

# Norway's strategy for intensifying international efforts for the elimination of female genital mutilation 2014–2017

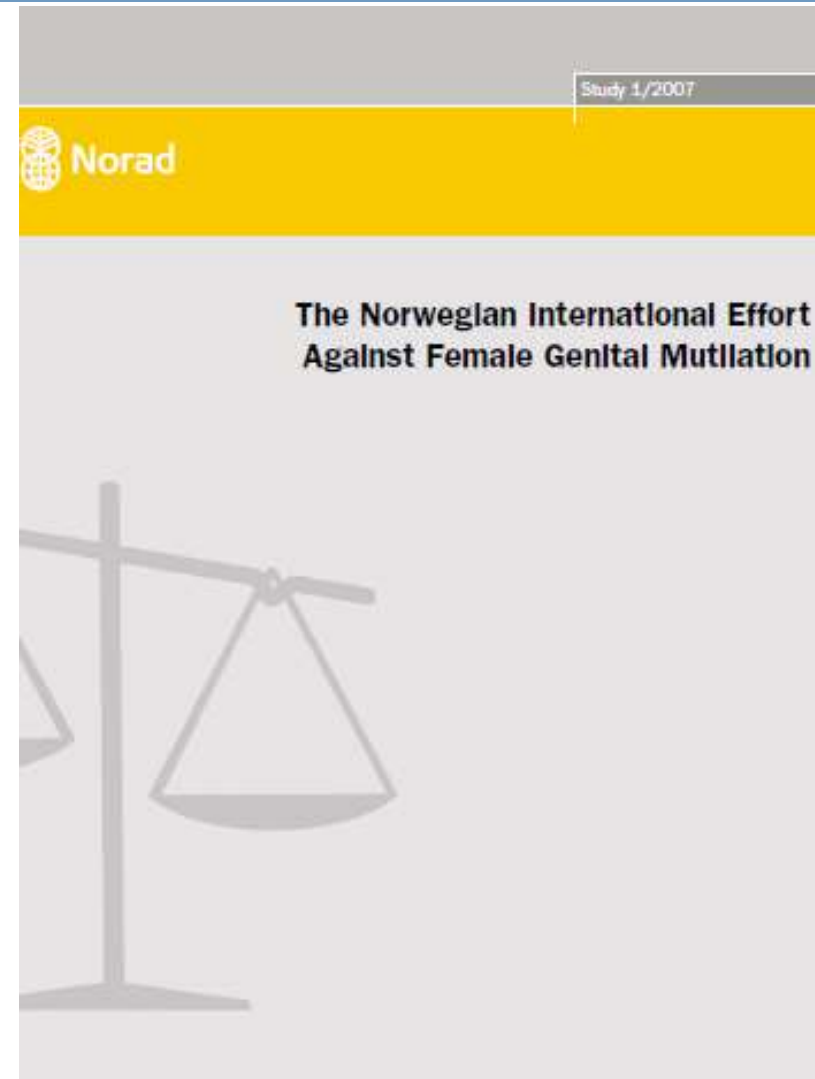
Nina Strøm, Senior Adviser, Norad

Global Health Day 21 October 2014  
NTNU



- 1. Lessons learned  
2003-2013**
- 2. Milestones**
- 3. Research**
- 4. Norway's FGM  
strategy 2014-2017**







