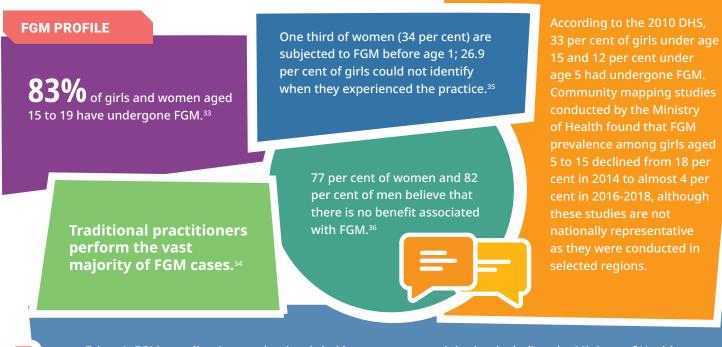
Eritrea

Eritrea has a wide variety of climatic conditions that render it highly vulnerable to economic, climatic and external shocks, including from drought, limited access to safe water, insecurity and the socioeconomic impact of sanctions.²⁹ The country's most fragile ecosystems are threatened by climate change and desertification as well as desert locust infestations.³⁰ Existing frameworks to mitigate the impact of climate change and improve natural resources management are inadequate.³¹ Despite the efforts of the Government to achieve self-reliance and economic progress, poverty and food insecurity affect many urban and rural households, especially children from female-headed households.³²



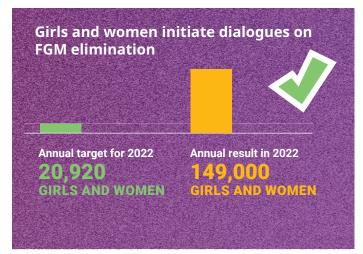
Eritrea's FGM coordination mechanism is led by government ministries, including the Ministry of Health, the Ministry of Labour and Social Welfare and the National Union of Eritrean Women. They jointly oversee the implementation of the National Strategic Plan to Ensure Children and Women's Rights, and Abandon Female Genital Mutilation, Underage Marriage and Other Harmful Traditional Practices (2020-2024), and agreed to a midterm evaluation of the plan.

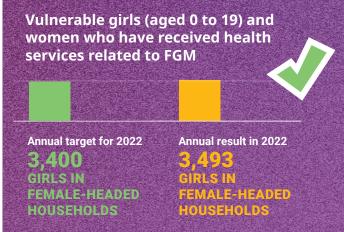
JOINT PROGRAMME CONTRIBUTIONS TO FGM ELIMINATION

"My home is free from FGM": Home visits in communities aim at ensuring every household with a girl under age 15 becomes free of FGM. Anti-FGM promotors engage with households until families agree to stop FGM, at which time they receive a sticker that states: "My home is free from FGM". The process continues until the whole village makes a collective declaration to end FGM. In 2022, 63,997 people living in 70 villages of the Adi-Tekelezan and Halhal subzones declared their communities free from FGM.

Data on FGM: The Ministry of Health introduced FGM-related data in the Health Management Information System. A comprehensive Child Protection Management Information System is planned for launch in 2023.

KEY PROGRAMME RESULTS





BEST PRACTICE EXAMPLE

Integrating FGM in social protection programmes:

Social protection programmes in Eritrea supported 7,865 households, 50 per cent headed by women, in reducing poverty by transferring resources such as school supplies to increase access to education, and by enabling income generation and the protection of household assets. Social protection can contribute to ending FGM by empowering women, as measured by an increase in agency and autonomy in decision-making associated with FGM, including through choices they make for their daughters and in challenging harmful social norms. Strategies to empower women through gender-responsive social protection combined with community-led support for shifts in social norms that sustain FGM may prove effective in reducing prevalence in Eritrea.



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