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TECHNICAL NOTE:

GENDER TRANSFORMATIVE APPROACHES FOR THE ELIMINATION OF FEMALE GENITAL MUTILATION

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Recognized internationally as a violation of girls' and women's human rights, **FGM has multiple negative consequences in the lives of girls and women,** including medical, psychological, emotional and social problems, and even loss of life.

SECTION ONE: INTRODUCTION

RATIONALE (WHY THIS NOTE?)

At least 200 million girls and women worldwide have undergone female genital mutilation (FGM), and more than four million girls are at risk annually. Recognized internationally as a violation of girls' and women's human rights, FGM has multiple negative consequences in the lives of girls and women, including medical, psychological, emotional and social problems, and even loss of life. Girls subjected to FGM are also at risk of early/child marriage, dropping out of school, and reduced opportunities for growth, development and sustainable incomes.

While communities cite numerous reasons for having girls undergo FGM, as a gendered harmful practice, it is an expression of power and control over girls' and women's bodies and their sexuality. FGM as a form of gender-based violence (GBV) is rooted in unequal power relations between men and women that are embedded in a system that sustains itself through discriminatory gender stereotypes and norms, and unequal access to and control over resources. For girls and women with limited skills, competencies, and assets, marriage is often a matter of economic security and social inclusion. As a result, FGM is often performed to enhance a girl's marriageability. Although parents may be aware of the risks involved with FGM, they will often have their daughters undergo the practice as the gains (economic security and social inclusion) outweigh the loss (health consequences).

For more than two decades, global consensus has been that the elimination of FGM contributes to the achievement of gender equality. The Beijing Declaration and Platform for Action in 1995 identified ending FGM as essential to realizing girls' rights. The 2015 Sustainable Development Goals (SDGs) renewed this commitment by introducing target 5.3 which calls for the elimination of FGM under Goal 5, achieving gender equality and women and girls' empowerment. In Africa, the continent with the highest FGM prevalence rates, the African Union adopted in 2003 the Maputo Protocol which includes

specific provisions banning FGM and launched in 2014 Agenda 2063: The Africa We Want, which calls for ending gender discrimination and all forms of GBV including FGM.

UNICEF addresses FGM by ensuring girls are educated, empowered, healthy, and free from violence and discrimination. Working in 22 countries[1], UNICEF supports enabling policies and legislation that protect the human rights of girls and women; access to comprehensive child protection systems that include health care, social welfare, and legal services; ensure girls' access to education and life skills development; mobilize communities to shift discriminatory social and gender norms that perpetuate harmful practices; and build a global evidence base through data collection and research.

UNICEF also jointly leads with UNFPA the largest global programme supporting the elimination of FGM. The UNFPA-UNICEF Joint Programme on the Elimination of Female Genital Mutilation: Accelerating Change (Joint Programme) works across 17 countries[2]. Following consultations for the design of Phase III of the Joint Programme in 2017, and the Joint Evaluation of Phases I and II (2008-2017) released in 2019, recommendations included a more explicit focus on gender transformation such as the strategic placement of FGM within a gender equality framework, articulating FGM drivers and elimination within a gender equality continuum, and gathering evidence related to FGM as a manifestation of gender inequality.

Based on recommendations from the Joint Programme and UNICEF's experience in implementing programmes addressing FGM, this technical note provides an overview of gender transformative approaches to ending FGM including programme strategies, reference tools and resources, and case studies. The case studies in this technical note are drawn from UNICEF's work on FGM. The technical note also highlights the distinction between social and gender norms. Programmes seeking to shift social norms do not necessarily focus on the individuals upholding norms. Addressing gender norms requires understanding gender as a hierarchical system that disadvantages girls and women as well as non-conforming men and boys[3].

THE PURPOSE OF THIS TECHNICAL NOTE IS:

1. To promote a common understanding of the role of social and gender norms in sustaining FGM as a harmful practice;
2. To provide guidance on the adoption and integration of gender transformative approaches to FGM elimination with UNICEF's country programme cycle.

WHO CAN USE THIS NOTE?

This technical note is intended for programme staff at UNICEF and other UN agencies, as well as key stakeholders addressing FGM including civil society, communities, governments, and researchers, from the grassroots to the global level.