**UNFPA-UNICEF**  
*Joint Programme on Female Genital Mutilation/Cutting: Accelerating Change*

ANNUAL REPORT 2012

SCALING UP A COMPREHENSIVE APPROACH TO ABANDONMENT IN 15 AFRICAN COUNTRIES



**UNFPA-UNICEF JOINT PROGRAMME**  
**ON FEMALE GENITAL MUTILATION/CUTTING:**  
ACCELERATING CHANGE



**SUMMARY REPORT OF PHASE I**  
2008 - 2013

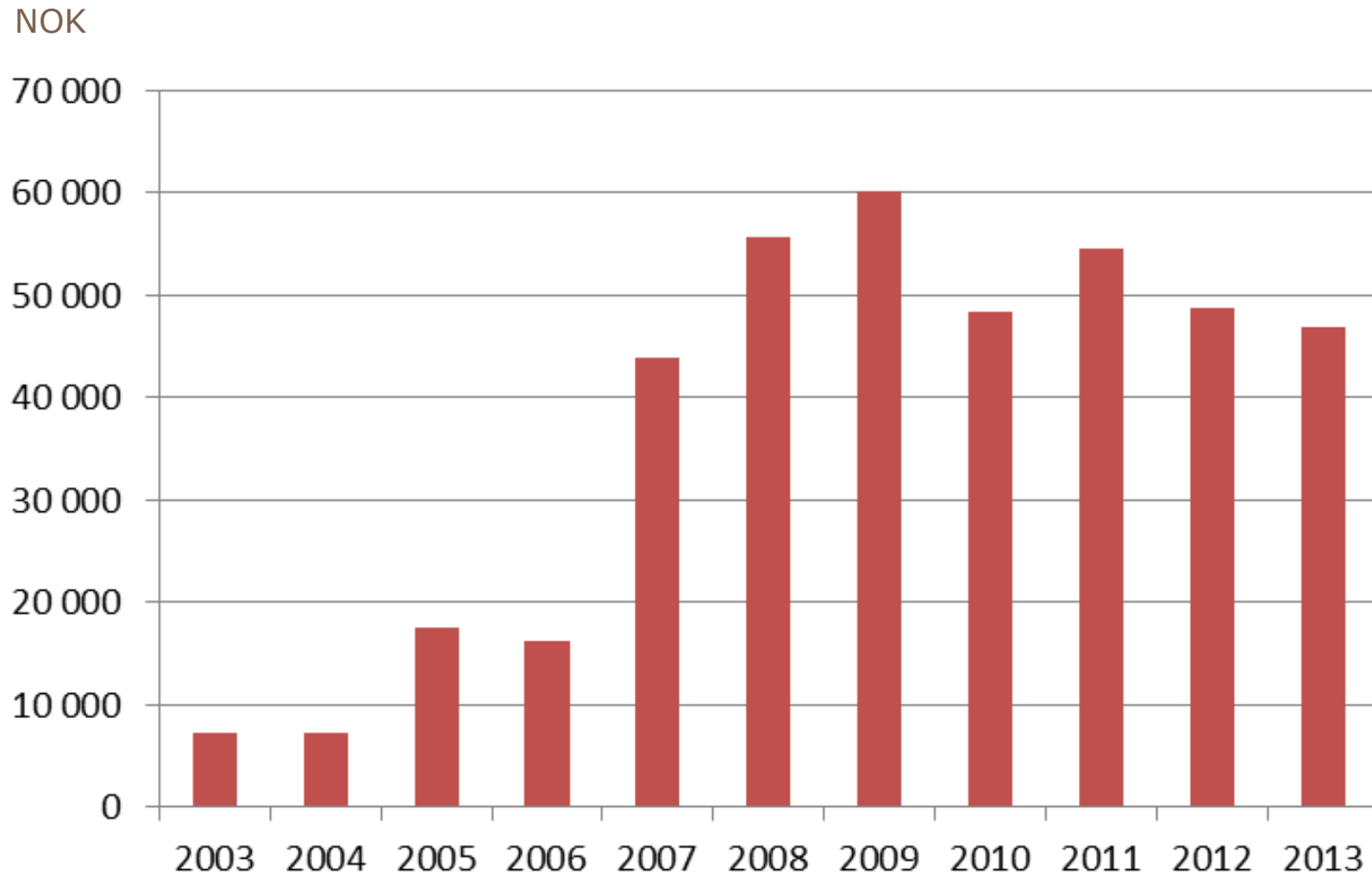


Second phase of the Strategic Partnership between Norwegian Church Aid (NCA) and Save the Children International (SCI) for the Abandonment of Female Genital Mutilation (FGM)

(2011 – 2015)

