Kenya

Kenya adopted a progressive Constitution in 2010 that led to intensified campaigns against FGM. It established The Anti-Female Genital Mutilation Board, a semi-autonomous government agency stipulated by the Prohibition of Female Genital Mutilation Act 2011 under the Ministry of Public Service, Gender, Senior Citizens Affairs and Special Programmes. Under the Presidential Plan of Action to End FGM by 2022, the Government formed an interministerial committee to improve collaboration and coordination on information-sharing and the provision of services supporting the elimination of FGM. In 2021, Kenya played a critical role in implementing a regional cross-border plan of action agreed in 2019 by five neighbouring countries, Ethiopia, Kenya, Somalia, Uganda and the United Republic of Tanzania. At the Generation Equality Forum in 2021, the President of Kenya, as a global co-leader of the Action Coalition on Gender-Based Violence, made 12 commitments to end all forms of GBV and FGM by 2026.


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Enabling environment for the elimination of FGM

- Legislation criminalizing FGM
- Costed national action plan
- National budget line for FGM
- National coordination mechanism

Since 2018, law enforcement has resulted in:

- 303 arrests
- 300 cases brought to court
- 55 convictions and sanctions

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KEY ACHIEVEMENTS

3 out of 4 girls experience FGM before age 14

- 21% of girls and women aged 15-49 years have undergone FGM
- 11% of girls aged 15-19 years have undergone FGM
- 93% of girls and women think FGM should stop

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Overall performance on outcome indicators in Phase III

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below 70%</td>
<td>70%–100%</td>
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</table>

**OUTCOME 1**

Have an enabling environment for the elimination of FGM practices at all levels and in line with human rights standards

**OUTCOME 2**

Girls and women are empowered to exercise and express their rights by transforming social and gender norms in communities to eliminate FGM

**OUTCOME 3**

Girls and women receive appropriate, quality and systemic services for FGM prevention, protection and care

**OUTCOME 4**

Have better capacity to generate and use evidence and data for policymaking and improving programming

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Continuous community engagement

In 2021, the Samburu, Pokot and Abakuria communities made public declarations on the abandonment of FGM, with 257,356 persons (154,323 female, 103,033 male) directly or indirectly participating through local vernacular radio stations. Compared to 2020, the proportion of communities that made public declarations on FGM abandonment increased by 10 per cent.

The Joint Programme registered a 6 per cent increase in religious leaders publicly making a statement to end FGM and a 23 per cent increase in community leaders doing so in 2021. In Phase III, over 52 men’s and boys’ networks actively participated in advocating the elimination of FGM; they had a total membership of 43,297. A total of 51,375 girls were saved from FGM.

Strengthening of FGM service providers

In 2021, 16 existing health facilities were strengthened to provide FGM health services. This increased the proportion of health service delivery points in Joint Programme intervention areas by 16 per cent over 2020. The Joint Programme continued to provide technical and financial support to the national interministerial committee, 14 subcounty committees and 15 FGM networks with 376 participants. In Phase III, 34,273 girls gained health, social and legal services related to FGM.
A Samburu girl is shifting her culture on FGM

Philomena’s family, a stickler for tradition, wanted to perform FGM on their daughter to preserve the Samburu culture. The girl implored her parents to let her finish school before undergoing the practice. By the time she completed secondary school, she was empowered to defy her parents. As a result, she was shunned by her family. Until now she cannot see eye to eye with her father. She decided to become a volunteer worker at a girl’s secondary school in Samburu County, where she continues to mentor other girls and share her knowledge on FGM, encouraging them to reject the practice and stand up for their rights. In her village, she has become a vocal advocate of girls’ rights and for eliminating FGM. For many young girls, she has become their role model.

Despite the stigma she faces from the community, the threats she receives from various factions and the lack of support from her family, Philomena has remained steadfast in teaching other girls about the negative effects of FGM and urging her community to abandon the practice. She proudly presents herself as a successful girl who cannot wait to join university and pursue higher learning, freed from undergoing FGM.