STRUCTURE OF THE NOTE

Gender transformative approaches are presented within UNICEF's six-step country programme cycle: 1) evidence and analysis, 2) programme design, 3) implementation, 4) monitoring, 5) reporting, and 6) evaluation.

For more than two decades, global consensus has been that the **elimination of FGM contributes to the achievement of gender equality.**

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SECTION TWO:
CONCEPTS AND INTERLINKAGES

IMPORTANT CONCEPTS ON GENDER AND WHY THEY MATTER IN FGM ELIMINATION

There are many concepts related to gender equality that matter in the elimination of FGM and this section summarizes a few and details why they matter in gender transformative approaches to the elimination of FGM.

GENDER EQUALITY: Gender equality means that women and men and girls and boys enjoy the same rights, resources, opportunities and protections. Because power structures in societies across the world mostly privilege boys and men, advancing gender equality most often requires addressing disadvantages faced by girls and women. At the same time, gender inequality pervades personal, family and social relationships and institutions, and affects not only women and girls, but also men and boys. Progress towards gender equality requires not only awareness and behavior change, but also changes in the fundamental power dynamics that define gender norms and relationships. **FGM is a manifestation of gender inequality.**

SOCIAL NORMS: Social norms are the informal rules and beliefs that are widely shared across a society. Norms govern the behavior of individuals and groups, and therefore greatly influence the socialization of children. Norms are not the same as behaviors or practices, rather norms inform the understanding of how people can and should behave, and what practices they can and should engage in. Social norms are informal, deeply entrenched and widely held beliefs based on social roles and expectations that govern human behaviors and practices within a reference group or network. Compliance is usually accompanied by social rewards for those who adhere to them and sanctions are meted out to those who do not. **While parents may not support the continuation of the practice, they will have their daughters undergo FGM rather than face social sanctions such as stigmatization or social isolation.**

While parents may not support the continuation of the practice, **they will have their daughters undergo FGM rather than face social sanctions** such as stigmatization or social isolation.

GENDER NORMS: Gender norms are the accepted attributes and characteristics of male and female gendered identity at a particular point in time for a specific society or community. They are the standards and expectations to which gender identity generally conforms, within a range that defines a particular society, culture and community at that point in time. Gender norms are ideas about how women, men, girls and boys should be and act. Internalized early in life, gender norms can establish a life cycle of gender socialization and stereotyping. **Gender norms can lead to choices that disadvantage girls[4]. Household poverty may lead to families making difficult decisions about how to use scarce resources, and gender norms may set the parameters for these choices (ODI, 2015). Families may adopt negative coping strategies such as having girls undergo FGM as a precursor to marriage to reduce the number of mouths they have to feed or to receive a bride-price payment[5].**

GENDER IDEOLOGIES: Gender roles are expressed at all levels and in all segments of society, and are reproduced through daily interactions. Concepts of masculinity and femininity are underlying gender ideologies translating into behavioral expectations for men, women, boys and girls.

GENDER RELATIONS: Gender relations have to do with the ways in which a culture or society defines rights, responsibilities and the identities of women, men, girls and boys in relation to one another. Gender relations refer to the balance of power between women and men or girls and boys.

GENDER SOCIALIZATION: This is the process of girls and boys, women and men learning social roles based on their gender, which leads to different behaviors and creates differing expectations and attitudes by gender. Gender roles often lead to inequality.

GENDER RESPONSIVE PROGRAMMING: Gender responsive programming refers to programmes in which gender norms, roles and inequalities have been considered, and measures have been taken to actively address them. **Such programmes go beyond increasing sensitivity and awareness and include action to narrow or remove gender inequalities as they relate to FGM.**

Gender transformative programming aspires to tackle root causes of gender inequality and moves beyond self-improvement among girls and women to redress power dynamics and structures that serve to reinforce gender inequalities. A gender transformative approach engages men and women, girls and boys to challenge harmful gender norms and practices such as FGM.