Mid Term Review

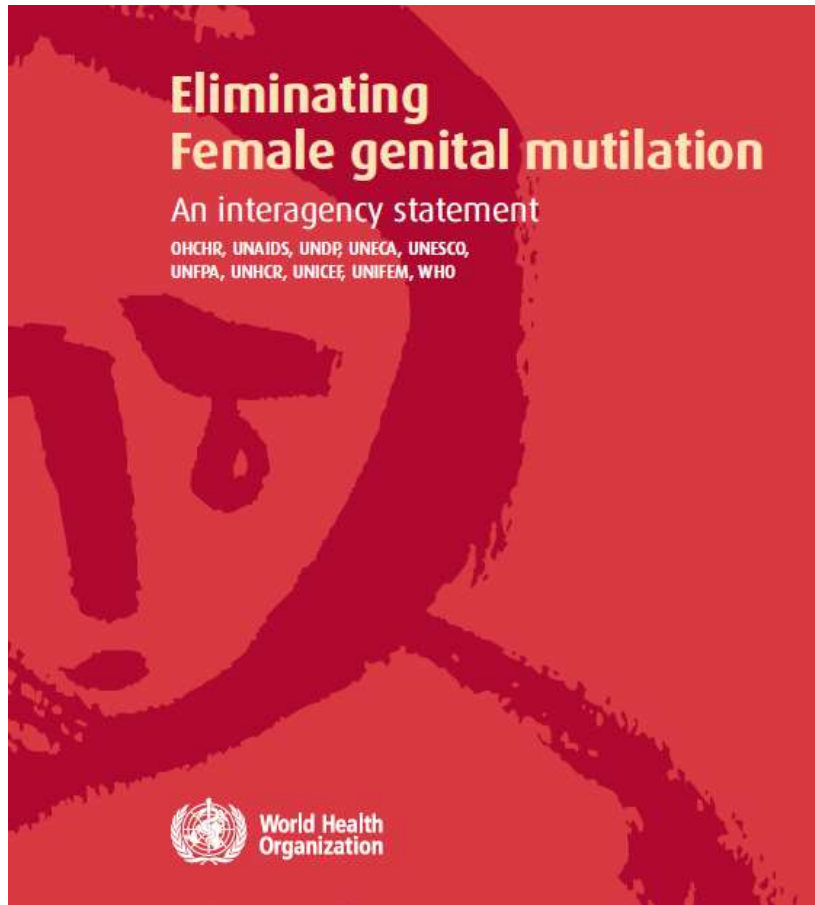
November 2013



- **Targeted funds** needs to follow plans
- **Governments** need to prioritize and coordinate the efforts against FGM in affected countries, and leave space for civil society organizations
- Law reforms and singular approaches have proven not to enable social change on their own
- The selection of **Ethiopia** as a pilot country increased the Norwegian engagement and secured for long-term follow-up

- **Investments in local mobilization through NGOs and UN agencies** have paved the way to change
- Key stakeholders and partners - **Norwegian NGOs** Norwegian church Aid, Save the Children, FOKUS, Care and Digni etc.
- **Long time investments** is necessary to support **social change** at community level







In 2008 WHO and 9 UN agencies called on all States, international- and national organizations, civil society and communities to uphold the rights of girls and women. And support specific and concrete actions directed towards ending FGM

WHO/MSR/10.9

## Global strategy to stop health-care providers from performing female genital mutilation

UNAIDS, UNDP, UNFPA, UNHCR, UNICEF, UNIFEM, WHO, FIGO, ICN, IOM, MWIA, WCPT, WMA

World Health Organization

Progress report



Progress report

An update on WHO's work on female genital mutilation (FGM)



UNDP - UNFPA - WHO - World Bank  
Special Programme of Research, Development and Research Training in Human Reproduction

## An update on WHO's work on female genital mutilation (FGM)

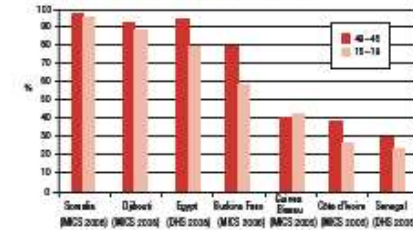
Progress report

### Introduction

Female genital mutilation (FGM) – defined by WHO and the United Nations (UN) agencies as “the partial or total removal of the female external genitalia or other injury to the female genital organs for non-medical reasons” is a deeply rooted tradition in many communities in 28 countries in Africa and in some countries in Asia and the Middle East. In the world today there are an estimated 130–140 million girls and women who have been subjected to the operation and 3 million girls are at risk of undergoing the practice every year (1).

