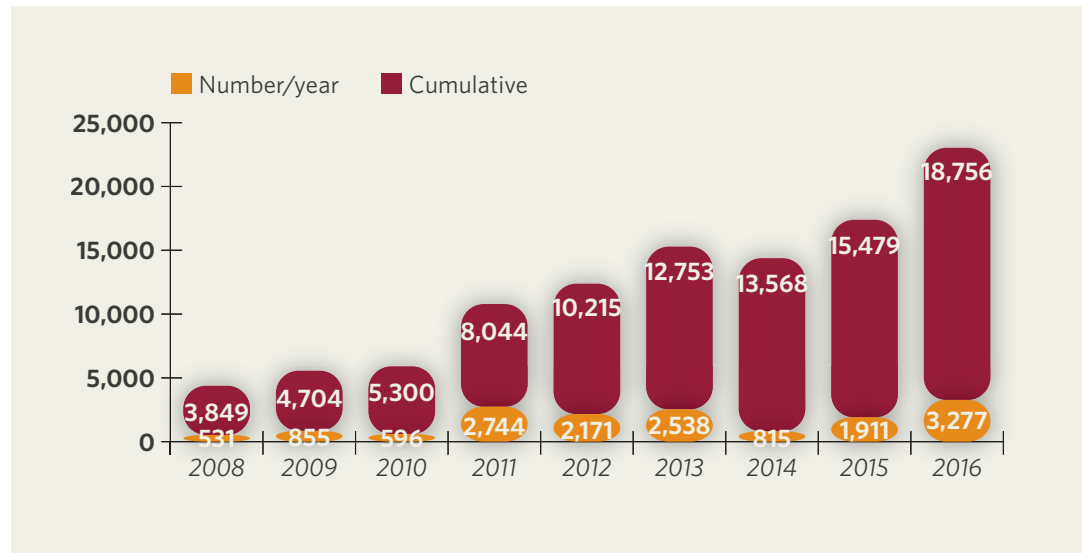
participated in social mobilization activities. These efforts are expected to lead to public declarations in 2017.

Overall, there was a 71 per cent increase in the number of communities making public declarations of abandonment from 2015 to 2016. Considering the cumulative achievements of Phase II so far, a total of 6,003 communities have made public declarations of abandonment (see Figure 7).

As shown in Figure 8, since the Joint Programme’s inception in 2008, a total of 15,438 communities have made public declarations of abandonment.

A total of 8,498,528 individuals were involved in community declarations of abandonment in 2016. Compared with the previous year, this represents an increase of roughly 72 per cent in outreach. Globally, 18,431,220 individuals have been involved in public declarations of abandonment since the start of Phase II, bringing the total number since the start of the Joint Programme in 2008 to 25,431,220 people.

**FIGURE 8: NUMBER OF COMMUNITIES IN PROGRAMME AREAS HAVING MADE PUBLIC DECLARATIONS OF ABANDONMENT OF FGM/C, 2008-2016**





Community Sensitization on FGM/C in Senegal © UNICEF Senegal – Ricci Shryock



UNFPA Uganda Officer Dr Akinyele Dairo signs the certificates of participation to be handed over to winners of the FGM marathon  
© UNFPA /Evelyn Kiapi



# GLOBAL PROGRESS

## Galvanizing global support for continued momentum and intensified efforts to address FGM/C



*Launching of a new international symbol and call for action on FGM*

Mr. Ban Ki-Moon, United Nations Secretary-General, launched a new international symbol for FGM/C with the following statement to the global community: “Let’s use this symbol to demonstrate our commitment and dedication to eliminating FGM by 2030!”

The launch of the symbol took place at a global advocacy event organized by the Joint Programme for the International Day of Zero Tolerance for Female Genital Mutilation under the theme “Together, mobilizing to contribute to the achievement of the new global goals through the elimination of female genital mutilation by 2030”. The event received extensive media coverage, and generated

significant social media traffic involving more than 1,000 tweets and about 20 million potential impressions.

## *First Lady of Burkina Faso—Goodwill Ambassador for the Global Elimination of FGM/C*

The First Lady of Burkina Faso, Mrs. Sika Bella Kaboré, accepted the role of Goodwill Ambassador for the Global Elimination of FGM/C during the high-level panel discussion “Eliminating FGM: a key step in achieving the Sustainable Development Goals” at the sixtieth session of the Commission on the Status of Women.

The event focused on galvanizing political will by providing a platform for increasing the visibility of member states committed to ending FGM; facilitating the exchange of experiences and discussion on successful strategies for eliminating FGM/C; and expanding awareness on the key linkages between eliminating FGM/C,



*Ba Ki-Moon, while serving as a Secretary General in 2016, speaking at the International Day of Zero Tolerance for Female Genital Mutilation*  
© UNFPA

The First Lady of Burkina Faso  
Mrs. Sika Bello Kaboré, Goodwill  
Ambassador for the Global  
Elimination of FGM/C



© UNFPA

women's empowerment and the entire Sustainable Development Goals agenda.

***Broadway Singers Engagement:  
“The time is now to end harmful  
practices against women and girls”***

The second high-level event that was organized for the sixtieth session of the Commission on the Status of Women was based on the theme “The time is now: a call to end female genital mutilation, child marriage and son selection by 2030”. The event was attended by hundreds

of people, including senior United Nations representatives, representatives of governments and civil society organizations, advocates and activists, religious leaders, renowned celebrities and artists, and survivors of FGM/C and child marriage. During the event, three women shared their moving personal experiences with harmful practices. The event also attracted strong media coverage

Ashley Judd—actor and activist, and a UNFPA Goodwill Ambassador—Grammy-winning singer Michael Bolton, and



***During the International Day of Zero Tolerance for Female Genital Mutilation, singer Inna Moja from Mali shared her experience of FGM/C: “I lost my identity when I went through FGM/C. I didn’t know who I was. I didn’t know***

***what my place was in society. I didn’t know my strength, I felt like being cut meant I wasn’t good enough. I had all these questions. Music helped me to heal.”***

Inna Modja, Singer and Activist from Mali at the International Day of Zero Tolerance 2016

© Pacific Pre/REX/Shutterstock



***What I think we at the United Nations are trying to do for girls is to create a safe space in which they can move with freedom, without constraint, with bodily integrity, with sexual autonomy, with economic empowerment and with mental freedom and spiritual wisdom.***

*Asheley Judd, Actor and Activist, UNFPA's Goodwill Ambassador, at the International Day of Zero Tolerance 2016*  
© UNFPA, Runa A

Grammy-nominated singer Raheem DeVaughn shared powerful messages about the impact of harmful practices on the lives of girls and women, as a violation of their rights.

### **Policy note and training module on FGM/C: a supplement to the Manual on Social Norms and Change**

A policy note and background paper were completed in 2016. The policy note was "Female genital mutilation/cutting and violence against women and girls: strengthening the policy linkages between different forms of violence", and the background paper was "Finding convergence in policy frameworks: a background paper on the policy links between gender, violence against women and girls, and female genital mutilation/cutting". These documents presented policy and programming interlinkages and explored entry points in (i) national legislation, (ii) prevention strategies, (iii) response for survivors, and (iv) data and evidence, for increased coordination and collaboration to advance the objectives of

ending FGM, and other forms of violence against women and girls. A training module, "Gender and female genital mutilation/cutting", was also finalized as a supplement to the *Manual on Social Norms and Change* developed by the Joint Programme in 2014. These documents were produced by UN Women based on the request of, and with funding from, the Joint Programme.

### **Normative Reforms**

The Joint Programme provided technical contributions and inputs for the following two global-level normative developments in 2016.

#### ***United Nations General Assembly Resolution on FGM, 2016***

With support from 130 co-sponsors, the Third Committee (Social, Cultural and Humanitarian) of the United Nations General Assembly adopted a resolution titled "Intensifying global efforts for the elimination of female genital mutilation", A/Res/71/168. By this resolution, the General Assembly welcomed the adoption

Grammy-winning singer Michael Bolton (left) and Grammy-nominated singer Raheem DeVaughn were among the musical guests who performed during the event



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of the 2030 Agenda for Sustainable Development and underscored the importance of its implementation with respect to eliminating FGM. The resolution also calls upon the international community to strongly support, including through increased financial support, a third phase of the UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting. The resolution acknowledges that intensification of efforts is urgently needed for the elimination of FGM/C. It acknowledges the importance of considering the issue in efforts to achieve the Sustainable Development Goals by 2030, since elimination of FGM/C is one of the targets.

### *Report of the Secretary-General on FGM*

United Nations Resolution 69/150 requires the Secretary-General to submit an in-depth multidisciplinary report on FGM/C to the General Assembly 71st session. The report was to include the root causes of FGM/C and factors contributing to the practice, and its prevalence worldwide, including evidence and data. Accordingly, the Secretary-General submitted a report on "Intensifying global efforts for the elimination of FGM/C" to

the 71st session. The Joint Programme provided technical input to the report, which highlights the contribution of the Joint Programme through its support to the 17 countries and lessons learned from the various interventions.

### **Programme Management and Coordination**

The Joint Programme continues to refine its results management framework, including strengthening the capacity of stakeholders in monitoring and evaluation. In 2016, the Joint Programme completed capacity building for a wide range of government and civil society partners, Joint Programme regional and country office focal points, and Joint Programme monitoring and evaluation staff on the results framework and the online Di-Monitoring platform. The Di-Monitoring platform was developed to systematically document and track progress against indicators defined in the results framework.

The Joint Programme has collaborated with the Department for International Development in the United Kingdom



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*Sheilla Akwara, Monica Singh and Kakenya Ntaiya shared their personal experiences with harmful practices at the Time is Now event*

in undertaking its value-for-money assessment of the Joint Programme at global and country levels. The exercise aims to make a value-for-money assessment of the targeted and enabling elements of the programme, and develop a framework to improve measurement of results and effectiveness. It will be completed in 2017, and the findings and recommendations will be used to inform the next phase of the Joint Programme.

The 8th Annual Consultation for the Joint Programme took place on 18-20 April 2016 in Nouakchott, Mauritania. It was attended by about 50 UNFPA and UNICEF focal points for the Joint Programme from 16 countries, regional advisers from three regions, and the global-level Joint Programme coordination team. Annual consultation is a forum and opportunity to exchange experiences, share best practices and have joint reflection on the overall achievements and challenges encountered in the implementation of the Joint Programme. The consultation was followed by a technical meeting between the Joint Programme team and steering committee members, bilateral meetings with national partners, and a field visit to look at how the programme is being

implemented at the community level in Mauritania.

### **Measurement of Change in Social Norms**

The Joint Programme partnered with Drexel University, Philadelphia, to develop a framework to measure change in social norms. This global framework will be accompanied by conceptual definitions of key constructs that comprise social norms; operationalization of the key constructs; and means of verification, including qualitative, quantitative and participatory tools to measure change in social norms. The framework will serve as a reference for other areas of work, most notably child marriage and violence against children.

In 2016, following a desk review of social norms change by Drexel University, academic experts were brought together in a workshop to review findings of the desk review and provide inputs for a draft measurement framework. The framework will be finalized in 2017.

# REGIONAL PROGRESS

In addition to providing technical support and facilitating programme implementation at the country level, UNFPA and UNICEF Regional Offices have undertaken strategic interventions at regional level. These regional level initiatives are summarized and presented below.

## Creation of regional and national networks of faith-based organizations in the Arab States

A regional faith-based organization (FBO) network was operationalized during a regional meeting organized by UNPFA Arab States Regional Office in Khartoum, Sudan. It was attended by councils and members of the FBOs, the Ministry of Guidance and Endowments of Sudan, regional bodies such as Al-Azhar and the Coptic Orthodox Church, regional organizations, and United Nations agencies (UNFPA, UNICEF and the World Health Organization). Four national FBO networks were also established (Egypt, Sudan, Djibouti and Somalia),

and their key messages and activities were developed during the meeting. The networks play an important role in ensuring solidarity among members, and aligning and reinforcing efforts and ideas in support of the abandonment of FGM/C in the region.

## Partnership with the Pan African Parliament in ending FGM

More than 50 parliamentarians made commitments to support the acceleration of the elimination of FGM/C through national and regional activities. The parliamentarians identified five priority areas for commitment and collaboration: implementation, community engagement, legislation, policy advocacy and resource allocation. They also defined key action areas for each of the priorities. This was an outcome from a two-day workshop organized by the Pan African Parliament and the UNFPA Eastern and Southern Africa Regional Office on the “The role of women parliamentarians on ending FGM/C and child marriage”.





## ***More than 50 parliamentarians made commitments to support the acceleration of the elimination of FGM/C through regional activities.***

### **Support of the development of the 2016 East African Community (EAC) Gender Equality and Development Bill 2016.**

The Gender Bill seeks to ensure that there is gender equality, protection and development in the community. A joint consultative memorandum was presented by the Anti-FGM Board of Kenya to the EAC advocating for integration of prohibition of FGM/C into the Gender Bill. The aim is to promote regional cooperation in the prosecution of perpetrators of FGM/C, and develop common measures, strategies and programmes for the effective enforcement of legislation on FGM/C. Once enacted, the regional gender law is expected to enhance regional cooperation in efforts to prosecute perpetrators of FGM/C.

### **Regional cross-border marathon to advocate for the acceleration of the abandonment of FGM/C**

Cross-border initiatives are important in a context where there are neighboring communities practicing FGM from different countries as bringing change in such a situation requires collaborative engagement among the countries in a more systematic and coordinated manner.

A Ugandan parliamentarian who escaped FGM/C participated in a regional cross-border marathon in Kenya and Uganda,

which gave hope to young girls who may be at risk for FGM/C. The event engaged more than 3,000 people, including high-level political and religious leadership from the two countries, prominent athletes from Uganda and Kenya, and a wide range of community representatives. The marathon was widely covered by local, national and regional media. This initiative between the 2 countries was coordinated by the UNFPA Eastern and Southern Regional Office.

### **Regional analysis of the existing legal frameworks on FGM/C**

Comprehensive regional analysis led by UNFPA West and Central Africa Regional Office was conducted in 2016 of the existing legal frameworks on FGM/C in eight countries supported by the Joint Programme in the West and Central Africa Region. The analysis includes country profiles, identifies areas for further in-country research and suggests concrete advocacy recommendations. Given its strong experience in law reinforcement on FGM/C, Burkina Faso was selected as a case study for the analysis.

### **FGM Cases' Tracking Tool**

A tracking tool was developed to address the challenge of effectively monitoring reported female genital mutilation (FGM) cases and evaluating anti-FGM laws,



***Cross-border initiatives are important in a context where there are neighboring communities practicing FGM from different countries as bringing change in such a situation requires collaborative engagement among the countries in a more systematic and coordinated manner.***

using a multisectoral approach. The tool promotes accountability in the reporting, investigation and prosecutorial stages. It also allows authorities to track success stories where the girls were spared the practice as a result of proactive judicial mechanisms and alternatives to criminal prosecution, including injunctions, parental agreements and other effective methodologies. The information gathered by the tool will inform various stakeholders about where interventions are most needed, to successfully implement FGM legislation and eliminate the practice. A capacity-building meeting about the tool was organized, and 30 representatives from government, civil society organizations (CSOs), faith-based

organizations, and networks of men and boys took part. Partners from Eritrea, Ethiopia, Kenya, Tanzania and Uganda were also involved. Moving forward, country teams developed detailed action plans and committed themselves to finalize and roll out their plans. This is a joint initiative of UNFPA Eastern and Southern Africa Regional Office, and Equality Now Africa Office.

### **Building Bridges between Africa and Europe to Tackle FGM/C**

AIDOS implemented 'Building Bridges between Africa and Europe to Tackle FGM/C' in partnership with AMSOPT (Mali), Equipop

Pan African  
Parliamentarians  
taking 5 priority  
actions to  
eliminate FGM  
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(France), GAMS Belgique (Belgium), Mwangaza Action (Burkina Faso) and UMWA (Uganda). The initiative is supported by the UNFPA-UNICEF Joint Programme on FGM/C <http://www.aidos.it/>.

The Building Bridges Initiative aims to increase the effectiveness of actions against FGM/C, and to improve the living conditions of girls and women in Africa and Europe by building bridges between young people from CSOs, professionals (media, health, psychosocial, etc.) and communities from targeted African countries and European migrant communities. Bridges are built by sharing good practices, strengthening links, and adapting existing best practices in a mutual learning and exchange perspective.

In the framework of this project, two main components have been implemented in 2016:

**Filming the bridge: youth dialogue gets viral** is aimed at fostering mutual dialogue among young people from the targeted African and European countries. Through dialogue, they can develop tools to raise awareness and advocate to decision makers about the role that the diaspora, and African communities and people can play in ending the practice. The activity includes two training sessions that address 30 people in total, including young people from migrant communities in Europe. The young people worked together on a video and were involved in every step of the production (casting, script, shooting, editing, etc.). The participants experienced the different roles that are required on a set, and joined forces to increase their commitment to end FGM/C. The result is a 10-minute long movie<sup>4</sup>. The second training will be held in July 2017 in

Uganda, and will involve young people from Cape Verde, Egypt, the Gambia, Guinea Bissau, Kenya, Nigeria, Somali, Sudan, Togo and Uganda, who are residing in either Europe or Africa.

**Mutual learning** promotes psychosexual care for women and girls who are affected by FGM/C. This component involved setting up a **Community of Practice (CoP)** <https://copfgm.org/>, in line with the new World Health Organization (WHO) guidelines that were released in May 2016. The WHO document advises professionals to recommend treatment for depression and anxiety disorders, in addition to treating the physical consequences of FGM/C. The guidelines also suggest that professionals provide, or enable access to, services and information relating to female sexual health, including counselling and education. In the Building Bridges Initiative, one European and one African professional have moderator roles.