SECTION THREE: THE ROLE OF SOCIAL AND GENDER NORMS IN SUSTAINING THE PRACTICE OF FGM

Social norms underpin FGM because elimination of the practice requires coordination between individuals as it is an interdependent action based on the expectations of a specific reference group or network[6]. As an example, in communities where FGM increases a girl's marriageability, parents cannot end the practice without compromising their daughter's marriage prospects unless everyone agrees to change the norm around FGM. Shifting social norms involves changing the attitudes of a core group of people who then become agents of change in their communities and in turn challenge community members' perceptions of what others in their communities approve of such as FGM[7].

Gender norms reflect and contribute to inequalities in the distribution of power and resources that often disadvantage girls and women, limit girls' development opportunities, and undermine their wellbeing. While families and communities cite cultural, religious and social reasons for practicing FGM, justifications center on the need to reduce girls' and women's sexual desire[8]. As a result, FGM is rooted in gendered power relations and social control over girls' and women's bodies[9]. Disempowerment and gender inequality manifest themselves in the unequal distribution of resources and girls' and women's lack of control over their bodies, in addition to policies and legislation that do not protect the human rights of girls and women including their right to bodily integrity[10]. Sociocultural factors, gender norms and power relations drive the continuation of FGM which in turn limits girls' and women's access to power within their families and communities, reduces their education and economic opportunities, and alters their own aspirations and ambitions for their lives[11]. Table 1 below highlights the differences between social and gender norms.

Social and gender norms both define acceptable and appropriate actions for women and men in a given group or society; are embedded in formal and informal institutions and reproduced through social interaction; and play a role in shaping women and men's access

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TABLE 1. RELATIONSHIP BETWEEN GENDER NORMS AND SOCIAL NORMS

Gender Norms

- Gender norms are in the world, embedded in institutions and reproduced by people's actions.
- Gender norms are produced and reproduced through peoples' actions and enforced by powerholders who benefit from people's compliance with them.
- Gender norms are often studied as shaping people's individual attitudes.
- People follow the gender norms of their culture, society or group, the boundaries of which are usually blurry.
- Changing gender norms requires changing institutions and power dynamics. Often this will happen through conflict and renegotiation of the power equilibrium.
- Changing gender norms is a political project that leads to equality between women and men.

Social Norms

- Social norms are in the mind; people's beliefs are shaped by their experiences of other people's actions and manifestations of approval and disapproval.
- Social norms are equilibria that maintain themselves, not necessarily benefitting anyone.
- Social norms are often studied as diverging from people's individual attitudes.
- People follow the social norms of their reference group, the boundaries of which are usually fairly defined.
- Changing social norms (at its simplest) requires changing people's misperceptions of what others do and approve of in their reference group.
- Changing social norms is a health-related project that leads to greater wellbeing for women and men.

Cislaghi, Ben, and Heise, Lori, 'Gender norms and social norms: differences, similarities and why they matter in prevention science', Sociology of Health and Illness, 42, 407-422, <https://onlinelibrary.wiley.com/doi/full/10.1111/1467-9566.13008>.

UNICEF's Intersectional Approach for Ensuring No Girl is Left Behind:

With the adoption of the SDGs, the global community pledged to ensure no one will be left behind and to endeavor to reach the furthest behind first. Girls and women are left behind when they lack voice, choice and agency to participate in and benefit from development progress due to social, political and economic constraints. UNICEF seeks to understand and address factors that intersect and contribute to increased vulnerability to FGM. These may include discrimination based on gender, age, race, sexuality, disability or indigenous status, among other aspects; geography such as hard-to-reach locations; weak governance characterized by a lack of accountability or limited participation of girls and women in decisions that affect them; socioeconomic status, including household poverty and lack of access to services; and shocks and stresses stemming from conflict, climate change, political instability or epidemic outbreaks that often have a disproportionate impact on girls and women. Typically, girls and women who are left behind face intersecting disadvantages stemming from more than one factor. Intersectionality emphasizes how different power relations involving these factors affect each other by reinforcing or weakening, supporting or competing with each other in a dynamic interplay.

to resources and freedoms[12]. While changes in social norms are about changing people's beliefs, changes in gender norms require changes in institutional policies and power relations. Unlike social norms, men (and some women) have a vested interest in upholding discriminatory gender norms that sustain inequalities in access to resources and power[13].

