# How to transform a social norm



Reflections on Phase II of the UNFPA-UNICEF
Joint Programme on Female Genital Mutilation

The social norm that sustains the practice of female genital mutilation in some 30 countries around the world rests on the shakiest of foundations: It is a composite of faulty beliefs, perceived obligations and inferred expectations, all woven together in a surprisingly durable knot.

Given the strength of the social bonds that bind communities together, the norm that sustains FGM has proven difficult to unravel. But it cannot withstand forever the force of reports of the harm the practice causes, the reminders that it violates the human rights of girls and local laws alike, the poignant voices of survivors, and the mounting evidence of changing attitudes. It cannot withstand the force of collective action and social evolution. Our work is to accelerate its inevitable demise.

Cover

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The UNFPA-UNICEF Joint Programme on Female Genital Mutilation (FGM) aims to transform an entrenched social norm – one that for too long has normalised systemic violence against girls and young women into one in which they have autonomy over their own bodies. Working with partners at the global, regional, national and community level, Phase II of the Joint Programme (2014 to 2017) embraced a holistic approach that:

- → Amplified voices of leaders, individuals and groups who have themselves abandoned female genital mutilation (FGM);
- → Empowered girls and women to play a catalytic role that has fueled further positive action; and
- Catalysed a global movement with strong regional support to end FGM.

New insights about FGM and the social norms that support it are informing the design of policies and programmes in countries where the practice has been entrenched over generations. Key results during Phase II point to the positive difference the Joint Programme has made in galvanizing support for the elimination of FGM: more than 24.6 million individuals made public declarations of FGM abandonment, some 3.3 million women and girls accessed prevention, protection and care services across 16 countries, and 13 countries have laws banning FGM with similar laws pending in three more countries. This gives us confidence in the sustainability of interventions.

The growing number of public commitments to end FGM as well as its abandonment by communities show that the practice can indeed become a vestige of the past. Grassroots movements have fueled an international movement to eliminate FGM worldwide. Through Target 5.3 of the Sustainable Development Goals, the global community committed itself to eliminating harmful practices, including, child, early and forced marriage and FGM, by the year 2030.

Thanks to this stepped-up effort to encourage its full and irreversible elimination, the prevalence of FGM among girls aged 15-19 has declined

in 10 of the 17 countries. Additional insight and analysis will be needed during the next phase to understand and effectively address pockets of resistance. The generally encouraging results call for sustained commitment and strengthening of the Joint Programme to consolidate these gains. Many of the good practices and lessons from Phase II have been integrated into Phase III, launched in January 2018.

UNFPA and UNICEF wish to express their gratitude to the Governments of the European Union, Finland, Germany, Iceland, Ireland, Italy, Luxembourg, Norway, Sweden and the United Kingdom for their generous support. With a growing number of girls at risk of FGM due to population growth, Phase III is a critical time for donors, Member States and the international community to increase resources and investments for FGM elimination. With your support, the Joint Programme can accelerate the elimination of FGM so that girls and women may realize their rights, and more fully contribute to the health and productivity of their families and communities. This will also improve prospects for the next generation, a generation in which girls and young women need not fear the cut.





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### INTRODUCTION

Female genital mutilation (FGM) has been denounced by the United Nations and the international community since 1952. But focused energy and programming to address this complex and sensitive issue is relatively recent, galvanized by the 2007 inter-agency statement on eliminating FGM, signed by ten UN bodiecs, and a resolution that year from the Commission on the Status of Women.

In the 10 years since the inception of the UNFPA-UNICEF Joint Programme on Female Genital Mutilation, much has changed.

Elimination of FGM is high on the international agenda, enshrined as target 5.3 of the Sustainable Development Goals, the subject of three General Assembly resolutions and the focus of the International Day of Zero Tolerance. Efforts to end FGM have been embraced by governments, regional and subregional bodies, media at all levels, and increasingly civil society and social movements. Approaches to transform the social norms on FGM have evolved to reflect new learnings. Numerous social media platforms are abuzz with stories of the harm FGM causes and efforts to end it. Increasingly, girls and women at risk of or suffering from the consequences of FGM have access to quality services offering protection and care.

Despite so many positive developments, FGM persists.

And because of high population growth in many of the countries where FGM is widely practised, the number of girls at risk continues to climb, even as prevalence rates decline.

Today a girl is a third less likely to be cut than in 1997.

That said, national trends in FGM prevalence are blunt measurements. Newly piloted methods are now being used to get a more granular sense of what is actually happening on the ground. They reveal significant attitudinal changes: Growing numbers of people in many countries have publicly disavowed the practice and pledged not to cut their daughters. We know that almost everywhere the silence that once surrounded FGM has been broken. The practice is discussed in churches and mosques, on television and radio, in schools and clinics, in community circles and celebrations, and in theatre and song. We know that laws are on the books or being seriously worked on in all 17 countries covered by the Joint Programme, most of which also have budget lines and action plans to address the issue. Blanket impunity for perpetrators is a thing of the past.

While the Joint Programme's results framework includes indicators that give us confidence in our progress, a major independent evaluation of Phase II of the Joint Programme (2014-2017) is now underway. It will analyse information from numerous sources (desk reviews, field visits, phone interviews and data from a wide range of sources) to assess the relevance, effectiveness and efficiency of work at the global, regional, country and community levels. This information will inform Phase III interventions.

In the interim, this report is an attempt to share some of the most innovative, strategic and successful initiatives undertaken by the 17 programme countries over Phase II. During that time, one of the most encouraging signs of progress was the increasing capacity of United Nations country offices to work with communities to design interventions that both align with the Joint Programme's results framework and with their specific contexts. We applaud their excellent work, even as we acknowledge the severe challenges many of them face. And we salute their many partners – some 200 as of 2017 – who bring key strategies and messages to the grass roots in culturally relevant ways.

This report also showcases a handful of individuals who have been affected by FGM and become powerful champions of change.

Although "positive deviants" as they are referred to in social norms literature have often faced stigma, censure or opposition, they may take comfort in the Kalejin proverb (Kenya):

## "Chepkisas ko tatun kechome"

Translated, this example of Africa wisdom says: She who is scorned will one day be appreciated.

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