### **Baseline study on measuring child protection outcomes in Senegal**

The study, "Measuring Child Protection Outcomes in Senegal: a Population-based Survey in Pikine and Kolda Departments", was conducted by Columbia University in close collaboration with the UNICEF West and Central Africa Regional Office and the Senegal Country Office. It piloted a population-based methodology to measure child protection outcomes, and set baseline values of prevalence and social norms in two rural areas of Senegal. Particularly notable is the study's use of statistically representative methods to measure shifts in social norms on FGM/C, child marriage and violence against children.

<sup>4</sup> <https://www.youtube.com/watch?v=rTA5nKupoko>



Cross-border marathon between Kenya and Uganda on promoting the abandonment of FGM © UNFPA/Evelyn Kiapi

# COUNTRY PROFILES

The following profiles provide snapshots of the focus countries for the UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting in 2016. They present facts on the national context and summarize key achievements in 2016 within each of the three main outcome areas: policy and legal frameworks, provision of FGM/C-related services, and galvanizing social dynamics. The profiles also provide overall operational and financial information.

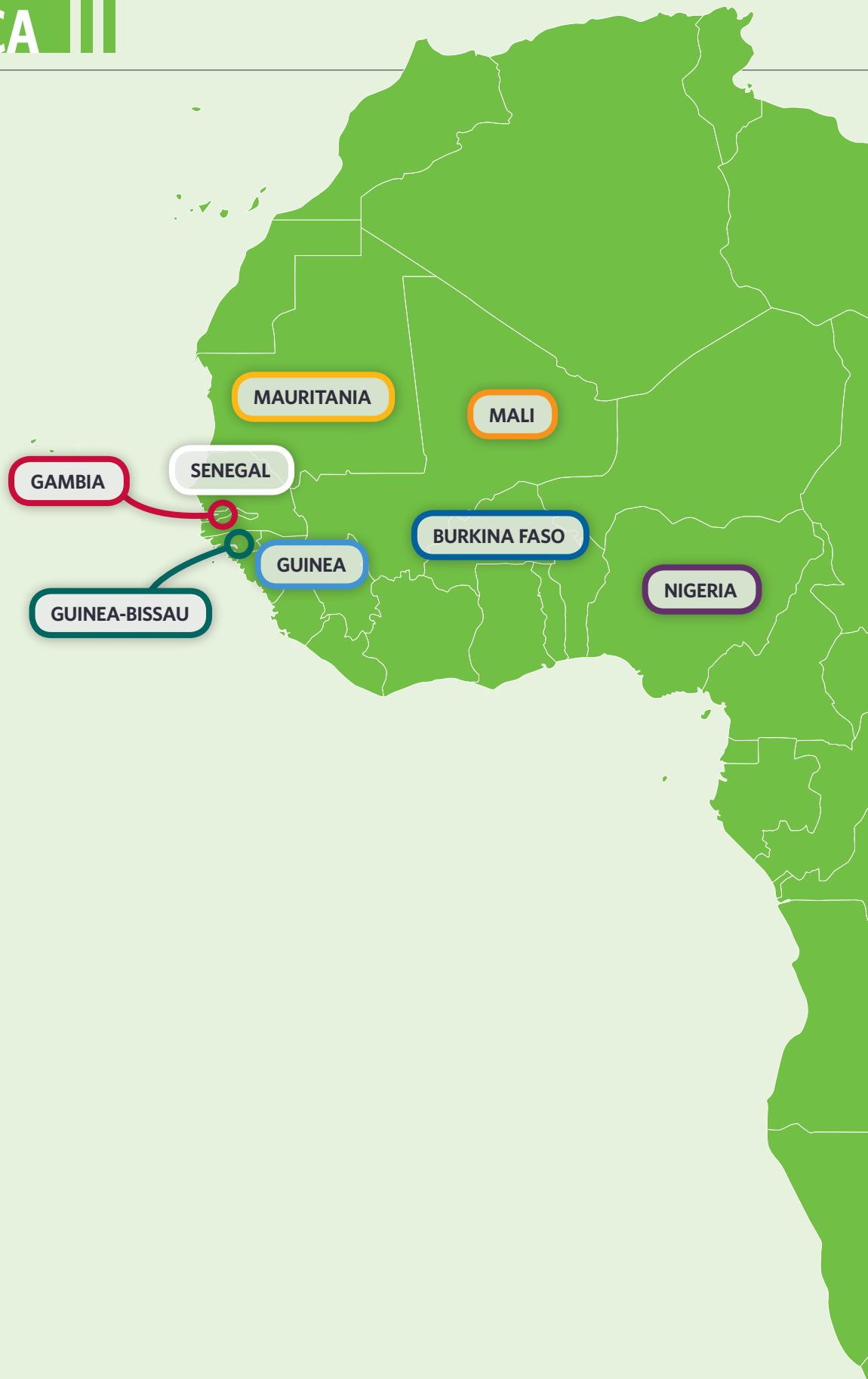
The information in these profiles was gleaned from the individual country annual reports, which include further details about each country's context, strategies, interventions and achievements. Innovative approaches from many of the

countries are also described with greater detail in the companion booklet, *17 Ways to End FGM/C: Lessons from the Field*.

During this phase of the Joint Programme(2014-2017), most of the 17 programme countries have coped with destabilizing factors, including political upheaval, humanitarian crises and natural disasters. As the situation in Yemen (including war, famine and a cholera outbreak) has grown particularly dire, Joint Programme activities there were minimal in 2016, and no profile for that country is included. However, Yemen is ready to engage more fully in 2017, and the Joint Programme will provide needed support as it continues to respond to the challenges ahead.



***The information in these profiles was gleaned from the individual country annual reports, which include further details about each country's context, strategies, interventions and achievements. Innovative approaches from many of the countries are also described with greater detail in the companion booklet, 17 Ways to End FGM/C: Lessons from the Field.***





Year the Joint Programme started supporting the country: 2009

## Facts

### Data on prevalence of, and attitudes towards, FGM/C

- » FGM/C prevalence among girls aged 0-14: 13 percent (DHS/MICS, 2010).
- » FGM/C prevalence among girls and women aged 15-49: 76 percent (DHS/MICS, 2010).
- » FGM/C prevalence among girls aged 0-14 years: 11 percent (EMC, 2015).
- » FGM/C prevalence among girls and women aged 15-49: 67 percent (EMC, 2015).
- » Girls and women supporting the continuation of FGM/C: 9 percent (DHS/MICS, 2010).
- » Girls and women supporting the continuation of FGM/C: 10.6 percent (EMC, 2015).

### Legal and policy provisions on, or related to, FGM/C

- » Law no. 043/96/ADP prohibiting FGM/C was adopted in November 1996 and has been enforced since then.
- » From 1992 to 2013, Burkina Faso developed and implemented three National Action Plans to promote the elimination of FGM/C, with a view to zero tolerance. The government has just adopted a National Strategic Plan to promote the elimination of FGM/C (2016-2020).
- » The government has had a budget line for work on FGM/C since 1997, following the establishment of the Permanent Secretariat of the National Council for the Fight against FGM.



- » The Permanent Secretariat of the National Council for the Fight against FGM (SP/CNLPE) is the national coordination mechanism for the work on FGM/C.

## Key achievements in 2016



### Policy and legal framework

Law enforcement

- » Number of arrests: 65
- » Number of cases brought to court: 65
- » Number of convictions and sanctions: 47

From 2009 to 2016, a total of 223 cases of prosecution resulted in the conviction of 384 actors and accomplices in the practice of excision; some of them were judged in mobile public hearings at community level which helped to bring the legal process closer to the community and make appearance at court easier..



### Provision of FGM/C-related services

- **518,203 girls and women received services related to FGM/C.** These included 175 cases of management of the effects of FGM/C; 1,254 girls and women involved in educational sessions at school level; and 516,774 involved in community dialogue focusing on prevention.

- Three conferences were organized by the Association of Midwives for 118 midwives on FGM/C.



### Galvanizing social dynamics

- **292 communities, involving 400,000 individuals, made public declarations of FGM/C abandonment.**
- A youth outreach caravan mobilized 4,000 people from five communes bordering Côte d'Ivoire and Mali. 500 young people have publicly pledged to abandon FGM/C and child marriage. 225 postings were made on the SP/CNLPE Facebook page; 1,284 people reacted to the publications through 2,315 comments and 143 shares of the publications.

## Operational and financial information for 2016

### Implementing partners

#### • Government partners:

Ministère de la femme de la solidarité nationale et de la famille, Secrétariat Permanent du Conseil National de Lutte contre la Pratique de l'Excision (SP/CNLPE), Ministère de la Santé, Ministère en charge de la justice et Droit Humains, Ministères en charge de la défense (Gendarmerie), Ministères en charge de la sécurité (Police), 10 Directions provinciales de la femme de la solidarité nationale et de la famille (Kadiogo, Sanmatenga, Ganzourgou, Oubritenga, Kourweogo, Bam, Passoré, Séno, Boulkiemdé, Namentenga)

#### • Civil society partners:

Réseau des Leaders Coutumiers et Religieux pour l'élimination des MGF (RELECORE/MGF), Réseau droits humains et MGF, Réseau des ONG et Associations pour l'élimination de la pratique de l'excision au Burkina Faso (RAOPE/BF), Réseau Burkinabé des Organisations Islamiques en population et Développement (RBOIPD), Réseau des Journalistes en Langues pour l'élimination de

la Pratique de l'Excision (RJLPE), ONG Mwangaza Action, Groupe d'Appui en Santé Communication et Développement (GASCODE), Société des Gynécologues et Obstétriciens du Burkina (SOGOB), Association Burkinabé des Sages-Femmes et Maïeuticiens du Burkina, ONG Voix de Femmes

### Scale of operation of the Joint Programme in the country

The Joint Programme operates in all 13 regions of Burkina Faso for communication initiatives, management of FGM/C-related complications and law enforcement. However, actions are focused in 13 provinces. In 2016, support has been provided for various interventions implemented in 957 villages, 59 health facilities and 47 schools.



### Financial information (in USD)

- Budget: 1,204,836
- Expenditure: 1,139,305
- Expenditure rate: 95 percent

For more details on the Joint Programme's work in Burkina Faso, please see the companion booklet, 17 Ways to End FGM/C: Lessons from the field, especially number 9 "Put it all together".

### Additional Information to share:

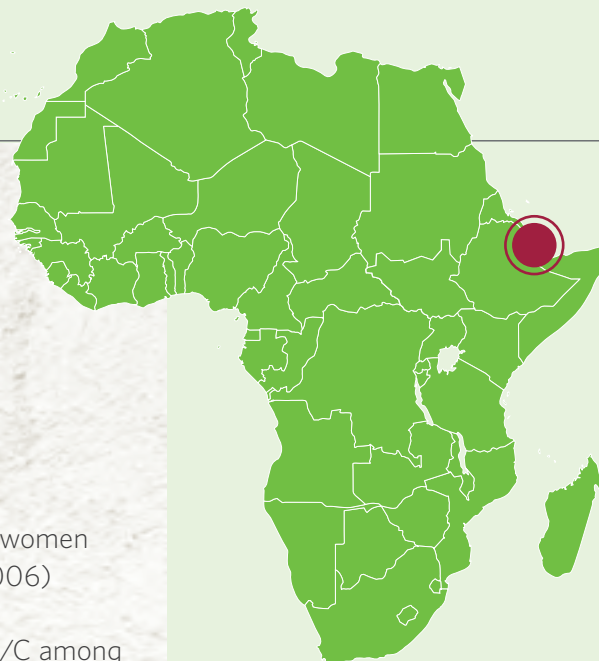
<http://lefaso.net/spip.php?article74753>  
<http://lefaso.net/spip.php?article74782>  
<http://lefaso.net/spip.php?article74842>  
<http://fr.allafrica.com/stories/201610160161.html>  
<http://lefaso.net/spip.php?article74392>

Year the Joint Programme started supporting the country: 2008

## Facts

### Data on prevalence of, and attitudes towards, FGM/C

- » FGM/C prevalence among girls and women aged 15 to 49 years: 93% (MICS, 2006)
- » Support for the continuation of FGM/C among girls and women aged 15 to 49 years: 37% , MICS 2006
- » Multiple Overlapping Deprivation Analysis (2016) reported prevalence of FGM/C among girls to be 78.2 percent. For girls between the ages of 12 and 15, with almost four out of five girls undergoing the practice.
- » In 2006, the pilot School Health Survey based on medical examination reported that 40 percent of girls 5-10 years of age were uncircumcised. This survey was expanded to all schools of Djibouti City in 2010 and reported that 60 percent of girls aged 5-10 were uncircumcised.
- » The Survey of Young People and Political and Religious Leaders (2010) reported that young adults, and political and religious leaders showed a consensus for stopping infibulations and excision but exhibited very strong resistance to the abandonment of the "sunnah" type of FGM/C.



### Legal and policy provisions on, or related to, FGM/C

- » Article 333 of the Criminal Code of Djibouti (1995) and Article 7 of the Code of Criminal Procedure of Djibouti (2005) have provisions criminalizing FGM/C.
- » There is government budgetary allocation for the work related to FGM since 2008.
- » The National Steering Committee for the Abandonment of All Forms of Excision (2009) serves as a national coordination mechanism for the work on FGM/C.
- » The following strategic documents provide a supportive policy environment for the work on FGM/C: *National Policy for the Integrated Development of Djiboutian Early Childhood* (2005), *National Gender Policy* (2010), *National Strategic Plan for Children in Djibouti* (2010) and *National Health Development Plan* (2012).

## Key achievements in 2016



### Policy and legal framework

- There were no cases of law enforcement.
- A National Strategy for Abandonment of All Forms of Excision was developed.





### Provision of FGM/C-related services

- **5,623 girls and women received services related to FGM/C.** Interventions for enhancing service provision included conducting training of trainers for the 34 health committees, revitalizing health committees to increase the use of sexual and reproductive health services in relation to FGM/C, and facilitating local outreach for the prevention of FGM by health facilities.



### Galvanizing social dynamics

- 51 communities, involving 170,000 individuals, made public declarations of abandonment of FGM/C.
- 12 surveillance committees were set up to monitor the commitment of communities, identify pregnant women and encourage them to use antenatal care services, build relationship with the women and their families, conduct regular home visits, and discuss children's well-being and rights. If the newborn baby is a girl, they also discuss FGM/C and aim to save the girls from undergoing FGM/C. 221 girls at risk of being cut have been rescued as part of this initiative.
- Efforts were made to develop a new communication strategy for monitoring and documenting the commitments of communities regarding their public declarations of abandonment of FGM/C to better understand the social dynamics around change in conventions.

## Operational and financial information for 2016

### Implementing partners

#### Government partners

- Ministry of Women and Family
- Ministry of Health
- Ministry of Religious Affairs

### Civil Society partners

- National Union of Djiboutian Women
- Association of Midwives

### Scale of operation of the Joint Programme in the country

The Joint Programme supported interventions implemented in 51 communities and 43 health facilities across the country.

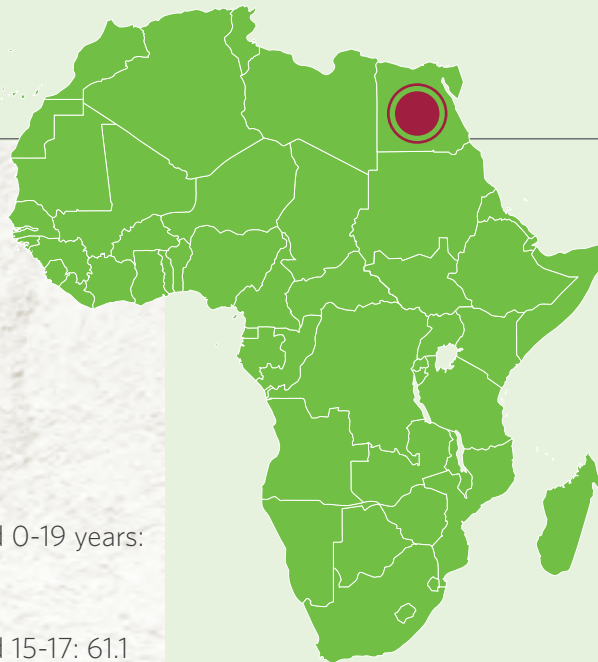


### Financial information (in USD)

- Budget: 570,939
- Expenditure: 450,371
- Expenditure rate; 79 percent

### Additional Information to share:

<http://www.lanationdj.com/promotion-droits-de-lenfant-femme-leaders-religieux-se-pretent-devoir-dinventaire/>  
<http://www.lanationdj.com/table-ronde-mgf-mff-appelle-femmes-a-se-serrer-coudes-a-agir-contre-mgf/>  
<http://www.lanationdj.com/promotion-et-protection-des-droits-humains-le-programme-salam/>  
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<http://www.lanationdj.com/leaders-religieux-guerre-contre-mgf/>  
<http://www.lanationdj.com/ministere-affaires-musulmanesfnuap-sept-jours-convaincre-leaders-religieux-eradiquer-mgf/>



Year the Joint Programme started supporting the country: 2008

## Facts

### Data on prevalence of, and attitudes towards, FGM/C

- » FGM/C prevalence among girls aged 0-19 years: 21.4 percent (EDHS, 2014).
- » FGM/C prevalence among girls aged 15-17: 61.1 percent (EDHS, 2014).
- » Girls and women supporting the continuation of FGM/C: 57.8 percent, with a clear difference between urban residence (41.8 percent) and rural residence (65.3 percent) (EDHS, 2014).