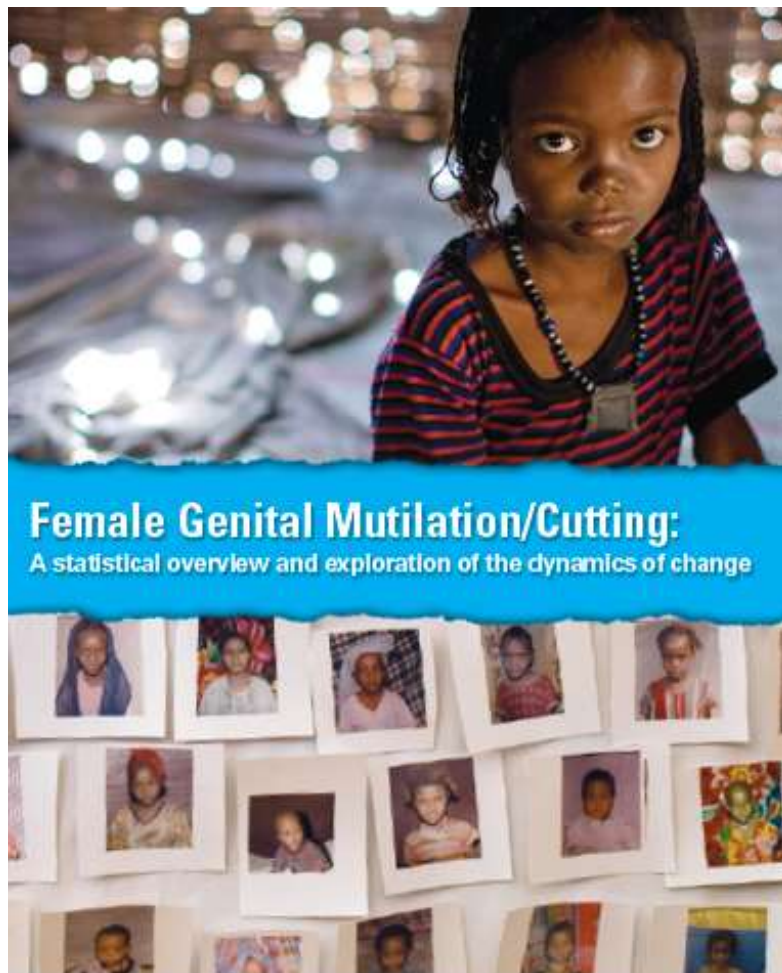
Studies indicate that the practice of FGM has changed in a number of ways. Most encouragingly, the practice is declining. This can be observed when looking at data from countries in which at least two surveys are available, showing advanced prevalence in a number of countries. This can also be observed by comparing the youngest and oldest age-group in one survey, showing that women aged 15–19 years are less likely to have been subjected to FGM than are women in older age groups (see Figure 1).

Figure 1. Prevalence of FGM in eldest and youngest age groups

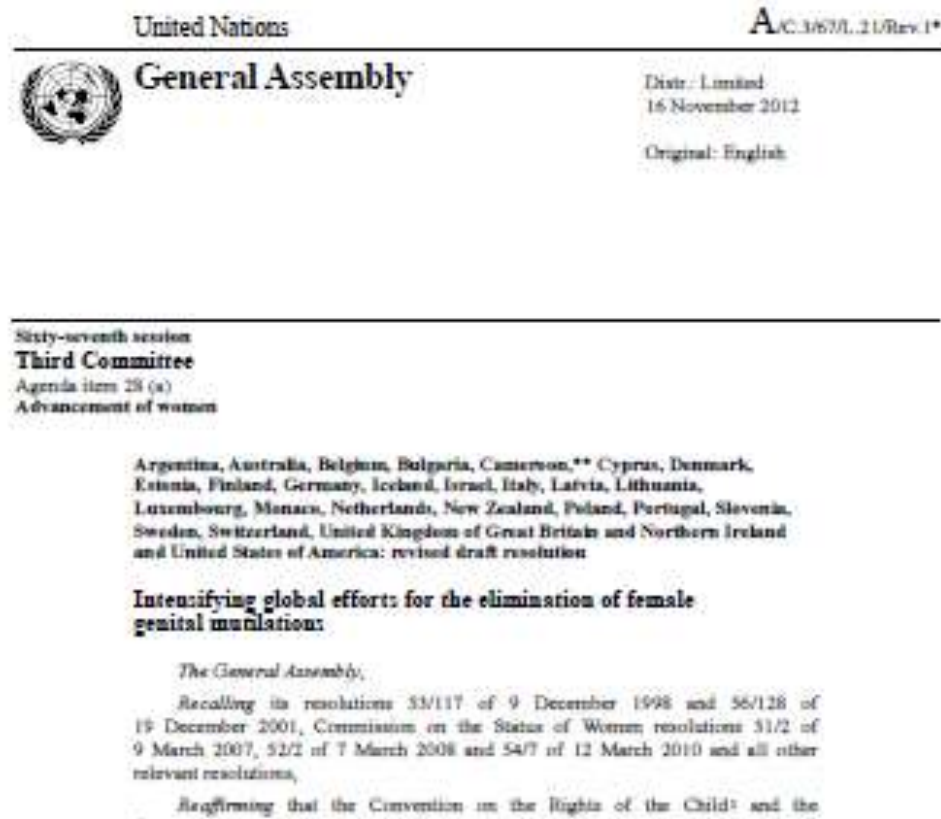


### Abbreviations

- FGM Female genital mutilation
- DHS Demographic and Health Surveys
- HPP UNDP/UNFPA/WHO/World Bank Special Programme of Research, Development and Research Training in Human Reproduction
- MICS UNICEF Multiple Indicator Cluster Surveys
- RHR Department of Reproductive Health and Research (WHO)
- WHO World Health Organization