Figure 1: UNICEF Country Program Cycle

UNICEF's Tools for Social Norms Change provides useful tools for programme planning and designing, measuring and learning.

SECTION FOUR: GENDER TRANSFORMATIVE APPROACHES IN FGM ELIMINATION PROGRAMMING

UNICEF's country programme cycle *(see Figure 1)* provides an effective step-by-step process for adopting and integrating transformative approaches for the elimination of FGM.

1 **EVIDENCE AND ANALYSIS:** In addition to conducting a situational analysis, a gender analysis is the starting point and a core activity for facilitating gender transformative approaches. A gender analysis will explore how gender roles, relationships and decision-making processes and power relations between women and men, girls and boys perpetuate FGM. Beyond the social elements, a gender analysis will also look into individual factors that are gender-related such as self-efficacy, and environmental factors such as structural barriers[14]. Girls' and women's self-efficacy is a critical component of gender programming; their skills, decision autonomy, social mobility and agency will determine their capacity to resist social pressure, make life choices, express their voice, and be resilient[15].

For FGM programming, see Figure 2 for five domains to consider when collecting information and data for a gender analysis.

UNICEF's Gender Programmatic Review is a useful tool for situational and gender analyses.

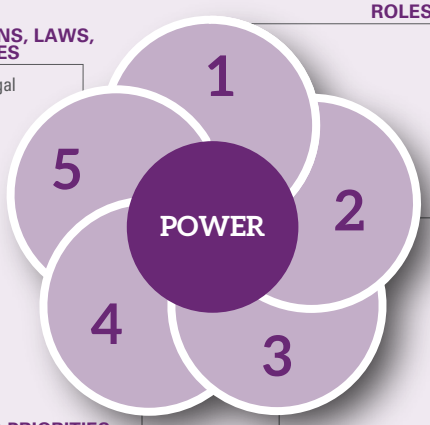
2 **PROGRAMME DESIGN:** Programme design includes developing a theory of change (TOC) based on country context and a monitoring and evaluation (M&E) framework based on the situational analysis and the gender analysis. The TOC should reflect causes and barriers identified in the gender analysis and demonstrate how UNICEF and other relevant actors will address them by creating an enabling policy and legislative environment, ensuring access to comprehensive child protection services, empowering girls and women by enhancing their assets and capabilities, shifting harmful social and gender norms among families and communities, and building a strong global evidence base that includes collecting data and conducting research to address knowledge gaps in FGM programmes and policies.

As a planning framework, the Gender Equality Continuum Diagram below can be used to determine if and how well proposed interventions are currently identifying, examining and addressing gender considerations, and to determine how you can design and plan interventions to eliminate FGM. All UNICEF programmes endeavor to be gender responsive or gender transformative.

Figure 2: What To Consider In a Gender Analysis?

One way to approach the analysis of data and information from a gender perspective is by asking "gender analysis questions." The following figure suggests **five basic domains** to consider when collecting information and data for a gender analysis.

Gender Analysis Framework



INSTITUTIONS, LAWS, AND POLICIES
- Policy and legal frameworks
- Due process
- Services

ROLES AND RESPONSIBILITY
- Roles and practices
- Time, space and mobility
- Household and community of labour division
- Participation rates in different activities

ACCESS TO ASSETS
- Human assets
- Natural assets
- Social assets
- Physical assets
- Financial assets
- Information

NEEDS AND PRIORITIES
- Practical and strategic needs
- Priorities
- Opportunities and capacities
- Vulnerabilities

BELIEFS AND PERCEPTIONS
- Influence
- Norms
- Decision making
- Expectations about appropriate behaviour

THE FIVE DOMAINS OF THE FRAMEWORK

1. ROLES AND RESPONSIBILITY: The norms that influence women's (girls') and men's (boys') behaviour structure and the type of activities they engage in and their roles and responsibility.
2. ACCESS TO ASSETS: How gender relations affect access to resources necessary for a person to be a productive member of society.
3. BELIEFS AND PERCEPTIONS: Draws from cultural belief systems or norms about what it means to be a women or men in a specific society. These beliefs affect women's (girls') and men's (boys') behavior, participation and decision-making capacity.
4. NEEDS AND PRIORITIES: Differences of needs (both practical and strategic gender needs) between women and men, girls and boys.
5. INSTITUTIONS, LAWS AND POLICIES: Focuses on information about women's (girls') and men's (boys') different formal and informal rights and how they are affected by polices and rules.