### Legal and policy provisions on FGM/C

- » Legislation criminalizing FGM was first enacted in 2008 and amendment was introduced in 2016 .
- » A task force for raising awareness on women's and children's rights (ministerial task force) and a law enforcement task force (legal taskforce) are the coordination mechanisms under the umbrella of the National Population Council for work on FGM (2016).
- » There is government budgetary allocation for the work related to FGM since 2011.

## Key achievements in 2016



### Policy and legal framework

- Law enforcement:
  - » Number of arrests: 2
  - » Number of cases brought to court: 2
  - » Number of convictions and sanctions: 6
- As a result of collaborative advocacy efforts, the law prohibiting FGM/C was amended to intensify penalties, making the practice of FGM/C a felony rather than a misdemeanor.<sup>5</sup> (For more details, see related story in companion booklet: *17 Ways to End FGM*)
- Efforts continued to ensure inclusion of FGM/C in the Egyptian Medical University Curriculum through the National Population Council and the Supreme Council of Universities. Technical work continued on the development of the curriculum.
- Under an agreement reached with the Egyptian National Centre for Judicial Studies in 2015 to integrate FGM/C in curricula, a total of 500 law enforcement agents were trained. The aim of

<sup>5</sup> The 2008 legislation enforced a penalty of 3 months to 1 year of imprisonment, while the current amendment increased the penalty to a range of 5-7 years; this can increase to 15 years if the practice leads to death or permanent disability. In addition, the person who accompanies the girl to be cut will also be sentenced for 1-3 years.

the training is to raise awareness on all issues related to FGM/C, to identify gaps in current legal proceedings and administrative oversights that hinder litigation of relevant cases according to the FGM/C-criminalizing provisions of the Penal Code, and to give law enforcement agents the appropriate tools to allow them to avoid legal loopholes.



### *Provision of FGM/C-related services*

- 5,209 girls and women received services related to FGM/C. Among these, girls were reached through the school-based model and other types of awareness raising, speeches by Muslim and Christian clergy, and consultancy through health facilities and house visits.
- The National Population Council was supported to develop and integrate messages and resources on FGM/C, as part of the national vaccination campaigns led by the Ministry of Health and Population
- Three capacity-building workshops were held for the Department for Licenses and Non-governmental Medical Institutions under the Ministry of Health and Population to raise their awareness of FGM/C, and enhance their linkages to surveillance and prosecution of medical doctors and clinics performing FGM/C.



### *Galvanizing social dynamics*

- 79 outreach initiatives addressing FGM/C abandonment were conducted in 76 communities in Assiut, reaching 3,111 women and men. As a result, 1,080 families publicly declared abandonment of FGM/C.
- Efforts of the Y-PEER network in addressing FGM/C have been strengthened through support of its interventions in 18 governorates. The Y-PEER approach provides young people with the tools to become leaders in their own communities and build partnerships with adults to advocate for change. Many of the

new trainers continue to work with Y-PEER as volunteers and make a crucial contribution to the campaign, in addition to creating new channels for dissemination of messages. In 2016, 850 peer educators were trained; together with previously trained educators, they reached 13,725 young people through sessions, campaigns and theatre shows.

- A manual on gender-based violence in Islam, developed in cooperation with the International Islamic Center for Population Studies and Research (IICPSR) at Al-Azhar University, was finalized and launched in 2016. The manual covers various forms of gender-based violence (including FGM/C) and will serve as the basis for religious leaders' capacity-building efforts. Capacity-building of 752 Christian and Muslim religious leaders improved their ability to respond to FGM/C and gender-based violence within the communities they serve.

## Operational and financial information for 2016

### *Implementing partners*

#### **Government partners**

- Ministry of Health and Population
- National Population Council
- Ministry of Justice through the National Population Council
- IICPSR at Al Azhar University

#### **Civil society partners**

- Assiut Childhood and Development Association
- Caritas Egypt
- Port Fouad Baby and Family Care Society
- Coptic Church BLESS, including sub-implementing partner Council for Services and Development, working with evangelical and Catholic churches
- Egypt Free Association (Menya)
- South Egypt Development Association Qena

- Egyptian Red Crescent society (Assiut)
- Itijah—youth development in Egypt (Y-PEER and the International Federation of Medical Students Associations are also engaged through Itijah)
- National Center for Culture and Arts

### *Scale of operation of the Joint Programme in the country*

The Joint Programme supported interventions in 312 villages or communities, 48 health facilities, 27 offices of the Department for Licenses and Non-governmental Medical Institutions of the Ministry of Health and Population, and 54 schools in the 22 governorates.



### *Financial information (in USD)*

- Budget: 1,106,904
- Expenditure: 640,576
- Expenditure rate: 58 percent

For more details on the Joint Programme's work in Egypt, please see the companion booklet, *17 Ways to End FGM/C: Lessons from the Field*, especially numbers 5: "Create webs of protection" and number 11: "End Impunity".

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### **Additional Information to share:**

Manual on Islamic perspectives on Gender-based Violence developed by UNFPA and IICPSR - Al-Azhar (in Arabic) in the following <http://egypt.unfpa.org/en/publications/islamic-perspectives-gender-based-violence>

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During a workshop on  
FGM/C in Egypt  
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Year the Joint Programme started supporting the country: 2011

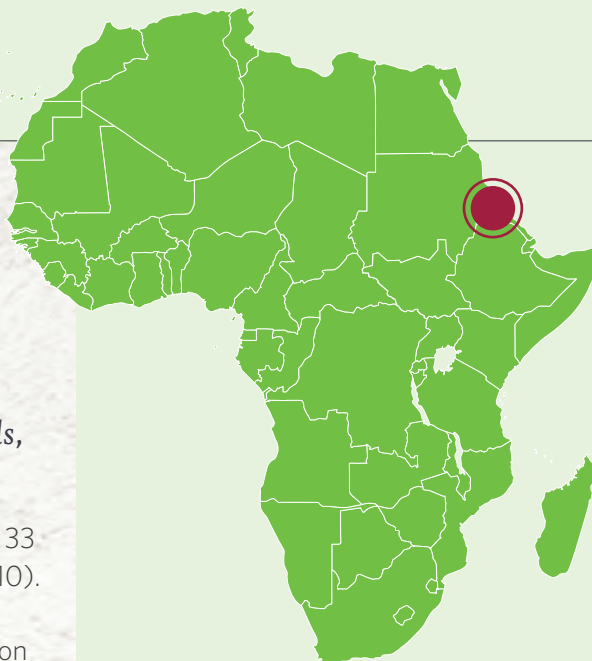
## Facts

### Data on prevalence of, and attitude towards, FGM/C

- » FGM/C prevalence among girls aged 0-14: 33 percent (Population and Health Survey, 2010).
- » Girls and women supporting the continuation of FGM/C: 12 percent (Population and Health Survey, 2010).
- » FGM/C prevalence among girls and women aged 15-49: 83 percent (Population and Health Survey, 2010).
- » Mapping exercise supported by the Joint Programme in 112 villages from Anseba, Debub, Gash Barka, Maekel, Northern Red Sea and Southern Red Sea zobas in 2014 reported FGM/C prevalence among girls aged 0-14 as 18.8 percent, and girls and women supporting the continuation of FGM/C as 6.9 percent.

### Legal and policy provisions on, or related to, FGM/C

- » Proclamation 158/2007—A Proclamation to Abolish Female Circumcision is the main legal framework against FGM. In addition, the National Health Policy, National Policy on Gender and National Comprehensive Child Study provide policy support for the effort to eliminate FGM/C.
- » Within the overall integrated government budget, budgetary support is provided for the work on FGM.



- » Anti FGM/C committees at the zoba, sub-zoba and village/kebabi levels are the coordination mechanisms for the work on FGM/C under the leadership of the government. The coordination mechanism, which was established in 2007, works efficiently at lower levels and reports regularly to the national level.

## Key achievements in 2016



### Policy and legal framework

- Law enforcement
  - » Number of arrests: 0
  - » Number of cases brought to court: 89
  - » Number of convictions and sanctions: 0
- Influential leaders and policy makers have publicly spoken of the criminalization of FGM/C as well as all forms of violence against women. Seven public policy statements were made in 2016 to support the elimination of FGM/C.



### Provision of FGM/C-related services

57,874 girls and women received services related to FGM/C during antenatal and postnatal care services through 267 health facilities located in different parts of the country.



## Galvanizing Social Dynamics

- **184 communities, involving 322,000 individuals, made public declarations of FGM/C abandonment.**
- The National Union of Eritrean Women, and the National Union of Eritrean Youths and Students conducted wide awareness-raising initiatives and campaigns to mobilize communities against FGM/C and other harmful practices. More than 460,000 community members engaged in these sessions. Wide media coverage has also been used for sensitization purposes.

In one operational area, internal protocols and guidelines were developed to ensure evidence-based declarations. A promotional sticker was designed and printed with a message “My house is FGM free”, with a picture of a happy and proud family. Every household that declares abandonment of FGM/C will place the sticker in their house; this is creating a positive competition among communities.

Since 2014, the government and national partners have conducted an intensive mapping exercise among communities that are moving towards abandonment of FGM/C. The results from the exercise are being used to effectively and efficiently tailor interventions for the different communities. The methodology entails collecting data in the following six categories to generate an index for each of the communities: practice of cutting and clinical observation; attitude and views of self about FGM/C; attitude and views of others about FGM/C; exposure to, and knowledge of, activities to support the abandonment of FGM/C; knowledge of the law criminalizing FGM/C and opinions on its enforcement; and collective abandonment.

## Operational and financial information for 2016

### Implementing partners

#### Government partners

- Ministry of Health
- Ministry of Labour and Human Welfare

#### Civil society partners

- National Union of Eritrean Women
- National Union of Eritrean Youth and Students

### Scale of operation of the Joint Programme in the country

The Joint Programme supported interventions implemented in 2,670 villages and 267 health facilities located in 55 sub-zobas from six zobas. The programme has national coverage.



### Financial information (in USD)

- Budget: 870,531
- Expenditure: 697,246
- Expenditure rate: 80 percent



### Additional Information to share:

Mapping study: <https://drive.google.com/file/d/OByCirwM0IFNoSG5hMIIVUXR4TDQ/view?usp=sharing>

Human interest stories:

[https://www.unicef.org/eritrea/reallives\\_16780.html](https://www.unicef.org/eritrea/reallives_16780.html)

Year the Joint Programme started supporting the country: 2008

## Facts

### Data on prevalence of, and attitude towards, FGM/C

- » FGM/C prevalence among girls and women aged 15-49: 65 percent (DHS Key Indicators Report, 2016).
- » FGM/C prevalence among girls and women aged 15-19: 47 percent (DHS Key Indicators Report, 2016).
- » FGM/C prevalence among girls aged 0-14: 23.4 percent (Welfare Monitoring Survey, 2011).
- » Girls and women supporting the continuation of FGM/C: 31 percent (DHS, 2005).
- » Baseline survey conducted by the Joint Programme in the three target districts in Afar Regional State (Ada'ar, Mille and Chifra), 2015: reported:
  - » Women and men aged 15-49 supporting the practice of FGM/C: 37.1 percent
  - » Women and men aged 15-49 opposing the practice of FGM/C: 62.9 percent



### Legal and policy provisions on, or related to, FGM/C

- » Ethiopia's constitution prohibits harmful practices that affect the psychological and physical well-being of women (Article 34/5). The Criminal Code of Ethiopia (2005) has provisions that protect women and children from violence, including harmful traditional practices.<sup>6</sup>
- » Following the endorsement of the National Harmful Traditional Practices (HTPs) Strategy and Action Plan, which focuses on addressing FGM/C, and child marriage and abduction, the government has included a dedicated budget line on ending HTPs, including FGM/C, since 2013. As part of its goal to end FGM/C and child marriage by 2025, Ethiopia has committed to increase the budget allocation by 10 percent.
- » The National Alliance to End Child Marriage and FGM/C (established in 2012) and the National HTPs Platform (established in 2016) are the main national coordination mechanisms for the work on FGM/C.

<sup>6</sup> The criminal Code prohibits FGM under Articles 565-566 and imposes the sanction of imprisonment from 3 months to 10 years for those practising as well as the accessories/accomplices to the practice. Article 566 of the criminal code provides that anyone who infibulates the genitalia of a woman is punishable with rigorous imprisonment of 3-5 years. (Infibulation indicates type 3 FGM, the most extreme form).

## Key achievements in 2016



### Policy and legal framework

- Law enforcement
  - » Number of arrests: 1
  - » Number of cases brought to court: 1
  - » Number of convictions and sanctions: 1.
- The Afar Regional State promulgated the “Proclamation enacted to prevent, control and eliminate FGM/C including infibulation in the region” (2009).
- The Joint Programme supported the organization of the second National Girl’s Summit, which provided the space and forum for different government sectors and other actors to present progress in the elimination of FGM/C and next steps in the ongoing efforts.
- As a result of continuous efforts made under the leadership of the government coordinating body (Ministry of Women and Children Affairs), the Women and Children Standing Committee of the national parliament decided to incorporate issues of FGM/C and child marriage into its regular monitoring checklist.



### Provision of FGM/C-related services

234,200 community members received prevention, protection and care services related to FGM/C. Of these, 1,430 women and girls received medical services in Barbara May Maternity Hospital for treatment of acute urinary retention problems caused by FGM/C, and for opening of scars to facilitate safe childbirth.



### Galvanizing social dynamics

- **250 communities, involving 250,000 individuals, made public declarations of the abandonment of FGM/C.**
- The public declaration serves the following purposes:
  - » It addresses the communication barrier among families to help them understand that others are also changing their attitudes, and they are not alone in the change process (alliance building).
  - » It is one of the mechanisms for diffusion of change within communities, and is a key milestone for starting rigorous enforcement of the law against those resisting the change and going against the community decision.
  - » To ensure that the change process will be maintained after the declaration, the following minimum set of interventions is undertaken:
    - » Strengthen community-level structures, such as community surveillance mechanisms and women’s development groups.
    - » Continue developing legal literacy and undertaking capacity-building of law enforcement bodies.
    - » Undertake regular field level monitoring and reflections by implementing partners and community structures.
- A memorandum of understanding was signed with 14 faith-based organizations and umbrella organizations to jointly work towards enhancing the well-being of women and children. One thematic area of the partnership is ending FGM/C. Considering the pivotal role of religious leaders and faith-based organizations in mobilizing communities towards changing



attitudes and thereby the norms that perpetuate the practice, this partnership is expected to strengthen community-level engagement with the target population to end FGM/C.

- A community surveillance mechanism was established at sub-district (“kebele”) level to track cases of FGM/C and child marriage, and sensitize communities about the harmful consequences of these practices continued during the reporting period.
- Supported the update or establishment of a database in nine targeted districts in Afar Regional State through recording the FGM/C status of all girls aged 0-18.

## Operational and financial information for 2016

### Implementing partners

#### Government partners

- Ministry of Women and Children Affairs
- Bureau of Women and Children Affairs (Afar, Southern Nations Nationalities and People Regional State)
- Bureau of Justice (Afar, SNNPR)

#### Civil society partners

- Norwegian Church Aid
- Afar Pastoralist Development Association
- Rohi Weddu Pastoral Women Development Organization
- Kembatti Mentti Gezzima Tope

### Scale of operation of the Joint Programme in the country

The Joint Programme supported interventions implemented in 592 communities (targeting 592,515 community members), 88 health facilities and 77 schools located in 17 districts from the two target regional states (Afar Regional State; Southern Nations, Nationalities and Peoples Regional State).



### Financial Information (in USD)

- Budget: 1,062,878
- Expenditure: 917,346
- Expenditure rate: 86 percent

### Additional Information to share:

#### Human interest stories

<http://pulitzercenter.org/projects/ending-fgm-ethiopia>

<https://unicefethiopia.org/2016/12/02/providing-gynaecological-services-to-ethiopian-women-scarred-by-fgmc/>



Year the Joint Programme started supporting the country: 2009

## Facts

### Data on prevalence of, and attitude towards, FGM/C

- » FGM/C prevalence among girls aged 0-14: 56 percent (MICS, 2010).
- » FGM/C prevalence among girls and women aged 15-49: 75 percent (DHS, 2013).
- » Girls and women supporting the continuation of FGM/C: 65 percent (DHS, 2013).

### Legal and policy provisions on, or related to, FGM/C

- » A presidential proclamation in November 2015 banned the practice of FGM/C, and the 2010 Women's Act was amended to expressly prohibit and criminalize FGM/C, with offenders facing fines of 50,000 dalasi (US\$1,250) or three years in prison or both; life sentences are possible in the case of death.
- » The National Steering Committee on FGM and gender-based violence (established in 2009) is the national coordination mechanism for work on FGM/C.

## Key achievements in 2016



### Policy and legal framework

- Law enforcement
  - » Number of arrests: 2
  - » Number of cases brought to court: 2
  - » Number of convictions and sanctions: 2
- For the first time, the Government of the Gambia took the lead in observing International Day of Zero Tolerance Day for Female Genital Mutilation. With support from the Joint Programme, the office of the Vice President and the Women's Bureau organized a national conference on FGM/C, with the Vice President herself taking the lead.



### Provision of FGM/C-related services

- 482 girls and women received services related to FGM/C.
- A clinical study of FGM/C obstetric complications was conducted, titled "FGM in 37 health facilities, 2013-2016: an assessment of the obstetric and delivery complications and their management".
- The Joint Programme supported the Reproductive and Child Health Unit of the Ministry of Health to develop and print a

training manual on FGM/C for health workers. The manual was developed for service providers across all cadres and different institutions by adapting the World Health Organization manual to the Gambian context.



### Galvanizing social dynamics

- 62 communities, involving 1,240 individuals, made public declarations of FGM/C abandonment.