In July 2013 UNICEF published a statistical overview with analyses of data from 74 nationally representative surveys, conducted over a 20-year period in 29 countries across Africa and the Middle East



UN General Assembly adopted the “FGM resolution” in 2012

Intensifying global efforts for the elimination of female genital mutilations



- Commitments on action to end **FGM** and **Child and Forced Marriages**
- Girl Summit Charter
- Financial pledges and political commitment
- Monitoring framework developed

## Investment in FGM research through the Norwegian development cooperation:

- **WHO – HRP**: Programme of research, development and research training in Human Reproduction
- Collaboration with **Norwegian Knowledge Centre for the Health Services**
- **GLOBVAC** – Norwegian Research Council
- NORHED- Programme for capacity development in higher education and research for development



**Female Circumcision at Home and Away:  
Attitudes toward the practice among Somali immigrants in Oslo, Norway and their corresponding group in Hargeisa and Galka'ayo Somalia**

Abdi Ali Gele, University of Oslo (2012)  
KILDEN, Kristin Marie Skaar, [www.forskning.no](http://www.forskning.no)



## **Religious Leaders – a Magic Bullet when Addressing Gender Sensitive Issues? The case of Muslim leaders and «FGM» in Ethiopia**

Marit Tolo Østebø, University of Bergen/  
University of Florida Terje Østebø

KILDEN, Kristin Marie Skaar, [www.forskning.no](http://www.forskning.no)



## Systematic reviews



- Gynaecological consequences of FGM/C (2014)
- Immediate health consequences of FGM/C (2014)
- Obstetric consequences of FGM/C (2013)
  
- Rigmor Berg, Norwegian Knowledge Centre for the Health services
- [www.kunnskapssenteret.no](http://www.kunnskapssenteret.no) and [www.norad.no](http://www.norad.no)



## **Article:**

### **What Works and What Does Not: A Discussion of Popular Approaches for the Abandonment of Female Genital Mutilation**

- R. Elise Johansen, N. J. Diop, G. Laverck and E. Leye
- [www.who.int/reproductivehealth](http://www.who.int/reproductivehealth)
- [www.norad.no](http://www.norad.no)

**Research** on health consequences, programme and sector approaches have been crucial. **More research is needed** in order to:

- Monitor **change in prevalence**, more frequent than DHS and MICS
- Better understanding of the **mental and physiological** «state of mind» among girls and women subjected to FGM
- Research related to **FGM repairs in Norway**, results and satisfaction after repairs
- **Medicalization** of FGM

## Context for the new FGM strategy:

- **Global Momentum** for efforts to eliminate FGM
- Country level: Growing momentum for change, **decline** in some countries
- **Effective methods**: social convention theory, social norm approach
- **Increased political interest including** increased donor funding, but also a **possible backlash** due to radical militarization of so called Islamic forces

## Continuation from 2003-2013:

- **UNFPA-UNICEF Joint Programme** on Female Genital Mutilation/Cutting
- See FGM in the context of **gender equality**
- Work for the inclusion of FGM in the efforts to promote **sexual and reproductive health and rights**
- Cooperate with **like-minded donor countries**, with a view to intensifying efforts to combat FGM

## Increased political engagement:

- Political speeches and political dialogue
- The **post-2015 agenda**, target on FGM in the Gender goal

## Increased regional and global engagement:

- Cooperate with the **African Union** to promote the follow-up of the UN resolution
- **Global normative processes** as an arena for FGM:
  - UN Commission on Population and Development
  - UN General Assembly
  - UN Human Rights Council
  - UN Commission on the Status of Women
  - World Health Assembly

## Increased focus on health workers:

- **Work to strengthen WHO's efforts**, including its efforts to combat the medicalization of the practice
- **Support competence-building** measures for **health workers** in the prevention of FGM and treatment of medical complications



## Increased efforts:

- **Double the allocation** to civil society and international organisations from NOK 25 million to NOK 50 million annually
- **Enhance synergies** between the combat of FGM and other development policy priority areas: **education, health and human rights** (white paper on human rights and in the white paper on education and development)

## New efforts:

- **New Pilot Country: Somalia** (inclusive Puntland and Somaliland) in addition to **Ethiopia**
- Collaboration with the **Somali diaspora** in Norway
- Increased collaboration between the MFA, Norad and selected Embassies

- Technical backstopping and reviews of projects and programmes
- Managing funds to Norwegian and International NGOs
- Technical briefs and reporting of results
- Steering Committee of the UNFPA UNICEF Joint Programme
- Seminars



Thank you!

