

AmplifyChange addresses Female Genital Mutilation / Cutting

More than 200 million women and girls in the world today have experienced Female Genital Mutilation / Cutting (FGM/C), and it is been estimated that each year a further 3.6 million girls are at risk. There is evidence that FGM/C is practiced in at least 31 countries eligible for AmplifyChange funding.

There has been a decline in prevalence rates globally over the past 3 decades, but not all countries have made progress, and the pace of change varies significantly across countries. The current rate of decline is insufficient to keep up with population growth, meaning that if trends continue, the number of women and girls undergoing FGM/C will rise significantly in the next 15 years.

FGM/C has no positive health benefits. The short-term health risks include severe pain, shock, infection, increased risk of HIV, psychological trauma and death. In the longer-term it can lead to chronic infections, urination and menstrual problems, decreased sexual sensation and desire, pain during sex, obstetric complications, and increased perinatal risks such as stillbirth and neonatal death. The more severe the type of FGM/C, the higher the likelihood of obstetric complications.

FGM/C has been recognised as a violation of the rights of women and girls by several international and regional human rights instruments. The Sustainable Development Goals include a specific target to eliminate all harmful practices, such as child, early and forced marriage and FGM/C, by the year 2030.

AmplifyChange is supporting 48 grants to end and prevent Female Genital Mutilation / Cutting

The grants cover 20 countries in Sub-Saharan Africa and South Asia and include grants to civil society organisations working in the most challenging contexts, including Somalia.



Lessons learned: challenges and successes

1. A culture of silence surrounds FGM/C in many places. It can be difficult for campaigners to speak openly about it as it is a taboo topic and extremely sensitive. Advocates often face backlash and resistance, even threats to their personal safety. As a result, many people do not receive accurate information about the practice and it is fuelled by myths and misinformation, especially in remote, rural areas.
2. In some contexts, severe resistance from highly respected and influential religious leaders is forming a significant barrier to progress in tackling FGM/C. Many people believe FGM/C is a religious requirement.
3. FGM/C is driven by powerful social norms. Even where there is awareness of the negative health outcomes of the practice, people often still choose to continue the practice due to strong social expectations in place, and the negative social and economic outcomes that may result from going against these. An uncut girl may be rejected by her family and ostracised by her community. A baseline study carried out by the GECPD in Somalia found that, while many people are aware of the negative health outcomes of FGM/C, fear that their daughters will be socially ostracised or deemed ineligible for marriage will still lead parents to subject their daughters to the practice.
4. The evidence base is growing, but significant data gaps remain, and our understanding of which strategies are most effective to eradicate FGM/C is still limited. Rigorous data and research is often necessary to effectively influence policy-makers.
5. Many grantees have identified a lack of accountability by governments as a major challenge, which is often manifested in the absence of legislation prohibiting FGM, weak legislation, or insufficient enforcement.
6. Where legislation does exist, it can also present challenges to campaigners by driving the practice of FGM/C underground, leading to girls being cut at a younger age and in secret, and reducing the likelihood that families seek medical attention in time, for fear of prosecution.
7. As progress is made on some fronts, such as increasing awareness of the harmful medical effects or introduction of legislation, new challenges have emerged. Trends such as medicalisation of FGM/C and cutting at younger ages and in secret, present new challenges for campaigners and risk further embedding the practice. These trends underline the importance of adopting a rights-based approach and addressing the social norms that drive the practice.

Successful strategies

1. A holistic and sustained response to FGM/C is required, one that adopts a rights-based approach and is rooted in the local context and communities - and which transforms social norms that drive the practice
2. Awareness-raising and campaigning on FGM/C should be respectful and non-judgemental, and conform with a 'do no harm approach'. As much as possible different actors should coordinate efforts and align their messaging
3. All relevant stakeholders need to be involved, including young women and men, parents and other family members, religious and traditional leaders, community-groups and NGOs, faith-based organisations, activists, cutters, medical professionals, educators and government officials

In Galkayo, Somalia, GECPD has established a referral system to support survivors of Gender-based violence (GBV) including FGM/C to access the medial and psychosocial services. During their one year Strengthening project they supported over 100 survivors of GBV to access health care.

Figure 1: GECPD Integrated FGM/C and Reproductive Health Rights education programme participants



4. Legislation is important, but FGM/C eradication must be accompanied by efforts to change attitudes and norms, and support for women and girls who have been cut
5. Traditional and social media and the arts have been used successfully by many grantees to engage wide audiences
6. New research is addressing knowledge and evidence gaps to inform improved practice and strengthen advocacy messages directed at policy-makers and other influential figures
7. Empowering young people is crucial. Young female survivors have a powerful voice and must play a central role. It's also important to work with young men as crucial allies. Sport and edu-tainment are effective ways to reach and engage young people in a fun way
8. It's important not to overlook the support and services required by survivors of FGM/C, including medical and psychosocial support, together with access to justice

Figure 2: AmplifyChange Technical Performance Manager for GBV meeting with a religious leader, traditional leader, former cutter, community activist, local government official, grantee and network representatives in The Gambia (ActionAid The Gambia).



ActionAid The Gambia

Network



The Gambia

How we are learning as a Fund

- **Mentorship:** Closely cooperating with grantees throughout the grant set up and implementation period is essential
- **Cross-consortium knowledge sharing:** A working group was established across the consortium partners that provides a platform for sharing ideas and expertise on Gender-based violence, including FGM/C across consortium members
- **Working with technical associates:** Partnerships and close interaction have been created with other organisations specialising in FGM/C and GBV such as the Orchid Project, Girl Generation and SVRI, providing key insights into the design of calls for proposals as well as channels to reach a worldwide network of FGM applicants and grantees. We received over 500 applications in response to our Opportunity Grant call for proposals on FGM/C and CEFM. One such partnership with the Orchid Project will be developed to further strengthen our technical support offer to FGM/C grantees

Going forward we will:

- **Technical partnerships:** Strengthen technical support to FGM/C grantees, in partnership with experienced FGM/C organisations , and learn more about effective approaches to addressing FGM/C through social norm change and movement building
- **Linking and learning:** Create opportunities for grantees to connect, share and learn from each other through diverse platforms, including through digital communities
- **User centred design:** Capture learning in grantee-centred technical guidance and organisational development resources designed in conjunction with users: our grantees
- **Amplify Southern voices:** Provide opportunities for grantees to boost their profile internationally and contribute thought leadership on FGM/C
- **Fund the hard places, not just windows of opportunity or easiest environments to work in:** Continue to support initiatives where they are the most needed, including in challenging contexts where SRHR is weakest or civil society movements are least developed
- **Long-term, results-based financing:** Provide renewal funding to support existing successful grantees to build on and further develop their initial projects

More information

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- [AmplifyChange on gender-based violence](#)
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