## Operational and financial information for 2016

### Implementing partners

#### Government partners

- Women's Bureau
- Ministry of Health
- National Youth Council
- National Population Commission Secretariat
- Ministry of Justice

In addition, Think Young Women, The Girls' Agenda and Safe Hands for Girls were engaged as sub-grantees for the government implementing partners.

#### Civil society partners

- GAMCOTRAP
- Tostan
- Safe Hands for Girls (a youth CBO)
- Girls' Agenda (a youth CBO)
- Think Young Women

### Scale of operation of the Joint Programme in the country

- Interventions implemented in 48 districts, 1,770 communities/ and villages, 78 health facilities and 5 schools located in five administrative regions and two municipalities.



### Financial information (in USD)

- Budget: 600,873
- Expenditure: 504,225
- Expenditure rate: 84 percent

### Additional Information to share:

#### Sensitization on the legislation introduced in 2015:

1. <http://thepoint.gm/africa/gambia/article/ministry-of-justice-sensitises-immigration-officers-on-fgmc>
2. <http://standard.gm/site/2016/10/13/ban-fgm-good-unicef-boss/https://www.facebook.com/plugins/post.php?href=https%3A%2F%2Fwww.facebook.com%2Funicefgambia%2Fposts%2F561388964053039%3A0&width=500>

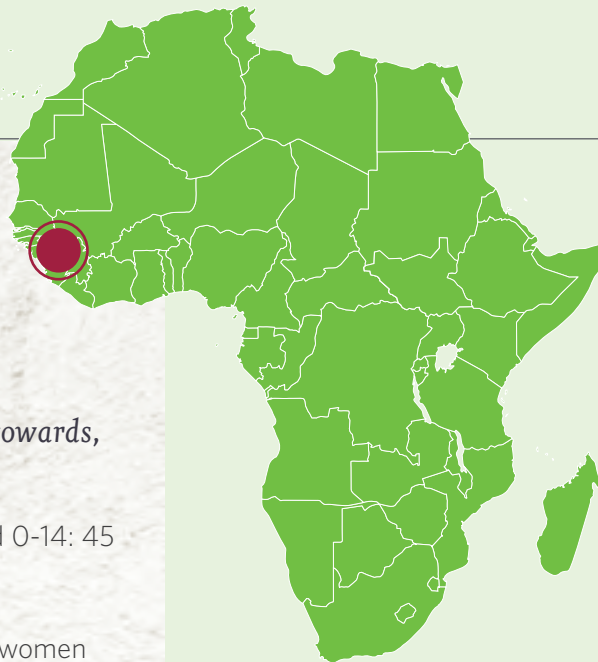
#### News Report New Legislation on FGM Applied in Gambian Court

<http://www.wunrn.com/2016/03/gambia-new-legislation-on-fgm-applied-in-gambian-court/>

#### Links to media

1. [http://thepoint.gm/africa/gambia/article/govt-committed-to-the-protection-of-rights-of-women-and-girls-dps-gassama?utm\\_source=Tostan+Newsletter+Subscribers&utm\\_campaign=23ac211ef3-June+Newsletter&utm\\_medium=email&utm\\_term=0\\_2150c85e14-23ac211ef3-134265401&goal=0\\_2150c85e14-23ac211ef3-134265401&mc\\_cid=23ac211ef3&mc\\_eid=7cce0571d3](http://thepoint.gm/africa/gambia/article/govt-committed-to-the-protection-of-rights-of-women-and-girls-dps-gassama?utm_source=Tostan+Newsletter+Subscribers&utm_campaign=23ac211ef3-June+Newsletter&utm_medium=email&utm_term=0_2150c85e14-23ac211ef3-134265401&goal=0_2150c85e14-23ac211ef3-134265401&mc_cid=23ac211ef3&mc_eid=7cce0571d3)
2. <http://observer.gm/unicef-committed-to-support-govt-in-eradicating-fgmc-in-gambia/>
3. <http://thepoint.gm/africa/gambia/article/22-villages-abandon-fgc-early-and-forced-marriage-in-urr>
4. [https://www.facebook.com/unicefgambia/photos/?tab=album&album\\_id=508095522715717](https://www.facebook.com/unicefgambia/photos/?tab=album&album_id=508095522715717)
5. [https://www.unicef.org/gambia/reallives\\_10261.html](https://www.unicef.org/gambia/reallives_10261.html)

Year the Joint Programme started supporting the country: 2008



## Facts

### Data on prevalence of, and attitude towards, FGM/C

- » FGM/C prevalence among girls aged 0-14: 45 percent (MICS, 2016).
- » FGM/C prevalence among girls and women aged 15-49: 97 percent (MICS, 2016).
- » FGM/C prevalence among girls and women aged 15-64: 92 percent (Gender Based Violence Study, 2016).

38 percent of men and boys are against the continuation of FGM/C, compared with 21 percent of women and girls. The most striking difference between men's and women's perceptions regarding FGM/C is also in Guinea, where 46 percent of men and boys say that FGM/C has no benefit, compared with just 10 percent of women and girls.

- » Girls and women supporting the continuation of FGM/C: 67.2 percent (MICS, 2016).

### Legal and policy provisions on related to, FGM/C

- » The revised Penal Code (2016) has specific provisions that criminalize FGM.
- » Guinea has had a budget line in the National Development Budget dedicated to work on FGM/C since 2011.
- » The national coordination mechanism for work on FGM/C is the Comité National pour la Promotion de l'Abandon des MGF/E (established in 2011). Coordination is also operationalized at a decentralized level (Comités Techniques de Coordination Régionale).

## Key achievements in 2016



### Policy and legal framework

- Law reinforcement:
  - » Number of arrests: 11
  - » Number of cases brought to court: 11
  - » Number of convictions and sanctions: 2
- **Policy level**
  - » An updated National Strategic Action Plan to accelerate the abandonment of FGM/C is operational until 2018.
  - » The Roadmap for the Implementation of the National Strategic Action Plan has also been updated and runs to the end of 2018.
- **Legal level**
  - » The Penal Code has been revised to clarify the definition of FGM/C and clear sanctions.
  - » The General Secretariat of Religious Affairs in Guinea issued a fatwa (a ruling on a point of Islamic law) prohibiting the practice of FGM/C, with the support of Mauritanian religious leaders. Two sermons were broadcast in more than 500 mosques in Conakry and 3,300 mosques in other parts of Guinea encouraging communities to give up the practice. A public declaration and a national action plan to

effectively promote the abandonment this practice was the outcome of a national forum. The trips resulted in a national action plan to effectively promote the abandonment this practice through a national forum. The forum brought together religious leaders, traditional cutters and civil society from the 33 prefectures, as well as parliamentarians, women leaders, representatives of sector ministries, journalists and United Nations agencies.



### Provision of FGM/C-related services

- 107,604 women and girls received services related to FGM/C. Of these 20,563 uncut girls, identified at community level, were protected from FGM/C and benefited from life skills training; 12 girls and women accessed medical services for FGM/C-related complication; and 87,029 girls and women benefited from community dialogue and counselling.
- 444 law enforcement professionals benefited from training on the legal provisions pertaining to FGM/C, the use of an SMS monitoring tool to report cases of FGM/C, prevention of FGM/C, and provision of services to victims of FGM/C.
- 78 health workers benefited from training to provide adequate care and services to victims of FGM/C.
- The Joint Programme provided training on the KoBo Toolbox, a free open-source tool for mobile data collection using phones and computers, to 173 magistrates and judicial police officers; 389 members of protection structures; and 38 focal points from the Office for the Protection of Gender, Children, and Morals. The training related to capturing and sharing data about FGM/C cases. Such data collection and analysis supports the Joint Programme's critical role in promoting synergy between key sectors, including security, justice, health and non-governmental organizations. In 2016, these efforts enabled the prosecution of 44 cases of FGM/C, the arrest of 11 people and 2 convictions.



### Galvanizing social dynamics

- 989 communities, involving 273,800 individuals, made public declaration of FGM/C abandonment. This marked a significant increase in the number of declarations. In 2015, 422 villages and 126 districts made public declarations; in 2016, 989 villages made declarations—this is about 18% of the population in villages and 4% of the country's districts. These statements made it possible to identify and protect 20,563 girls aged 0-15 from FGM/C, and 15,320 girls aged 12-17 from child marriage in targeted communities.
- 208,757 people (87,029 girls and women, and 121,728 boys and men) participated in community dialogues and benefited from key messages for FGM/C abandonment.
- 1,422 religious Leaders, 3,205 community-based child protection structures, 300 community social workers (who were deployed in 150 targeted villages), 2,556 primary school teachers, and 20 women leaders of traditional circumcisers were reached through various capacity-building initiatives to enhance their role in the prevention of FGM/C in their respective areas of engagement.
- 3,300 mosques across the country passed the harmonized preaching developed by the Secretariat General of Religious Affairs, in which the lack of a link between FGM/C and religion was made clear to believers.
- 286 members of civil society organizations benefited from training on the DI Monitoring platform for consistency and efficiency in data collection and monitoring
- 32 Guinean youth (four per region) were trained to facilitate discussions about FGM/C and gender-based violence on social media, including Facebook, Twitter, Google and Instagram. Eight thousand youth—5,212 females and 2,788 males—and 400 opinion leaders participated in discussions on social media about FGM/C.

## Operational and financial information for 2016

### Implementing partners

#### Government partners

- Ministry for social action (Ministère de l'Action Sociale, de la Promotion Feminine et de l'Enfance)
- Ministry of Security (National Police)
- Ministry of Education
- Ministry of National Defense (Gendarmerie)
- Secretariat of Religious Affairs
- Institution Nationale Indépendante des Droits Humains

#### Civil society partners

- Tostan
- Child Fund
- Association Guinéenne pour le Bien Etre Familial
- Association des Femmes pour l'Avenir des Femmes
- Association des Amis de la Solidarité Sociale et du Développement
- Club des Amis du Monde
- Fondation Binta Ann pour les Enfants et les Femmes
- Monde des Enfants
- Association Guinéennes des Assistantes Sociales
- Mêmes Droits pour Tous
- Réseau des Femmes Ministres et Parlementaires
- Réseau des Parlementaires en Population et Développement
- Réseau National des Communicateurs Traditionnels
- Associations des Leaders Religieux de Guinée

### Scale of operation of the Joint Programme in the country

The Joint Programme supported interventions implemented in 2,653 communities from 8 regions, 102 health facilities, 8 public health schools, 2,556 primary schools and 3,300 mosques.



### Financial information (in USD)

- Budget: 931,288
- Expenditure: 838,343
- Expenditure rate: 90 percent

### Additional Information to share:

- Studies / Research undertakings
  - Anthro-sociological study on the determinants of FGM in Guinea
  - Study on the impact of FGM abandonment in Guinea
  - National study on gender based violence
- OHCHR 2016 reports on FGM
- Normes et Procédures en Santé de la Reproduction
- Déclaration de REFAMP : Réseau des Femmes Ministres et des Parlementaires

Human Rights and the practice of FGM/C in Guinea: <http://docdro.id/5rdZVrB>  
 National Survey on Gender-Based Violence in Guinea: <http://docdro.id/JFeXfll>  
 Socio-Anthropological Analysis of the FGM/C Perpetuation Determinants in Guinea: <http://docdro.id/OW1Poso>



Community mobilizers, parents and students during sensitization sessions on FGM in schools in Guinea

© Souleymane Camara

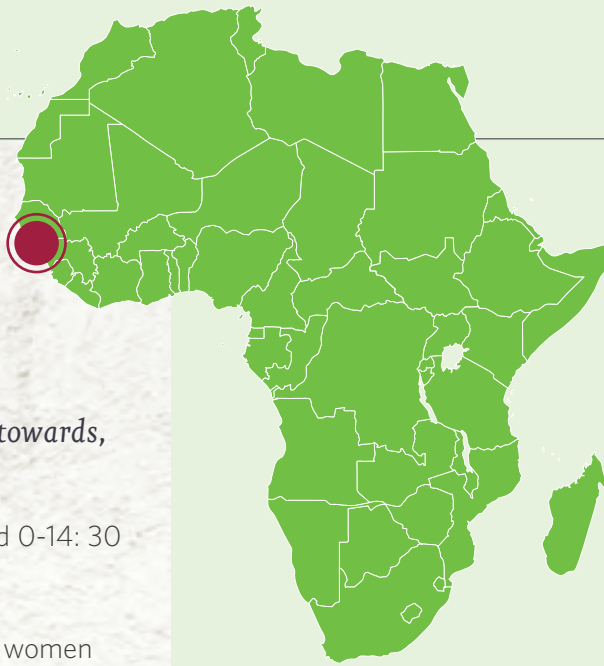
BY THE NUMBERS



Declaration of young people in a youth center in Guinea

© Ibrahim Sory Youla

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Year the Joint Programme started supporting the country: 2008

## Facts

### Data on prevalence of, and attitude towards, FGM/C

- » FGM/C prevalence among girls aged 0-14: 30 percent (MICS, 2014).
- » FGM/C prevalence among girls and women aged 15-49: 45 percent (MICS, 2014).
- » Girls and women supporting the continuation of FGM/C: 13 percent (MICS, 2014).
- » The final evaluation of the TOSTAN programme showed that changes in social norms related to FGM/C, and child and forced marriage are more visible in Mandinga communities than in Fula communities, where the religious linkage with the practice is higher. Overall, 95 percent of respondents from communities covered by the TOSTAN programme have declared that they would accept their sons marrying a non-excised girl, and 94 percent have committed to not excising their daughters.

### Legal and policy provisions on, or related to, FGM/C

- » The legal provision criminalizing FGM/C is the Law to Prevent, Fight and Suppress Female Genital Mutilation (14/2011)
- » The National Committee for the Abandonment of Harmful Practices (under the Ministry of Woman, Family and Social Solidarity) is the coordination mechanism for the work on FGM/C.

## Key achievements in 2016



### Policy and legal framework

- Law enforcement
  - » Number of arrests: 0
  - » Number of cases brought to court: 1
  - » Number of convictions and sanctions: 0
- There have been 37 judicial cases since the adoption of the law on FGM in 2011 in Guinea-Bissau. During 2016, the national coordination structure working on FGM and civil society organizations followed 21 cases that are still pending under the justice system, particularly in courts outside the capital city.
- From 2011 to 2016, new legislation on FGM/C, reproductive health and domestic violence was produced, and clear strategies and plan of actions were developed, including a national gender policy.





### Provision of FGM/C-related services

- **3,839 girls and women received services related to FGM/C.**
- 312 cases of violence against children and women were referred to and followed by implementing partners (of which 68 were related to child marriage and FGM/C), and coordinated responses were strengthened, including provision of appropriate assistance and care.
- Capacity development of reproductive health service providers was strengthened during 2016. Fifty-one nurses have received training on reproductive health, including improved FGM/C preventive and response-appropriate services.
- The Joint Programme is providing regular support to a shelter for victims of violence, including FGM/C and child marriage. The shelter operates in the east of the country, to guarantee appropriate assistance and care of complex cases.
- Training manuals and an awareness toolkit on FGM/C and other harmful practices were developed.



### Galvanizing social dynamics

- **42 communities, involving 41,875 individuals, made public declarations of FGM/C abandonment.**
- 42,149 individuals from 263 communities, child and youth associations, men's clubs, faith-based organizations and non-governmental organizations (NGOs) have participated in 1,494 human rights educational sessions addressing FGM/C, child marriage, and other forms of violence against children and women.
- 604 religious and community leaders (including opinion leaders) have participated in consensus-building activities to end FGM/C and child marriage.

- Capacities of 150 men's club members were strengthened to improve the prevention of FGM/C, child marriage and early pregnancy.

## Operational and financial information for 2016

### Implementing partners

#### Government partners

- Ministry of Women, Family, and Social Solidarity (Woman and Child Institute, and the National Committee for the Abandonment of Harmful Practices)
- Ministry of Health
- Ministry of National Education/Education Development National Institute
- Ministry of Justice (General Direction of Justice Administration; Judiciary Police)
- Ministry of Interior
- National Assembly (Woman and Child Permanent Commission)
- Supreme Court (regional courts)
- Public-Prosecutor
- Ministry of Youth, Culture et Sports/Youth Institute
- National Health School

#### Civil society partners

- National Child Parliament
- National Child and Youth Movement "Republica de Mininus Hoje" (with more than 250 child and youth organizations)
- Seven national NGOs (AMIC, Sinim Mira Nasseque, Okanto, Renluy, AMAR, PROTÉGÉ and RA)
- International NGOs (ADPP, ADRA and Caritas)
- National Network of Faith Based Organizations Supporting the Abandonment of FGM/C and other Harmful Practices (created in 2011)
- Main Islamic national organizations and networks (Conselho Superior Islamico and Conselho Nacional Islamico).
- Guinea-Bissau imams Council

## Scale of operation of the Joint Programme in the country

The Joint Programme supported interventions implemented in 263 communities (out of 3,500 in the country), and 114 health facilities and schools (targeting 300 teachers and 22,203 pupils) located throughout all eight of the country's regions and the Bissaur autonomous sector.



## Financial information (in USD)

- Budget: 459,862
- Expenditure: 377,215
- Expenditure rate: 82 percent

## Additional Information to share:

Programme External Evaluation:

<https://drive.google.com/file/d/0ByCirwMOIFNocF9uMTVUVnB2Sm8/view?usp=sharing>

Studies / Research undertakings: Evaluation of the Tostan programme and the study on the medicalization.