POWER: Pervades all domains and informs who has, can acquire, and can expend assets and decisions over one's body.

Excerpted from Jhpiego (2016). Gender Analysis Toolkit for Health Systems.

Figure 3: The Gender Equity Continuum

Examples of Programmes Across the Continuum Framework

Gender Discriminatory

A campaign to eliminate FGM that reinforces the idea that girls are physically weak and need to be protected by their families. This is harmful because it reinforces the negative gender expectations and the unequal power structures between men and women and is a driver of FGM (i.e., girls' (in)capabilities and the need for families to control and regulate their behavior, in particular, their sexual behavior.[16]

Gender-Blind

One-on-one sessions on FGM conducted with girls directly in their homes because of their heavy workload and limited freedom of movement. While the intervention may reach the intended target group, it is gender blind because it is not challenging the disproportionate unpaid workload of girls and their limited mobility.

Gender Sensitive

FGM interventions that build on the gender differences in how men and women perceive and experience the practice and incorporates these differences in the design of activities. For instance, community-led single-sex education sessions and community dialogues for men and women to explore their perceptions of FGM and girls' and women's human rights.

Gender Responsive

Education sessions and community-led dialogues that engage religious and community leaders (to harness their influence as gatekeepers to change harmful norms) and community members (representing different gender and age groups) that provide opportunities for critical reflection on FGM and discriminatory social and gender norms.

Gender Transformative

FGM interventions that empower girls by building girls' agency, strengthening girls' self-efficacy, organizing sustained dialogues with parents, communities and gatekeepers, supporting girls' education, and ensuring access to sexual and reproductive services and justice.

Girl-focused empowerment through access to high-quality education **plays a critical role in ending the cycle of poverty and preventing FGM** in contexts where the practice is associated with marriageability for economic security and social inclusion.

3 **IMPLEMENTATION:** Common upstream and downstream interventions of gender transformative approaches[17] that support the elimination of FGM include the following:

- Girl-focused empowerment interventions, including girls' clubs that provide life skills programming, and sexuality education
- Programming for high-quality education, particularly secondary school with gender responsive pedagogy, and social support for girls' school attendance
- Shifting gender roles and social expectations that normalize FGM
- Engaging boys and men in critical reflection to redefine what it means to be 'a man'
- Addressing gender socialization through positive parenting
- Providing access to health, protection and legal services for FGM prevention and response
- Creating livelihoods opportunities for girls and women
- Enabling policy and legislative including adolescent girls' and women's participation in public and political spheres

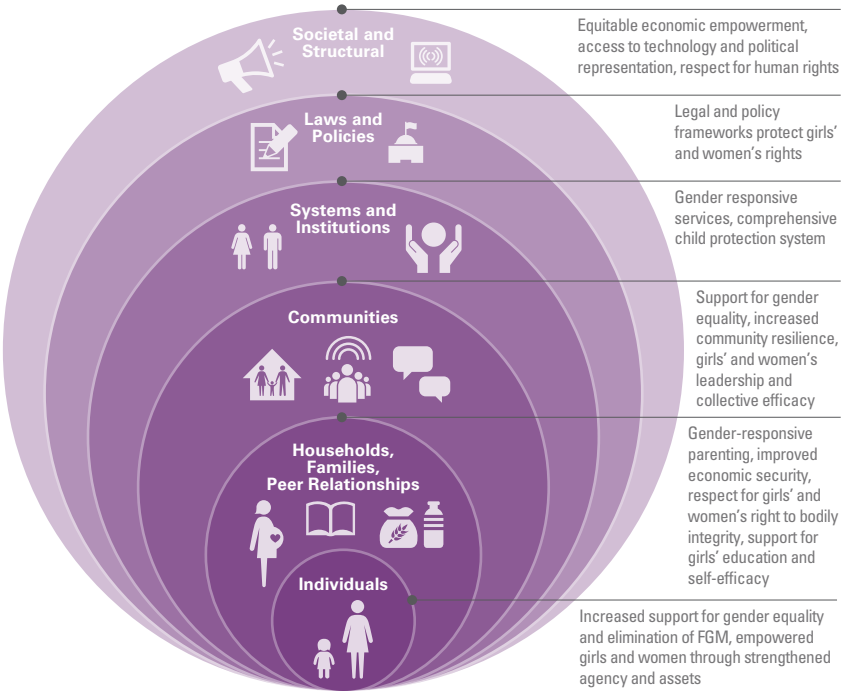
Changes in gender norms call for a blend of advocacy and community-based interventions, policy work and service delivery, and social networks and social movements. Figure 4 provides an overview based on the socio-ecological framework that highlights the type of interventions that are needed from the individual to the legislative level to transform discriminatory gender norms and eliminate FGM.