*Arch Bishop of the Church of Uganda addresses district leaders and UNFPA staff at the meeting with the Minister for the Presidency Hon Esther Mbayo at Amanang Primary school in Bukwo District in 2016, Uganda*



© UNFPA Uganda, Evelyn Kiapi

Year the Joint Programme started supporting the country: 2008

## Facts

### Data on prevalence of, and attitudes towards, FGM/C

- » FGM/C prevalence among girls aged 0-14: 3 percent (DHS, 2014).
- » FGM/C prevalence among girls and women aged 15-49: 21 percent (DHS, 2014).
- » Girls and women supporting the continuation of FGM/C: 6 percent (DHS, 2014).
- » UNFPA baseline survey report on FGM/C (conducted by the Africa Coordinating Centre for Abandonment of FGM/C) reported that
  - » knowledge and awareness of FGM/C in Narok, Samburu, Baringo, Elgeyo Marakwet and West Pokot Counties is high—above 95 percent on average
  - » according to female respondents, fathers (46 percent of 456 respondents) are the key decision makers for females to undergo FGM/C, followed by the girls themselves at 36 percent.

### Legal and policy provisions on, or related to, FGM/C

- » The Prohibition of female Genital Mutilation Act (2011) is the legal provision criminalizing FGM/C
- » There has been a government budget line for work on FGM/C since 2014.
- » The Anti-FGM Board (established in 2013) is the national coordination mechanism for the work on FGM/C.



## Key achievements in 2016



### Policy and legal framework

- Law enforcement:
  - » Number of arrests: 75
  - » Number of cases brought to court: 75
  - » Number of convictions and sanctions: 10
- The National Policy for the Abandonment of Female Genital Mutilation was reviewed in 2016 in line with Kenya's constitution (2010) and the Prohibition of Female Genital Mutilation Act (2011), and is now awaiting cabinet approval.
- A standard operating procedure is in place that will guide prosecutors on how to handle cases of FGM/C and ultimately provide justice for victims.
- Supported the development of the 2016 East African Community (EAC) Gender Equality and Development Bill 2016. The Gender Bill seeks to ensure that there is gender equality, protection and development in the community. A joint consultative memorandum was presented by the Anti-FGM Board to the EAC advocating for integration of prohibition of FGM into the Gender Bill. The aim is to promote regional cooperation in the prosecution of perpetrators of FGM/C and develop common measures, strategies and programmes for the effective

enforcement of legislation on FGM/C. Once enacted, the regional gender law is expected to enhance regional cooperation in efforts to prosecute perpetrators of FGM/C.

- Supported the initiative of “mobile courts” to bring the legal process closer to the community, make appearance at court easier, and ensure effective dispensation of justice to both the accused and the victim in all 12 focus counties.



### *Provision of FGM/C-related services*

- **641 girls and women received services related to FGM/C.**
- Psychosocial support, legal aid counselling, mediation, reconciliation, and reintegration of 600 girls back to their families and communities were provided. Other services such as health, legal aid, rescue, and safe temporary spaces and centres have been provided by the Government of Kenya, including county health services, the Office of the Director of Public Prosecution, the Ministry of Education, police and partners, including the Federation of Women Lawyers (FIDA) and faith-based organizations.
- Continued implementing the Alternative Rites of Passage programme for girls, focusing on character development, cognitive restructuring, spiritual development, life skills training, anger management and employability skills. These topics are covered in scheduled sessions for six months. Girls who have undergone Alternative Rites of Passage are now being attached to mentors—this ensures that they stay uncut and also continue with their education.
- Supported health-care service providers to start a WhatsApp group to discuss FGM/C, including medicalization of FGM/C. Group members support each other, and compare notes and experiences as key expert witnesses to assess whether girls have undergone FGM/C.



### *Galvanizing social dynamics*

- **Eight communities, involving 3,218,234 individuals, made public declarations of FGM/C abandonment.**
- Community dialogue on FGM/C is seen as an excellent platform for gaining knowledge and passing on critical information. This platform provides a venue for awareness-raising, social mobilization and positive influence on individual or community attitudes, perceptions and norms. Community action plans to accelerate abandonment of FGM/C were developed as a result of the dialogue sessions. The community-specific action plan is geared to guide the sub-county- and county-level action plans that feed into the county governments’ Integrated Developments Plans, which are currently under review.
- Effort continued to build the capacity of community role models who champion abandonment of FGM/C. These are youth, men and women from all spheres of the target communities.
- The County Government in Baringo set up three resource centres to enable community members to carry out research and learn about FGM/C, gender-based violence and other development issues.
- Engaged schools in mobilization on FGM/C abandonment. Teachers trained 3,900 schoolchildren on FGM/C issues, reporting and referral that links girls at risk of, or affected by FGM/C to immediate and relevant law enforcement officers for response and action. All 3,900 children were tasked with administering two peer-to-peer discussions on FGM/C with schoolchildren and children not attending school—this translating to 7,800 children. Schools also serve as a safe temporary boarding shelter for girls escaping FGM/C. In 10 incidents, teachers acted as whistle-blowers for girls at risk of, or affected by FGM/C by reporting and referring cases to relevant authorities for action and response.

## Operational and financial information for 2016

### Implementing partners

#### Government partners

- Anti-FGM Board
- Office of the Director of Public Prosecution

#### Civil society partners

- African Centre for Coordinating Abandonment of FGM
- The Federation of Women Lawyers
- World Vision Kenya
- Womankind
- Adventist Development and Relief Agency Kenya

### Scale of operation of the Joint Programme in the country

The Joint Programme supported interventions implemented in 12 communities practising FGM/C, which are spread over 12 counties (Somali, Pokot, Orma, Wardei, Kisii, Kuria, Samburu, Pokot, Elgeyo-Marakwet, Kalenjin, Maasai and Rendille) and 20 schools.



#### Financial information (in USD)

- Budget: 1,915,058
- Expenditure: 1,765,656
- Expenditure rate: 92 percent

### Additional Information to share:

[http://www.the-star.co.ke/news/2016/03/07/rescued-girls-excel-in-examination-despite-fgm\\_c1307448](http://www.the-star.co.ke/news/2016/03/07/rescued-girls-excel-in-examination-despite-fgm_c1307448)

<https://citizentv.co.ke/news/police-rescue-40-girls-being-ferried-to-tanzania-149434/#>

[http://www.the-star.co.ke/news/2016/11/07/five-circumcisers-arrested-10-year-old-girl-rescued-in-kuria-west\\_c1451230](http://www.the-star.co.ke/news/2016/11/07/five-circumcisers-arrested-10-year-old-girl-rescued-in-kuria-west_c1451230)

<http://www.nation.co.ke/lifestyle/women/School-offers-a-break-from-tradition-for-Wajir-child-brides/1950830-3414626-vxvtolz/index.html>

War on FGM a boon for girls

A Maasai warrior is rallying men to fight female genital mutilation

<http://www.standardmedia.co.ke/ktnnews/video/watch/2000115910/-ktn-prime-stubborn-taboo-boy-who-is-ready-to-save-sister-from-undergoing-fgm-25th-october-2016>

[http://www.the-star.co.ke/news/2016/03/07/rescued-girls-excel-in-examination-despite-fgm\\_c1307448](http://www.the-star.co.ke/news/2016/03/07/rescued-girls-excel-in-examination-despite-fgm_c1307448)

For more details on the Joint Programme's work in Kenya, please see the companion booklet, *17 Ways to End FGM/C: Lessons from the Field*, especially number 16: "Power up partnerships".

Year the Joint Programme started supporting the country: 2011

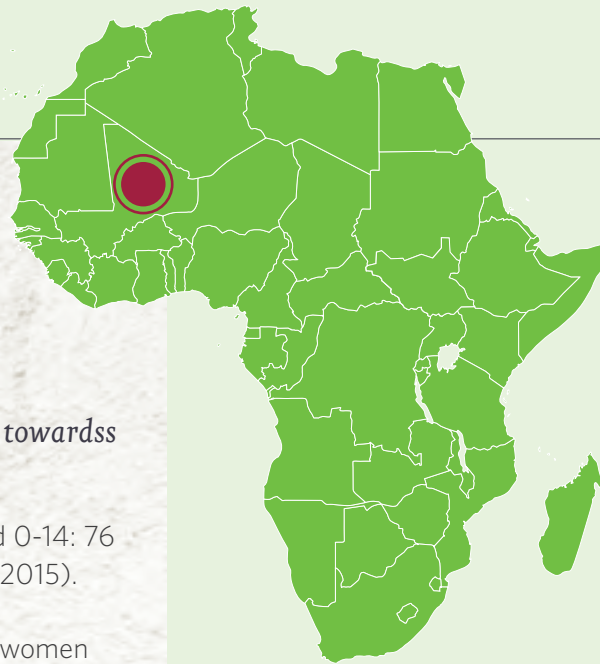
## Facts

### Data on prevalence of, and attitudes towards FGM/C

- » FGM/C prevalence among girls aged 0-14: 76 percent (MICS Key Findings Report, 2015).
- » FGM/C prevalence among girls and women aged 15-83 years: 21 percent (MICS Key Findings Report, 2015).
- » FGM/C prevalence rate among girls aged 0-15 in Kayes and Ségou regions is reported to be 83 percent and 55 percent, respectively (study funded by the Joint Programme in 2016 based on a physical examination of girls in health facilities).
- » Girls and women supporting the continuation of FGM/C: 75 percent (MICS Key Findings Report, 2015).
- » In 2016, 101,961 girls aged 0-17 were seen for consultations in health facilities in Ségou region; 24 percent (24,613 girls) had undergone FGM/C and 108 cases of complications linked to FGM/C were recorded (Child Protection database in Ségou region, which includes FGM/C indicators collected at health facilities).

### Legal and policy provisions on, or related to, FGM/C

- » There is no legal provision criminalizing FGM/C. However, Circular No. 99-0019 of 1999 forbids the practice of FGM/C in hospitals.
- » The government has had a budget line for work on FGM/C since 2004.
- » The National Action Committee for the Abandonment of Practices Harmful to the Health of Women and Children (Comité



National d'Action pour l'Abandon des Pratiques Néfastes), which was established in 1999, and the National Program for the Fight against FGM/C (Programme National de Lutte pour l'abandon de l'Excision), which was established in 2002, are the coordination mechanisms for the work on FGM/C.

## Key achievements in 2016



### Policy and legal framework

- **299 decision makers** (including members of the National Assembly, and elected officials from the Haut Conseil des Collectivités, the Conseil Economique Social et Culturel, and the Conseil National de la Jeunesse) took part in advocacy sessions by different partners. They expressed support for a law on gender-based violence, which would cover FGM/C. These efforts will continue in 2017.



### Provision of FGM/C-related services

- 513,019 girls and women received services related to FGM/C prevention and response.
- Supported 1,256 service delivery points for survivors of gender-based violence (162 among health providers; 706 child protection services at the community level and 388 prevention services such as legal clinics, schools, girls/women centres and non-governmental organizations).



### Galvanizing social dynamics

- 153 communities involving 76,201 individuals made public declarations of FGM/C abandonment. Prevention structures (child protection and gender-based violence committees, working groups, and youth clubs) and follow-up committees for the abandonment of FGM/C are set up at the community level. These facilitate dialogue with community members for the abandonment of harmful practices (FGM/C and child marriage), encourage referral of cases, follow up the effectiveness of abandonment conventions, and hold communities accountable in front of village leaders and signatory actors.

## Operational and financial information for 2016

### Implementing partners

#### Government partners

Ministère de la Promotion de la Femme, de l'Enfant et de la Famille (Ministry for the Advancement of Women, Children and the Family), which carried out activities mainly through two of its sub-structures:

- Programme Nationale de Lutte contre l'Excision (National Program for the Fight Against FGM)
- Directions Régionales de la Promotion de la Femme, de l'Enfant et de la Famille (Regional Departments for Advancement of Women, Children and the Family).

#### Civil society partners

- Management Sciences for Health
- Sini Sanuman
- Association Malienne pour le Suivi et l'Orientation des Pratiques Traditionnelles

### Scale of operation of the Joint Programme in the country

The Joint Programme supported interventions implemented in 214 villages, 27 zones (Sikasso city and Mopti city) and 145 schools located in five regions and six municipalities of the Bamako District.



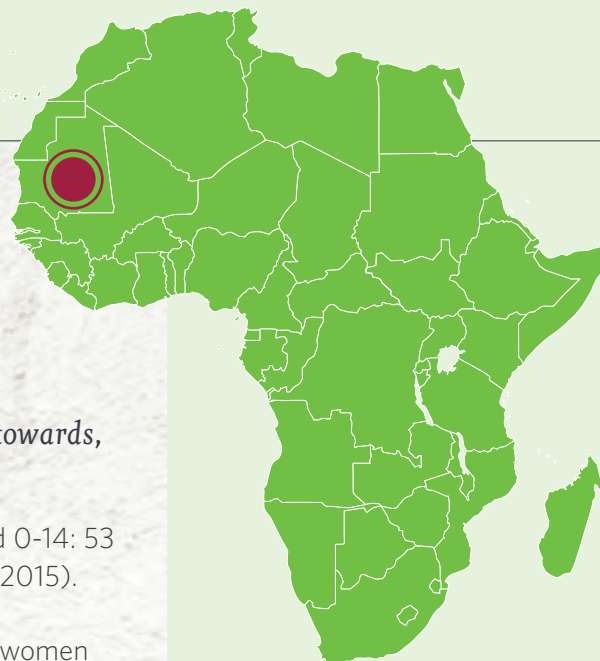
### Financial information (in USD)

- Budget: 851,183
- Expenditure: 773,015
- Expenditure rate: 91 percent

### Additional Information to share:

In 2016, the National Program for the Fight against FGM within the Ministry for the Advancement of Women, Children and the Family carried out a study on the prevalence rate of FGM/C among girls aged 0-15 in Kayes and Ségou regions. The study, which was based on clinical examination, revealed that prevalence rates were higher in communities with no interventions against FGM/C than in communities where Joint Programme partners and/or other actors were carrying out activities. In Ségou, FGM/C rates stood at 22.6 per cent among girls aged 0-4 in areas of interventions, compared with 50.6 per cent in areas where organizations were absent. Similarly, in Kayes, the rate for the same age group in areas of intervention was 25.2 per cent, compared with 52.2 per cent in areas where there were no interventions.

In 2016, the National Program for the Fight against FGM/C published a study, supported by UNICEF and UNFPA, on the analysis of actors influencing the abandonment of FGM/C in Mali (in French: "Analyse critique des acteurs d'influence à l'accélération de l'abandon de la pratique des MGF/Excision au Mali"). One of the results of the study is the move towards addressing FGM/C as part of the broader, and more holistic and rights-based, gender-based violence approach, which includes child marriage.



Year the Joint Programme started supporting the country: 2011

## Facts

### Data on prevalence of, and attitude towards, FGM/C

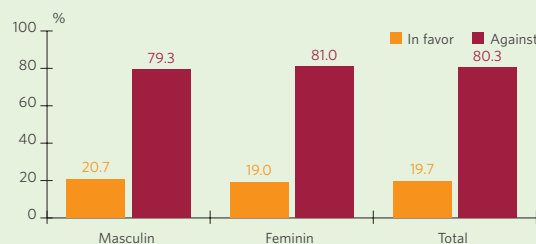
- » FGM/C prevalence among girls aged 0-14: 53 percent (MICS Key Findings Report, 2015).
- » FGM/C prevalence among girls and women aged 15-49: 66.6 percent (MICS Key Findings Report, 2015).
- » Girls and women supporting the continuation of FGM/C: 36 percent (MICS Key Findings Report, 2015).
- » Findings from a rapid survey undertaken in 2016:

In Mauritania, the Joint Programme used an innovative approach that is cost-effective and time efficient for measuring social norm change. A rapid survey was undertaken in 2016 in four Joint Programme target provinces—Assaba, Brakna, Tagant and Guidimaga—to gather information on the indicator related to change in social norms (degree of shift in social norm upholding FGM/C in programme areas; this is a composite indicator made up of the percentage of individuals not supporting continuation of FGM/C, the percentage of individuals who believe others will cut and the percentage of individuals who believe they will be sanctioned if they do not cut).

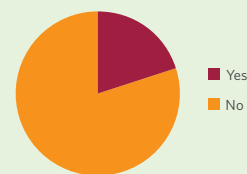
The findings indicated a readiness of the majority of those interviewed to adopt the new social norm of keeping girls intact. This is consistent with the decline observed in these provinces in the latest 2015 MICS (i.e. lower rates for the age group 0-14 than the age group 15-49).

## Results of the rapid survey:

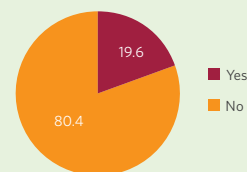
### Attitude in favor or against keeping the practice of FGM/C



### Do you think that the others will continue with the practice of FGM/C?



### Do you think that those who stop practice will be (should be) sanctioned?





PREVALENCE RATES OF FGM/C, 2015 MICS 5		
Province	Prevalence, 15-49 (%)	Prevalence, 0-14 (%)
Assaba	94.5	86.1
Brakna	62.8	46.0
Tagant	81.3	55.1
Guidimagha	96.2	74.8
<b>NATIONAL</b>	<b>66.6</b>	<b>53.2</b>

The tool will be used to determine changes in social norms among communities participating in education sessions and community dialogues.

### *Legal and policy provisions on, or related to, FGM/C*

Legal and policy provisions are the Ordinance for protection of the child (2005); the law on reproductive health, including criminalization of FGM/C (2016); and the National FGM/C Strategy and Action Plan, elaborated in 2008, updated in 2015 and validated in 2017. The National Strategy on Reproductive Health (2016-2020), updated in 2015, incorporates FGM/C as a public health concern. The Strategy on accelerated growth and prosperity (2016-2030) incorporates the abandonment of FGM/C as a priority.

A government budget line for work on FGM/C was introduced in 2016. A national coordination unit working on the promotion of FGM/C abandonment is operational, with staff and operational costs.