Listed below are proven interventions drawn from UNICEF's FGM programmes that are gender responsive or gender transformative:

Girl-focused empowerment through access to **high-quality education** plays a critical role in ending the cycle of poverty and preventing FGM in contexts where the practice is associated with marriageability for economic security and social inclusion. While education may not prevent the cutting of girls at a young age, it has the potential to positively affect future generations. Educated women are less likely to support the continuation of FGM[18].

Girls' clubs offered in school or other community settings, provide girls with **life skills training, comprehensive sexuality education**, and opportunities to develop their leadership skills, expand and strengthen their social networks, and engage in civic action[19]. Girls' clubs also provide a safe space for girls to explore new ideas and challenge discriminatory gender norms[20].

Figure 4: Socio-Ecological Model



FOSTERING GIRL LEADERS IN MALI:

In 2019, through community dialogues and education sessions in Mali, 67,195 adolescents, including 26,205 in-school and 31,867 out-of-school boys and girls, increased their knowledge about harmful practices and received training in facilitating community outreach sessions about FGM and child marriage in Kayes, Koulikoro, Mopti and Bamako. At least 50 percent of adolescent girls organized in their communities outreach and education sessions promoting gender equality and the impact of child marriage and FGM on their reproductive health, human rights, social development, and education attainment. Girls are given public platforms that support them in developing the confidence to speak out and practice their leadership skills.

In order to sustainably influence and change gender norms, **men and boys must be actively engaged** in interrogating and challenging discriminatory gender norms in their own lives, as well as in their communities and societies more broadly. Men and boys should be engaged as agents of positive change in shifting unequal power relations, in promoting positive masculinities, and changing attitudes and behaviours that are a cause and consequence of FGM such as controlling girls' and women's bodies and sexuality.

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MENENGAGE ALLIANCE IN NIGERIA:

In 2019, UNICEF Nigeria and the MenEngage Alliance established 81 new coalitions of men and boys (60 coalitions were created the year before) and reached 13,918 men and boys and 593 women and girls. These networks of men and boys' coalitions are actively advocating for the elimination of FGM and other harmful social norms and practices in their communities by providing opportunities for men and boys to critically reflect on what it means to "be a man" and explore gender equitable and inclusive attitudes, behaviors and manifestations of masculinities. The MenEngage coalitions targeted peer males in public spaces such as their workplace or markets and mobilized religious and community leaders to support FGM elimination.

Supporting families and communities to shift harmful social and gender norms that sustain FGM includes gender-responsive positive parenting. Given that most girls undergo FGM before the age of 5[21], positive parenting to counter gender-related harmful practices can be key to FGM prevention among infants and young children. Positive parenting can also encourage communities to actively monitor and become engaged in the lives of girls at risk of undergoing FGM, and support community surveillance through child protection committees (CPCs).