At a decentralized level, three communes (Legran in Assaba, and Devaa and Timzin in Hodh Elgharbi) have incorporated a budget line for the promotion of FGM/C abandonment in their communal plan.

A steering committee for the work on FGM/C was established in 2007, and a national mechanism for the collection of harmonized data was established in 2015.

## Key achievements in 2016



### *Policy and legal framework*

- Law reinforcement:
  - » Number of arrests: 0
  - » Number of cases brought to court: 1
  - » Number of convictions and sanctions: 0

An advocacy campaign initiated in 2010 by the Joint Programme, in partnership with national non-governmental organizations and parliamentary groups, resulted in a strengthened regulatory framework in Mauritania that protects the rights of girls and women. Two new bills were adopted by the Council of Ministers: one on gender-based violence and another on reproductive health. Both include a ban on FGM/C and legal sanctions for perpetrators in accordance with the Penal Code. The new law addresses concerns raised by children, women and girls' rights activists and the CEDAW committee that the Penal Protection Code for Children passed in 2005 was insufficient, because it only punished FGM/C when it "causes harm" (article 12).



### *Provision of FGM/C-related services*

- 2,291 girls and women received services related to FGM/C.
- FGM/C has been incorporated in the National Health information System.
- 1,656 programme managers from the public sector (health, education, justice, Islamic affairs, security) have been trained on adequate service provision.
- Child protection systems in the eight regions targeted by interventions have incorporated FGM/C for identification, referral and follow-up.



### Galvanizing social dynamics

- 316 communities involving 686,761 people participated in public declarations of FGM/C abandonment.
- 12 surveillance committees involving religious and community leaders were operationalised.
- 129,962 students, teachers, women, and youth from active networks and associations were sensitized on the health consequences of FGM/C and committed to disseminate the information within their sectors.

## Operational and financial information

### Implementing partners

#### Government partners

- Ministry of Social Affairs, Children and Family
- Health Ministry
- Youth and Sports Ministry
- Ministry of Islamic Affairs
- Ministry of Communication and Relations with the Parliament

Government implementing partners also channel funding to civil society organizations: ACTIONS, CORDAK, RASST, ODZASAM, COAN, RAHMA, SIFA HANKI and ASFM.

#### Civil society partners

- CORDAK: Coordination des Réseaux du Développement en Assaba
- RASST: Réseau pour l'Action Sanitaire et Social du Tagant
- ODZASAM: Organisation pour le Développement des Zones Arides et Semi Arides en Mauritanie
- World Vision: World Vision International
- Tostan: ONG TOSTAN
- COAN: Coordination des Ongs et Association de Nema

- ADICOR: Appui au Développement Intégré des Communautés Rurales
- MDM: Medicos Del Mundo
- UNION RAHMA: ONG Union Rahma des coopératives de la commune de Mbalal
- ASFM: Association des Sages Femmes de Mauritanie
- AMPF: Association Mauritanienne pour la Planification Familiale
- SIFA HANKI INAL HANDE: Rénovation des valeurs anciennes en faveur du développement.

### Scale of operation of the Joint Programme in the country

The Joint Programme supported interventions in 152 villages in 8 regions (Brakna, Trarza, Gorgol, Guidimakha, Assaba, Tagant, Hodh Echargui and Hodh El Gharbi), 216 health facilities and 682 schools.



### Financial Information (in USD)

- Budget: 746,760
- Expenditure: 746,147
- Expenditure rate: 100 percent

### Additional Information to share:

Video Clip FGM fistula <https://www.facebook.com/539316282772320/videos/1322425897794684/>

Video experience midwife, FGM/C <https://youtu.be/Bbr8z3wF9ts>



Community Youth raising their voices against FGM/C at the Zero Tolerance Day in Mauritania

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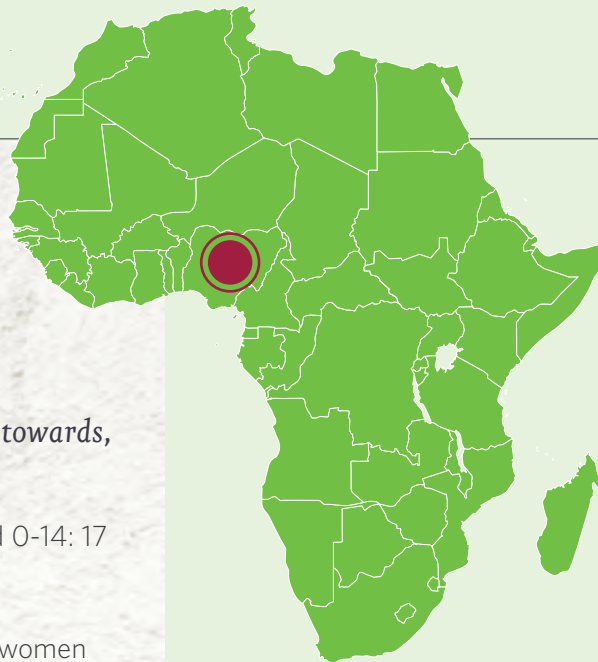
BY THE NUMBERS



Youth raising their voices against FGM/C at the Day of Zero Tolerance in Mauritania

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Year the Joint Programme started supporting the country: 2014

## Facts

### Data on prevalence of, and attitudes towards, FGM/C

- » FGM/C prevalence among girls aged 0-14: 17 percent (DHS, 2013).
- » FGM/C prevalence among girls and women aged 15-49: 25 percent (DHS, 2013).
- » Women aged 15-49 who have undergone FGM/C and were cut before age 5: 82 percent (NDHS, 2013).
- » Girls aged 0-14 who have undergone FGM/C and were cut before age 1: 15.8 percent (NDHS, 2013).
- » Men and women aged 15-49 who think that FGM/C should stop—62 percent (men) and 64 percent (women) (DHS, 2013).
- » Girls and women supporting the continuation of FGM/C: 23 percent (DHS, 2013).
- » Men and women aged 15-49 who think that FGM/C is required by their religion—24 percent (men) and 15 percent (women) (DHS 2013).

Situation Analysis-Knowledge Attitude and Practices and Social Norms Analysis of Female Genital Mutilation/ Cutting to inform strategies for the implementation of UNFPA/UNICEF Joint Programme on FGM/C abandonment in Nigeria (UNFPA & UNICEF, 2015)

- » FGM/C prevalence was 76 percent in Osun State, 71 percent in Ekiti State, 70 percent in Oyo State, 56 percent in Ebonyi State, 49 percent in Imo State and 49 percent in Lagos State (average—61.1 percent).

- » FGM/C prevalence ranged from 98 percent (Kajola, Oyo State) to 20.9 percent (Somolu, Lagos State).

### Legal and policy provisions on, or related to, FGM/C

- » The Violence Against Persons Prohibition Act (2015) is the legal provision on FGM/C. In addition, there is a National Policy and Plan of Action for the Elimination of FGM in Nigeria (2013-2017).
- » The National Technical Working Group (established in 2014) and the State Technical Committees (established in 2015 in the four focus states—Ebonyi, Ekiti, Imo and Osun) are the coordination mechanism for the work on FGM/C.

### Key achievements in 2016



#### Policy and legal framework

- There were no cases of law enforcement in 2016.
- The National Response Plan to FGM/C and the Campaign to End FGM/C were launched by the wife of the President. Sixty-four media houses (18 television, 13 radio and 33 newspapers) reported on the event. This event was repeated in six states (Ebonyi, Ekiti, Imo, Osun, Lagos and Oyo) by wives of governors of these states

in collaboration with other key stakeholders. Twelve key policy statements supporting FGM/C abandonment from government (executive, legislature, judiciary), traditional rulers and religious leaders were delivered at the launch of the governors wives' campaigns to end FGM/C.

- The Violence Against Persons Prohibition Act was enacted in Oyo State.
- High-level discourse was strengthened and leveraged to generate stronger commitments from policy, legislative and community actors to enact legislation and provisions to curb impunity for FGM/C. Immediate results have been the formation of state committees and a taskforce to (a) review provisions within FGM/C legislation, with a view to advancing efforts for reforms, and (b) promote advocacy to develop enforcement mechanisms for existing legislation.
- Support is being provided to the initiative to review and integrate FGM/C indicators into the National Health Information Management Systems. Efforts are also being made to integrate FGM/C into gender-based violence provisions within humanitarian programming and assistance.



### *Provision of FGM/C-related services*

- **72,277 people (43,162 women, 12,236 men, 13,885 girls and 2,994 boys)** were reached with information and services on FGM/C.
- **474** health workers (451 female and 23 male) were trained in services for prevention and management of FGM/C. The capacity of **150** Child Protection Network members was increased on prevention, protection and care services.
- **500 female midwives and nurses** participated in plenary sessions on anti-medicalization during the Nursing and Midwifery Council of Nigeria celebration of International Midwifery Day in Nigeria.
- There is ongoing discussion with the Nursing and Midwifery Council of Nigeria on the review of the existing training curriculum for nurses and midwives to mainstream the World Health Organization training module on FGM/C into the council's revised manual and ensure sustained training and retraining of nurses and midwives on a regular basis.
- The Joint Programme promoted the integration of FGM/C service provision in primary and secondary health-care facilities by supporting the development of protocols and case management forms on the management of FGM/C at health facilities in communities where FGM/C is practised.



### *Galvanizing social dynamics*

- 953 communities, involving 3,468,720 individuals, made public declarations of FGM/C abandonment.
- 34,543 people (12,364 men, 18,527 women, 1,633 boys and 2,019 girls) participated in intergenerational dialogues and household discussions to promote the necessary behavioural change for consensus building and commitment to abandoning FGM/C using peer learning and community approaches.
- Strong efforts were made to use media for wider social mobilization: 51 weekly Twitter conferences on FGM/C abandonment (hashtag #Endcuttinggirls) held by young social media advocates reached more than 100,000 unique Twitter accounts; 15,743 Facebook accounts were reached with 3,341 "likes" through the Facebook of Social Media Campaign; a 13-episode radio drama serial on FGM/C (Pim Pim Pim) was produced by 10 radio stations in five states; and 124 media professionals (63 women and 61 men) from 10 states participated in media dialogues and a field trip to mark the International day of Zero Tolerance for FGM/C.

- The young social media advocates for FGM/C abandonment are using the following social media platforms for the FGM/C abandonment campaign: Twitter ([www.twitter.com/endcuttinggirls](http://www.twitter.com/endcuttinggirls)) and hashtag #endcuttinggirls), Facebook ([www.facebook.com/endcuttinggirls](http://www.facebook.com/endcuttinggirls)), Blogsite ([www.endcuttinggirls.org](http://www.endcuttinggirls.org)) and WhatsApp (EndFGM/C #endcuttinggirls).
- 6,196 women (5,402 in Ebonyi and 794 in Imo) were sensitized at the Women's Annual Home and Abroad Meeting (in August) under the social norm change campaign "Odimma Nwanyibu Ka Chi Siri Ke" ("wholeness of female is as created by God").
- A community mapping exercise conducted in the focal 23 local government areas (in Osun, Ebonyi, Ekiti and Imo states) identified community governance structures, events, schedules, key gatekeepers, opinion leaders, and the nature and type of FGM/C practice in the areas; documented GPS data for independent access and evidence-based monitoring of activities; and identified FGM/C Community Champions. The outcome of this mapping exercise set the pace for community dialogues organized by implementing partners and the FGM/C Community Champions.

## Operational and financial information for 2016

### Implementing partners

#### Government partners

- Federal Ministry of Health
- Federal Ministry of Women Affairs and Social Development
- State Ministry of Health in Ebonyi, Ekiti, Imo, Lagos, Osun and Oyo
- State Ministry of Women Affairs and Social Development in Ebonyi, Ekiti, Imo, Lagos, Osun and Oyo
- National Orientation Agency in Ebonyi, Ekiti, Imo, Osun and Oyo

- The following civil society organizations are engaged as sub-grantees by government implementing partners:
- ABC Foundation
- Civil Resource Development and Documentation Centre
- Education as a Vaccine Against AIDS
- Women of Divine Destiny Initiative, Imo State

#### Civil society partners

- Action Health Incorporated
- Centre for Women Studies and Intervention
- Family Succour and Upliftment Foundation, Ebonyi State
- Hope for Women in Nigeria Initiative
- Shericare Foundation
- Society of Obstetric and Gynecology of Nigeria
- Young Men's Network
- Youthhubafrica

### Scale of operation of the Joint Programme in the country

The Joint Programme supported interventions implemented **in 201** communities in 23 local government areas in Osun, Ebonyi, Imo and Ekiti states; and 180 health-care centres and 24 secondary schools in Ebonyi and Imo states.



#### Financial Information (in USD)

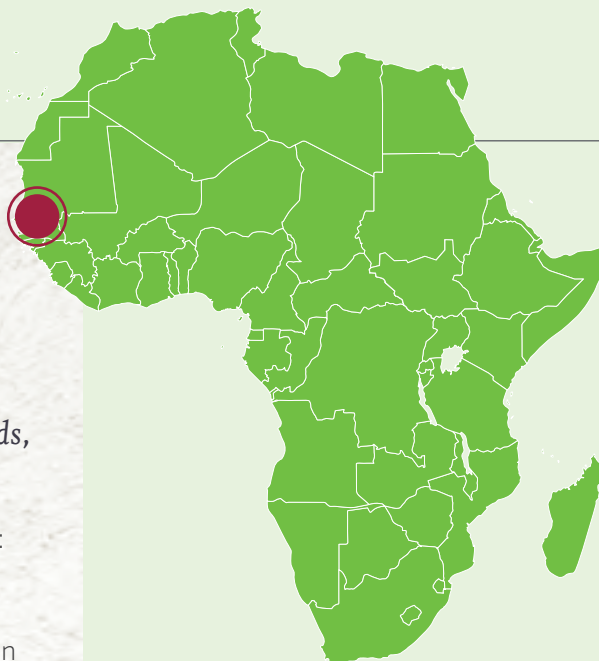
- Budget: 1,230,931
- Expenditure: 1,029,867
- Expenditure rate: 84 percent

### Additional Information to share:

Media Coverage:

<https://www.thecable.ng/imprisoned-without-offence-pain-filled-asexual-world-genitally-mutilated-women>

<https://www.thecable.ng/will-save-girl-child-circumcisers-knife>



Year the Joint Programme started supporting the country: 2008

## Facts

### Data on prevalence of, and attitude towards, FGM/C

- » FGM/C prevalence among girls aged 0-14: 15 percent (Continuous DHS, 2015).
- » FGM/C prevalence among girls and women aged 15-49 years: 24 percent (Continuous DHS, 2015).
- » Girls and women supporting the abandonment of FGM/C: 78 percent (Continuous DHS, 2015).
- » Men supporting the abandonment of FGM/C : 80 percent (Continuous DHS, 2015).
- » Women thinking that FGM/C is prescribed by religion: 14 percent (Continuous DHS, 2015).
- » Men thinking that FGM/C is prescribed by religion : 16 percent (Continuous DHS, 2015).

### Legal and policy provisions on, or related to, FGM/C

- » Senegal has a legal framework that criminalizes FGM (Law 99-05 from 29 January 1999).
- » There is a national budget line of 50,000,000 CFA francs allocated to the Ministry of Family, Women and Children for actions related to FGM/C abandonment.
- » There is a national coordination mechanism—the National Technical Committee—chaired by the Ministry of Women, Family and Children.

## Key achievements in 2016



### Policy and legal framework

- Law enforcement:
  - » Number of arrests: 0
  - » Number of cases brought to court: 0
  - » Number of convictions and sanctions: 0
- In 2016, the decentralized child protection committees contributed to the prevention, detection and care of FGM/C cases at community level. Through those committees, 222 cases of FGM/C were reported and taken care of.
- At the policy and institutional level, strategic documents were elaborated, contributing to FGM/C abandonment. A national child protection plan of action (2016-2018), including the abandonment of harmful practices and most notably FGM, was also adopted. Also adopted was a national child protection plan of action (2016-2018), including the abandonment of harmful practices, most notably FGM/C. A strategy on gender equality (2016-2026) and a childrens' code are in the process of being validated.



### Provision of FGM/-related services

#### 67,719 girls and women received services related to FGM/C.

The interventions supported by the Joint Programme have resulted in the following:

A school environment with the capacity to prevent and respond to FGM/C:

- 50 schools used curricula that included an approach to gender-based violence and FGM/C, and 80 teachers had their capacities reinforced on FGM/C and adolescent reproductive health.
- 130 school clubs offered awareness-raising sessions on sexual and reproductive health, including FGM/C. These included referral to care structures.
- 57,659 students (31,588 girls and 26,071 boys) benefited from 1,388 educational sessions on gender-based violence, including FGM/C, through school clubs.
- 33,417 girls and women were trained on human rights and the prevention of and response to cases of abuse and violence including FGM/C.

Health actors committed to the abandonment of FGM/C and their capacities reinforced:

- A training module for health professionals on the care of FGM/C survivors was elaborated by the Ministry of Health and 232 health providers were trained.

Multisectorial protection networks reinforced to provide prevention and response services for FGM/C:

- 965 health and social protection actors, teachers, magistrates and local leaders had their capacities reinforced on child protection standards, including FGM/C and 3,191

adolescents received information on FGM/C through the green line GINDIMA.



### Galvanizing social dynamics

- No public declarations of FGM/C abandonment were made in 2016.

The capacities of traditional and religious leaders were reinforced in 2016:

- 120 local leaders had their capacities reinforced with regard to FGM/C abandonment, and committed to implementing the United Nations resolutions on FGM and child marriage.

The capacities of youth and media were reinforced:

- 120 young leaders (80 girls and 40 boys) had their capacities strengthened on the negative consequences of FGM/C and the use of social media. They now organize digital campaigns on FGM/C.
- 50 journalists were trained, and community radio was promoted.
- The U Report interactive platform (a social messaging tool that allows anyone from any community to respond to polls, report issues, support child rights and work as positive agents of change on behalf of people in their country) was used to interview 1,248 youth on FGM/C.
- Several social media campaigns were initiated: Touche Pas a Ma Soeur (Don't Touch My Sister—a social media campaign to prevent FGM/C), the Mannequin Challenge (a one-minute video on FGM/C), the #KaayTwitter Twitter campaign on FGM/C and the Facebook page "Words to Youth".

Sensitization activities at community level contributed to:



- Sensitization of 244,611 people within the framework of the Tostan programme—this led to 799 villages putting in place a mechanism to follow up on the declarations of FGM/C abandonment and to 170 villages starting the process leading towards declarations of abandonment
- Sensitization of 243,381 other members of the community (121,110 men and 122,271 women) through local child protection committees on positive social norms to prevent and respond to violence against children, especially FGM/C
- Community debates reaching 55,000 people (15,000 women, 12,000 men, 14,000 girls and 10,000 boys) following 135 film showings
- Nine cross-border events for the promotion of FGM/C abandonment, involving 1,596 people from Senegal, Mauritania, Gambia and Guinea Bissau
- 184 villages starting social mobilization activities involving 5,241 people that should lead to public declarations of abandonment in 2017.

- Tostan
- AMREF Health Africa
- VOTOMIBILE (ligne verte Guindima)
- Cinéma Numérique Ambulant
- Fédération des Associations Féminines du Sénégal

### *Scale of operation of the Joint Programme in the country*

The Joint Programme was implemented in the five high-prevalence regions ( Matam, Kolda, Sédhiou, Kédougou and Tambacounda), involving 799 villages, 11 health facilities and 50 schools.



### *Financial Information (in USD)*

- Budget: 1,230,931
- Expenditure: 1,029,867
- Expenditure rate: 84 percent

### **Additional Information to share:**

Study on the impact of public declarations of FGM abandonment, January 2016

## Operational and financial information

### *Implementing partners*

#### **Government partners**

- Ministry of Women, Family and Children
- Ministry of Health and Social Action
- Ministry of Justice
- Ministry of Education
- Ministry of youth
- Child Protection Committees

#### **Civil society partners**

- Groupe pour l'Étude et l'Enseignement de la Population
- Centre Régional de Formation, de Recherche et de Plaidoyer en Santé de la Reproduction

Year the Joint Programme started supporting the country: 2009

## Facts

### Data on prevalence of, and attitudes towards, FGM/C

- » FGM/C prevalence among women aged 15-49: 98 percent (World Bank/UNFPA Study on FGM/C, 2005).
- » FGM/C prevalence among girls and women aged 15-49: 98 percent (MICS, 2006).
- » Girls and women supporting the continuation of FGM/C: 65 percent (MICS, 2006).

### Legal and policy provisions on, or related to, FGM/C

- » Article 15 of the Provisional 2012 Constitution of the Federal Republic of Somalia states that “Female circumcision is a cruel and degrading customary practice, and is tantamount to torture. The circumcision of girls is prohibited.”
- » The Federal Government of Somalia, Puntland State and Somaliland have a draft zero tolerance FGM/C Bill whose enactment is being negotiated by the government line ministries and civil society.
- » In Puntland, the President signed a government policy outlawing FGM/C in 2014. The Ministry of Health has also developed a decree against FGM/C medicalization, which was signed in a joint ministerial event on FGM/C abandonment in Puntland in 2014.
- » An FGM/C taskforce coordination meeting, co-chaired by the Federal Ministry of Women and Human Rights Development and the Federal Ministry of Health, was established in Mogadishu in 2015.



- » An interministerial FGM/C taskforce was established in Puntland in 2014.
- » An FGM/C taskforce that is co-led by the Ministry of Labor and Social Affairs and the Ministry of Health was established in Somaliland in 2015.

## Key achievements in 2016



### Policy and legal framework

- Puntland—a zero tolerance FGM fatwa released in 2014 is being disseminated and used as an advocacy tool for the enactment of the zero tolerance FGM Bill.
- Somaliland—an FGM/C Bill is pending before parliament, and a draft FGM/C policy is waiting to be taken to the Council of Ministers.
- South and Central Somalia—community, religious and political support is being garnered for issuance of a fatwa, and to support finalization of the anti-FGM/C policy and legislation.



### Provision of FGM/C-related services

- 748 girls and women received medical, psychosocial and protection services related to FGM/C.
- FGM/C services were integrated within the health or gender-based violence service through antenatal and postnatal care of women seeking services, provided by midwives. Women who are suspected of having undergone FGM/C are also provided with education and psychosocial support with obstetric labour. Women and young girls who report possible denials of marriageability because they have not undergone the practice are also provided with psychosocial support in gender-based violence service facilities.
- A protocol on clinical management of rape details management of FGM/C complications. In Somaliland, 210 health providers were trained and sensitized on the protocol, and have provided services to 80 FGM/C survivors.



### Galvanizing social dynamics

- 150 communities, involving 90,000 individuals, made public declarations of the abandonment of FGM/C.
- Key strategies have been applied to change social norms, including engaging the First Lady of Puntland and Somaliland as a goodwill ambassador, implementing a social/gender norms programme to eliminate the social drivers of all forms of gender-based violence and providing alternative livelihoods for former female circumcisers.
- Faith-based entities play a major role in changing social norms towards harmful practices such as FGM/C. The establishment of the Somali Religious Leaders Networks and Puntland Religious Leaders Network (called RAHMA, which means “caring and loving”) play an important role. Under the leadership of the religious leaders’ networks, community engagement has attracted more attention to the need to abandon the practice. Six media debates with prominent religious leaders on the subject of FGM/C were aired on Somali national television.
- Standardized guidelines for FGM/C public declarations were developed and endorsed in Puntland.



Newly graduated midwives to work on FGM prevention and complications @ UNFPA Somalia

## Operational and financial information for 2016

### Implementing partners

	Somaliland	Puntland	Federal Government of Somalia
Government partners			
Ministry of Labor and Social Affairs	x		
Ministry of Religion	x		
Ministry of Health	x	x	x
Ministry of Justice	x		
Ministry of Justice, Religious Affairs Rehabilitation		x	
Ministry of Endowment and Religious Affairs			x
Ministry of Women Development and Family Affairs		x	
Ministry of Women, Human Rights and Development			x
Civil society partners:			
Muslim Aid		x	
PUNCHAID		x	
Y-PEER Network	x	x	
Tadamun Social Society		x	
Shilcon		x	
Initiative for Research and Development Action	x		
Comprehensive Community Based Rehabilitation in Somaliland	x		
International Horn University	x		
Women's Action for Advocacy and Progress Organization	x		
Community Empowerment and Development Action			x
Sedhuro			x
Comitato Internazionale Per Lo Sviluppo Dei Popoli			x
SWACEDA			x
Save Somali Women and Children			x

### Scale of operation of the Joint Programme in the country

The Joint Programme supported interventions implemented in 170 communities and 50 health facilities located in 14 districts.



### Financial information (in USD)

- Budget : 1,454,278
- Expenditure : 1,444,605
- Expenditure rate : 99 percent

### Additional Information to share:

Human interest story  
[https://www.unicef.org/somalia/reallives\\_18051.html](https://www.unicef.org/somalia/reallives_18051.html)

Video of former FGM practitioner now activist against FGM  
<https://www.youtube.com/watch?v=8qdhAE9fhpc&feature=youtu.be>



Discussion of Health Issues, including FGM, affecting women and girls in Somalia

@ UNFPA Somalia

BY THE NUMBERS



Outreach Campaign by MOWDAFA

@ Sebastian Rich, UNICEF, Somalia

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Year the Joint Programme started supporting the country: 2008

## Facts

### Data on prevalence of, and attitudes towards, FGM/C

- » FGM/C prevalence among girls aged 0-14: 32 percent (MICS, 2014).
- » FGM/C prevalence among girls and women aged 15-49: 87 percent (MICS, 2014).
- » Girls and women supporting the continuation of FGM/C: 41 percent (MICS, 2014).
- » A 2016 secondary analysis of FGM/C trends using the MICS 2014 data indicates a slight but continuous decline in FGM/C prevalence overall in Sudan over the past few years across all age groups.

The prevalence among the youngest generation (0-14 years), after adjusting for risk of future cutting, is 66.3 percent, compared with 88.3 percent among 30-34-year-olds and 91.8 percent among 45-49-year-olds (the latter two are actual prevalence). This corresponds to a 25 percent decrease in prevalence between the generations aged 0-14 and 30-34, and a 21 percent decrease in prevalence between the generations aged 0-14 years and 15-29 years.

### Legal and policy provisions on, or related to, FGM/C

- » There is no national-level legal provision criminalizing FGM/C. However, there are state-level laws on FGM in South Kordofan, South Darfur, Gedaref and Red Sea.
- » There has been a government budget line for work on FGM/C since 2014.



- » The National Task Force for Abandonment of FGM/C and Child Marriage (established in 2014) is the coordination mechanism for the work on FGM/C.

## Key achievements in 2016



### Policy and legal framework

- An amendment to the Criminal Act (1991), involving introduction of a new Article (141) criminalizing FGM/C, was approved by the Council of Ministers (Cabinet) in September 2016 and is now pending endorsement by the parliament. A national taskforce was established to accelerate the endorsement of the national law.
- The National Women Empowerment Policy and National Strategy for Family Development were updated and validated in 2016.



### Provision of FGM/C-related services

- 10,254 girls and women received services related to FGM/C.
- 68,250 vaccination cards designed with Saleema messages and colours were printed, and have been distributed to all health facilities in seven localities in Khartoum state.

- As part of promoting integrated approaches, a pilot of “Born Saleema” in health facilities in Khartoum and Northern states resulted in 16,655 parents being counselled in health facilities; of these, 13,261 agreed to leave their daughters uncut. Health promotion resulted in 2,402 community members agreeing to keep their daughters uncut. More than 170,500 newborns were registered through the Extended Programme on Immunization system.



### *Galvanizing social dynamics*

- 42 communities, involving 84,000 individuals, made public declarations of the abandonment of FGM/C in 2016.
- 320 community facilitators trained and equipped with Saleema community dialogue approaches in 160 communities and 120 state supervisors received a Training of Trainers session on the Saleema Toolkit (see [www.saleema.net](http://www.saleema.net) for more information on the Saleema campaign).
- The first national conference on FGM/C organized by youth was held in 2016 under the theme “Youth against female genital cutting: inspiring a positive environment for community mobilization”. It brought together representatives of Sudanese youth (18-34 years) from 18 states to share experiences in community mobilization, advocacy, awareness-raising and sensitization, and resulted in a National Youth Declaration and the creation of a Youth Network to Abandon FGM/C.
- A Sudan faith-based organizations network was created, and 576 new religious advocates were trained in the campaign to end FGM/C and child marriage in 2016 (more than 1,700 have been trained so far).
- In Blue Nile, South Darfur, North Kordofan and Kassala, the state Ministries of Health conducted regular (up to 20 per state) media community dialogues on using community radio broadcasts to raise awareness of reproductive health and rights, and to support the messaging on abandonment of gender-based violence, FGM/C and child marriage.
- Under the leadership of the National Council on Child Welfare, the social movement for FGM/C abandonment was scaled up, and the feasibility of the Saleema initiative was enhanced through facilitation of 155 events in the 18 states. A total of 63,340 participants took part in the events: 21,802 men, 24,026 women; 8,161 boys and 9,351 girls.
- The “Grandmothers Protecting Girls” continued as part of the Tutti Initiative interventions supported by the Joint Programme. The initiative engages and transforms grandmothers into agents of positive change for abandonment of FGM/C.
- Raik Shino (meaning “What do you think?”), which is the first online dialogue platform to address FGM/C in Sudan, continued facilitating the exchange of ideas. In addition, discussion is under way for the establishment of a Saleema discussion platform within the Saleema Initiative website ([saleema.net](http://saleema.net)). The contents of the platform could include discussions, questions, competitions and other online activities that support a change in social norms in the community regarding FGM/C.
- A comprehensive mapping of the community structure was conducted. It provided insights into the existing structure, institution, capacities and key actors of 40 communities in North Darfur and 40 communities in South Kordofan, and previous or ongoing FGM/C abandonment activities to build on. It also indicated opportunities that may be exploited by investing in community and religious leaders. It also identified gaps in youth and women’s organizations. The mapping has provided valuable baseline data, targets and entry points

in the targeted communities reached previously, where planned interventions can build additional momentum for abandonment

- The Sudan Midwifery Association collected 1,483 signatures from the midwifery community (585 students and 898 practitioners) from Gedarif, North Kordofan, South Darfur and Khartoum states as a collective call for a petition to enforce a law against FGM/C. The Sudan Pediatrician Society also signed petitions in 2016 to end FGM/C in their medical practice.

## Operational and financial information for 2016

### Implementing partners:

#### Government partners

- National Council for Child Welfare
- Federal Ministry of Welfare and Social Services
- Federal Ministry of Health
- Combating Violence Against Women Unit
- Ministry of Guidance and Endowment
- State Councils for Child Welfare
- State Ministries of Social Welfare
- Central Bureau of Statistics

#### Civil society partners

- Ahfad University for Women and Consortium
- Alag Media Center (Saleema.net)

### Scale of operation of the Joint Programme in the country

The Joint Programme supported interventions implemented in 188 communities and eight health facilities located in eight states of Sudan.



#### Financial information (in USD)

- Budget: 888,481
- Expenditure: 862,209
- Expenditure rate 97 percent

3. Research agenda dissemination workshop, research abstracts

<https://drive.google.com/open?id=0B-dNcILDUQCMX1dZTXpYWWJLZWw>

4. Tutti Island Initiative

5. UPR Recommendations

6. M&R assessment report -translated in Arabic

### Select media coverage:

FGM/C Research Dissemination Forum in Alrakoba.net

<http://www.alrakoba.net/news-action-show-id-255326.htm>

### Sudan Youth Against FGM/C Conference

[http://www.news.sudanvisiondaily.com/index.php/opinion/feture/2304-youth-conference-on-abandonment-of-fgm-in-n-kordofan.](http://www.news.sudanvisiondaily.com/index.php/opinion/feture/2304-youth-conference-on-abandonment-of-fgm-in-n-kordofan)

<http://www.suna-sd.net/suna/showNews/315619/ar> <http://www.suna-sd.net/suna/showNews/315619/ar>.

[http://www.ashorooq.net/index.php?option=com\\_content&view=article&id=62438&catid=98&Itemid=1163.](http://www.ashorooq.net/index.php?option=com_content&view=article&id=62438&catid=98&Itemid=1163)

AL Sahafa newspaper:

[http://alsahafasd.com/3638739.](http://alsahafasd.com/3638739)

[http://kordofanmedia.com/?p=404.](http://kordofanmedia.com/?p=404)

UNFPA Arab States Regional Office social media:

[https://www.facebook.com/UNFPAArabStates/photos/a.414721731907095.89123.414715048574430/1231608560218404](https://www.facebook.com/UNFPAArabStates/photos/a.414721731907095.89123.414715048574430/1231608560218404/?type=1&theater)

[/?type=1&theater](https://www.facebook.com/UNFPAArabStates/photos/a.414721731907095.89123.414715048574430/1231608560218404/?type=1&theater)

For more details on the Joint Programme's work in Sudan, please see the companion booklet, *17 Ways to End FGM/C: Lessons from the Field*, especially number 2: "Accentuate the positive".





Kaltoum Hamid and her daughter, Ayda Khojali Abdallah

@ UNFPA Sudan and the Tutti Island Initiative

BY THE NUMBERS



Grandmothers protecting girls, taking pledge of abandonment in Tutti Island.

@ UNFPA Sudan and the Tutti Island Initiative

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Year the Joint Programme started supporting the country: 2009

## Facts

### Prevalence of FGM/C

» In Uganda, FGM/C is practised in Eastern Uganda among the Sabinu, Pokot, Tepeth and Kadam ethnic communities. Among the practising communities: prevalence is 95 percent among the Pokot and Tepeth in Karamoja region and 50 percent among the Sabinu community in Sebei region (UNFPA, 2011). The national average prevalence is 1.4 percent among girls and women aged 15-49. Prevalence is estimated as 2.4 percent in Sebei region and 4.8 percent in Karamoja region (UDHS, 2011).

» Recent studies suggest a decline in the practice in the country. A U-Survey preliminary report (UBOS, 2016) shows prevalence in Bukwo district at 28 percent, Kween district at 21 percent, and Kapchorwa district at 13 percent in Sebei region this is down from a high of 50 percent in Sebei region, and from 95 percent to 67 percent in the Karamoja districts.

### Legal and policy provisions on, or related to, FGM/C

» The Prohibition of FGM Act (2010), guidelines for prevention and response to FGM/C and FGM regulations (2013), the Children Act Amendment (2016)<sup>7</sup>, and the National Policy on Elimination of Gender Based Violence<sup>8</sup> and National Action Plan on Elimination of Gender Based Violence 2016-2021. These hinge on the 1995 Constitution of Uganda, the Domestic Violence Act 2010, the Penal Code and the Children's Act.

<sup>7</sup> Clause 10 of the Amended Act protects children from violence, harmful practices and particularly from FGM/C

<sup>8</sup> The policy integrates Female Genital mutilation through the introduction, problem analysis, the goals and objectives, strategies, monitoring framework to financing and the National Action Plan (NAP)

» A government national budget line dedicated for work on FGM/C was introduced in 2016. In addition, district local governments allocate resources for FGM/C abandonment and mainstream activities into other departmental programmes, such as health and community development.

» The National FGM Alliance is in place as a national coordinating body, providing policy and programme advice to government. Dialogue around establishment of an independent government body charged with FGM/C interventions and abandonment is ongoing.



## Key achievements in 2016

### Policy and legal framework

- » Number of cases reported: 32
- » Number of Arrests: 6
- » Number of cases brought to court: 0

- Six arrests out of the 32 FGM/C reported cases were made and brought to court; none was convicted.

- The Children Act Amendment was passed into law (April 2016). The National Policy on Elimination of Gender Based Violence and the National Action Plan on Elimination of Gender Based Violence 2016-2021 (August 2016)

recognize FGM/C as a form of gender-based violence, integrating it across all provisions.

- Law and Advocates Uganda conducted a study on the implementation of the Prohibition of FGM Act 2010 and related laws. Key findings and recommendations to the Uganda Law Reform Commission included revision of the FGM Act and regulations to integrate HIV/AIDS and establishment of an FGM/C body at national level.
- The Joint Programme and partners engaged and achieved high-level political commitment to FGM/C abandonment, including from the President, the Speaker of Parliament, ministers (especially the Minister for Gender, Labour and Social Development), members of parliament and district leaders. Similarly, there is ongoing engagement with champions including the Archbishop of the Church of Uganda, and other religious leaders who are now integrating FGM/C abandonment into their programmes and sermons. Innovative advocacy approaches have been used, such as engaging athletes and community members in an annual marathon event led by these champions.
- The book on FGM/C (“The Switch”) was launched in the reporting period at an event attended by more than 50 high-profile participants, including members of parliament, representatives of civil society organizations and journalists. The book is a novel on FGM/C written by the Hon. Mary Busingye Karooro Okurut, a Ugandan educator, author and politician and the Minister for Security in the Ugandan Cabinet. The development and launch of the book are part of the efforts for advocacy and policy influence for abandonment of FGM/C.
- Supported the process of integrating FGM/C issues while upgrading the National Gender Based Violence Data Base from incident reporting to include response and management.



### *Provision of FGM/C-related services*

- 1,202 girls and women received services related to FGM/C, including clinical management and care (medical treatment and surgery), integrated services (including family planning and psychosocial support), legal services, protection and integration.
- The newly published World Health Organization guidelines on the management of health complications from FGM/C were disseminated among implementing partners in Karamoja region to provide them with minimum knowledge to handle FGM/C cases according to international standards.



### *Galvanizing social dynamics*

- 21 communities made public declarations of FGM/C abandonment in 2016, bringing the total to 121 communities in Sebei and Karamoja regions declaring abandonment since 2014.
- FGM/C in Uganda is localized and practised mainly by communities bordering Kenya and Uganda who are ethnically closely related; cross-border programming is therefore needed. Four cross-border advocacy meetings involving communities and leaders were conducted, resulting in joint cross-border memorandums and strategies to accelerate FGM/C abandonment and promote education of girls.
- Efforts were made to increasingly involve young people in and out of school in mobilization initiatives. More than 53 activities, including dialogues, debates and structured peer groups, were conducted, reaching 20,778 children and adolescents. These were mainly held in child-friendly spaces, including youth centres and sports venues. Six football and netball competitions were conducted under the theme “Abandonment of FGM practice in Sebei region”, involving 500 students from six schools.

- A forum for members of parliament fostered closer interactions with communities and a clearer understanding of the status of FGM/C and enforcement of the law. Members of parliament took part in seven outreach activities, reaching 3,850 local leaders and community members on issues related to FGM/C in six districts. In addition, members of parliament used media, and organized gatherings (for example, in places of worship and at weddings) and cultural day events (in Sebei, Pokot and Tepeth) to discuss and sensitize communities around FGM/C.
- Print, electronic and social media were engaged in sensitizing communities on FGM/C. There were 763 media items on FGM/C in 2016 (22 newspaper/print, 7 television, 730 radio and 4 social media).

## Implementing partners

### Government partners

- Ministry of Gender, Labour and Social Development
- Ministry of Health
- National Population Council, with Uganda Parliamentary Forum on Food and Social Protection
- Justice Law and Order Sector
- District local governments in Amudat, Nakapiripirit, Bukwo Kapchorwa, Kween and Moroto

### Civil society partners

- Reproductive Health Uganda
- Trans-cultural Psychosocial Support Programme

- REACH programme
- Vision CARE
- Law Advocates for Women in Uganda
- Community and Development
- Church of Uganda (Sebei Diocese)
- Matheniko Zonal Integrated Development Programme
- Pokot Zonal Integrated Development Programme
- Uganda Women Writers Forum

## Scale of operation of the Joint Programme in the country

The Joint Programme supported interventions implemented in 45 sub-counties, 15 secondary and primary schools, and 12 child-friendly spaces located in six focus districts (Nakapiripirit, Amudat, Bukwo, Kapchorwa, Kween and Moroto) in the two operational regions of Uganda (Sebei and Karamoja). The programme extends support to women and girls at risk of FGM/C in gender-based violence shelters in Moroto, Amudat and Kween districts. The programme also supports national-level initiatives, with a focus on advocacy, the legal framework and refugee communities.



### Financial information (in USD)

- Budget: 967,876
- Expenditure: 891,883
- Expenditure rate: 92 percent

For more details on the Joint Programme's work in Uganda, please see the companion booklet, *17 Ways to End FGM/C: Lessons from the Field*, especially number 7: "Work from within".

### Additional Information to share:

1. Umar Weswala, 16th January, 2016: FGM and Early Marriage are Bed Fellows – <http://www.thecommunityagenda.com/index.php/youth-a-woman-voices/255-fgm-and-early-marriage-are-bed-fellows>
2. Maureen Agena, 1st October 2015: Cut the demand and you will stop FGM: <http://maureenagen.com/general/cut-demand-and-you-will-stop-fg/>
3. Sinead O’Ferrall: No girl or woman should suffer the FGM trauma: <https://insidetheinternslife.wordpress.com/2015/09/21/98/>
4. Sinead O’Ferrall: Marathon to end FGM: So how much of a problem is this?: <https://insidetheinternslife.wordpress.com/2015/09/17/%E2%8B%95marathon2endfgm-so-what-can-be-done-to-%E2%8B%95endfgm/>
5. Sinead O’Ferrall: Marathon to end FGM: The who and why of FGM: <https://insidetheinternslife.wordpress.com/2015/09/16/%E2%8B%95marathon2endfgm-so-how-much-of-a-problem-is-this/>
6. Sinead O’Ferrall: Now is the time to drop the blade for good: <https://insidetheinternslife.wordpress.com/2015/09/15/%E2%8B%95marathon2endfgm-the-who-and-why-of-fgm/>
7. Lack of Safety Centres Fueling FGM in Amudat –Kadaga (Uganda Radio Network) <https://ugandaradionetwork.com/a/story.php?s=95151>
8. Female Genital Mutilation: Tackling the practice involving Cultural Leaders (UBV TV) <https://www.youtube.com/watch?v=CUqvmQKtLlg>
9. 80% of Pokot women still undergoing FGM says study (NV on-line) [http://www.newvision.co.ug/new\\_vision/news/1451133/80-pokot-women-undergoing-genital-mutilation-study](http://www.newvision.co.ug/new_vision/news/1451133/80-pokot-women-undergoing-genital-mutilation-study)
10. More photos on the FGM Marathon can be viewed here: <http://www.kmaupdates.com/>



Launch of the Novel on FGM written by Hon Karoro Okurut in 2016, Uganda



School students at the FGM marathon wearing a t-shirt with messages on FGM abandonment at the sidelines of the FGM marathon at Amanang Primary school grounds in Bukow district in Oct 11, 2016 © UNFPA Uganda, Evelyn Kiapi

# FINANCIAL REPORT

In 2016, the total funds available for programme implementation at country, regional and global levels amounted to \$20,769,882.<sup>9</sup> The funds came from two sources: the unspent fund balance at the end of 2015 in all the offices (\$8,872,485) and new funds transferred in 2016 based on the contributions received from donors at the end of 2015 and until the third quarter of 2016 (\$11,897,397).

Total contributions of \$17,014,498.77 were received from donors in 2016 (Table 1). As in previous years, a portion of the new contributions during 2016 was made available for programme implementation in the same year, while contributions received in the fourth quarter of 2016 were carried forward to 2017 since it was intended for programme implementation in the subsequent year.

Total provisional financial expenditure for 2016, combining both UNFPA and UNICEF, was \$17,807,664 (Table 2), resulting in an expenditure rate of 86 per cent. The expenditure rate was noticeably higher than in 2015 (71 per cent). Close follow-up with offices and senior management involvement from both agencies, based on guidance from the Steering Committee, contributed to this positive achievement. Unspent fund balance at the end of 2016 (\$2,962,218) was also significantly lower than in 2015 (\$8,872,485), further highlighting the efforts made to improve programme implementation and fund utilization. Egypt low implementation rate was due to the devaluation of the Egyptian currency.

<b>Donor</b>	<b>Total Contributions received (local currency)</b>	<b>Total Contributions received (in USD)</b>
EU	EUR 6,500,000	6,976,368.51
Finland	EUR 300,000	328,227.57
Iceland	USD 200,000	200,000
Ireland	EUR 250,000	265,392.78
Italy	EUR 1,800,000	1,997,780.24
Luxembourg	EUR 400,000	433,839.48
Norway	NOK 14,000,000	1,635,514.02
United Kingdom	GBP 4,000,000	5,177,376.17
<b>Total</b>		<b>17,014,498.77</b>

<sup>9</sup> All figures are in United States dollar.

UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting: Accelerating Change  
Provisional Financial Report, 2016

Office	2016 Budget & Expenditure UNFPA			2016 Budget & Expenditure UNICEF			2016 Budget & Expenditure UNFPA + UNICEF		
	Total Fund Available for Programme Implementation	Total Expenditure	Expenditure Rate (in %)	Total Fund Available for Programme Implementation	Total Expenditure	Expenditure Rate (in %)	Total Fund Available for Programme Implementation	Total Expenditure	Overall Expenditure Rate (in %)
HQ	1.896.475	1.659.768	88	770.731	506.341	66	2.667.206	2.166.110	81
ASRO	200.000	195.617	98				200.000	195.617	98
ESARO	200.000	129.204	65	115.254	82.674	72	315.254	211.878	67
WCARO	272.756	229.756	84	467.759	255.556	55	740.514	485.313	66
Burkina Faso	800.000	734.728	92	404.837	404.578	100	1.204.836	1.139.305	95
Djibouti	169.322	143.491	85	401.617	306.880	76	570.939	450.371	79
Egypt	560.000	436.395	78	546.904	204.181	37	1.106.904	640.576	58
Eritrea	400.000	318.101	80	470.531	379.145	81	870.531	697.246	80
Ethiopia	600.000	469.399	78	462.878	447.947	97	1.062.878	917.346	86
Gambia	393.000	368.257	94	207.873	135.968	65	600.873	504.225	84
Guinea	299.261	297.487	99	632.028	540.856	86	931.288	838.343	90
Guinea-Bissau	200.000	142.643	71	259.861	234.571	90	459.862	377.215	82
Kenya	842.299	789.331	94	1.072.759	976.325	91	1.915.058	1.765.656	92
Mali	444.686	366.738	82	406.497	406.277	100	851.183	773.015	91
Mauritania	401.000	400.763	100	345.761	345.384	100	746.760	746.147	100
Nigeria	721.180	700.691	97	509.750	329.176	65	1.230.931	1.029.867	84
Senegal	900.520	896.311	100	970.597	742.590	77	1.871.118	1.638.901	88
Somalia	400.000	390.959	98	1.054.278	1.053.646	100	1.454.278	1.444.605	99
Sudan	400.000	396.257	99	488.480	465.952	95	888.481	862.209	97
Uganda	400.000	368.547	92	567.876	523.336	92	967.876	891.883	92
Yemen				113.110	31.836	28	113.110	31.836	28
<b>Total</b>	<b>10.500.499</b>	<b>9.434.444</b>	<b>90</b>	<b>10.269.381</b>	<b>8.373.220</b>	<b>82</b>	<b>20.769.880</b>	<b>17.807.664</b>	<b>86</b>

In 2016, the Joint Programme started to generate financial reporting by outcomes and outputs defined in its results framework. A financial reporting template was developed and shared with all country offices to facilitate the reporting process. More importantly, both UNFPA and UNICEF have initiated

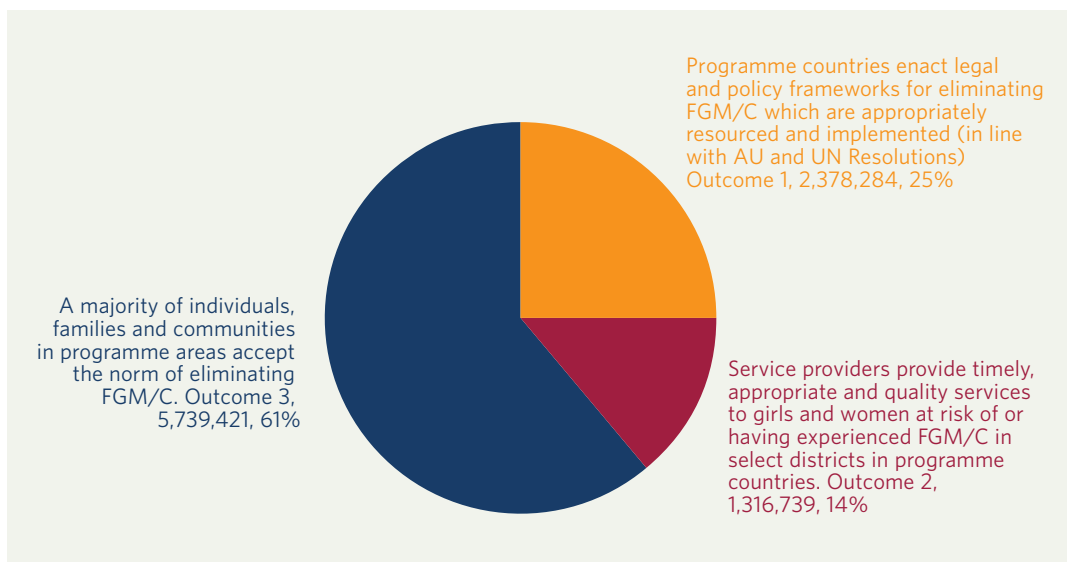
an exercise to produce system-generated financial reports to make reporting more systematic and also to ensure quality of reporting. UNFPA has already made the necessary adjustments to its system to start reporting by outcomes and outputs for the portion of the Joint Programme fund administered by UNFPA, as



presented below. As can be seen from the graphs, out of the total fund administered by UNFPA in 2016 (9,434,444), 61 percent was used to support interventions focusing on galvanizing community movements towards the abandonment of the practice of FGM (Outcome 3) while the share of the fund allocated to interventions on policy and legal

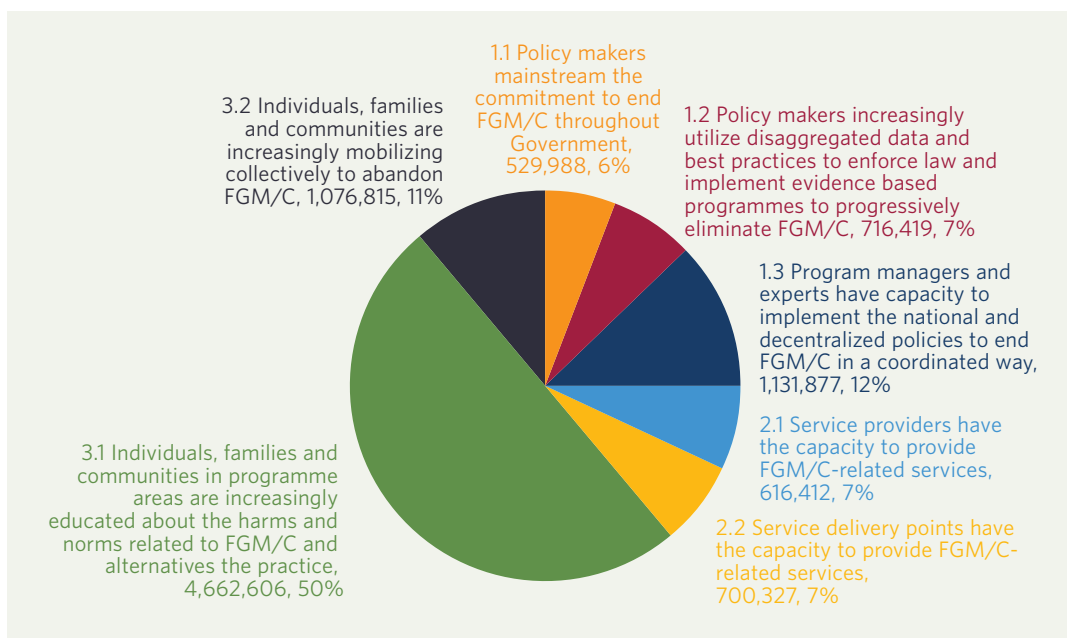
environment (Outcome 1), and service provision (Outcome 2) was 25 percent and 14 percent respectively. As expected, community level engagement was the primary focus area of support during the year. UNICEF is working towards establishing a similar mechanism to enable system-generated reporting within its financial system.

### FINANCIAL REPORTING BY OUTCOME, UNFPA



BY THE NUMBERS

### FINANCIAL REPORTING BY OUTPUT, UNFPA



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FGM is being teach to Madrasa (islamic schools) girls





*In Memoriam*  
1949-2017

Dr. Babatunde Osotimehin, who led UNFPA for over six years, died unexpectedly as this report was being produced. We mourn the loss of this global leader of public health, defender of the rights of women and young people, and vigorous champion of change in the campaign to end FGM and other harmful practices.

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