AVERTING CASES OF FGM IN BURKINA FASO THROUGH CHILD PROTECTION COMMITTEES:

In Burkina Faso, 175,724 cases of FGM were averted through community-based surveillance following public declarations of FGM abandonment. Community facilitators tracked girls aged 0-14 years at risk of FGM in target communities. The community facilitators also managed adolescent clubs that enroll both adolescent girls and boys ages 10 to 19 years. In 2019, 372,003 adolescents received life-skills and health information about FGM, child marriage and violence against children (VAC) through interactive sessions that cover building self-esteem, dealing with peer pressure, problem-solving, leadership skills, and adolescent sexual and reproductive health (SRH). The community facilitators also organized community dialogues and education sessions, worked with religious leaders to support social and gender norms change, and provided parenting education through monthly home visits. Establishing or strengthening local surveillance systems such as CPCs following public declarations in support of eliminating FGM are critical in sustaining a collective commitment to protecting girls' right to be free from FGM.

UNICEF also utilizes **communication for development to shift social and gender norms** that sustain FGM through information, opinions and stories, recognizing they play a significant role in shaping attitudes and interests and behaviors. Such a communication environment is formed by multiple channels and

Service providers including social workers, teachers, law enforcement, midwives, nurses and doctors as respected members of their community can **serve as role models, counsellors and champions for the rights of girls** in preventing and eliminating FGM locally and nationally.

sources. Theories and analysis have long proven the influence of mass and social media on many aspects of people's lives, but views and beliefs are also conditioned by other sources such as movies, songs or word on the street.

SALEEMA INITIATIVE IN SUDAN:

The Saleema initiative grew out of the recognition of a critical language gap in Sudanese colloquial Arabic: despite 30 years of activism to increase awareness of the harm caused by FGM, there was still no positive term in common usage to refer to a girl who remains intact. Girls were instead described as "saleema" (healthy and complete). This reframed how the issue is portrayed and enable community stakeholders to look at it from a new perspective when discussing the decision to practice FGM. The initiative incorporates visual branding and a set of 'official' Saleema colors that are used across engagement platforms. The colors are worn as dresses and scarves by advocates and allies of the Saleema movement and displayed as flags at health facilities to make support visible. This public pledging to keep the community's daughters "saleema" is an instrumental element to develop a critical mass and allow people to assess and reality-check what they believe about others, which in turn may influence their attitude towards FGM. A three-year evaluation of Saleema observed a gradual reduction in pro-FGM social norms.[22]

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Access to essential services as part of a comprehensive child protection system reflects the vital components of coordinated multi-sectoral prevention, protection and response services for girls and women at risk of and affected by FGM. The provision and coordination of essential health care, social services, and justice can significantly mitigate the consequences of FGM has on the wellbeing, health and safety of girls' and women's lives.

Service providers including social workers, teachers, law enforcement, midwives, nurses and doctors as respected members of their community can serve as role models, counsellors and champions for the rights of girls in preventing and eliminating FGM locally and nationally.

Because the medicalization of FGM is a trend that is increasing and alarming - 1 in 4 girls and women have undergone medicalized FGM[23] - it is critical that health care providers including doctors, nurses and midwives are trained in medical ethics such as "do no harm" and how children's bodily integrity is a human right, as well as have opportunities to critically reflect on their own harmful social and gender norms.

TARGETING AND EMPOWERING HEALTH CARE PROVIDERS IN EGYPT TO STOP THE MEDICALIZATION OF FGM:

In 2017, the University Pioneer Initiative was launched in 12 universities located in 15 governorates in Egypt, training students from the faculties of Medicine, Nursing and Pharmacy as youth leaders to engage in peer-to-peer education on FGM. This was done through the use of digital media tools such as websites, Facebook, YouTube channels and smartphone applications to disseminate 'Facts for Life' messages promoting healthy lifestyles including the abandonment of FGM as a violation of girls' and women's right to bodily integrity, health and life.

Enabling polices and legislation on FGM uphold the protection of the human rights of girls and women. Policies and legislation provide parameters for actions by all stakeholders seeking to eliminate FGM, as well as recognition of FGM as a human rights violation. UNICEF works with governments and civil society to introduce and enforce legislation that prohibits FGM, and to develop costed national action plans to address FGM as well as mainstream FGM in national action plans on gender equality, SRH and child protection. While discriminatory social and gender norms will not necessarily shift because of policies and legislation, such high-level commitments send a clear message: FGM as a harmful practice is not acceptable.

SUDAN CRIMINALIZES FGM IN 2020:

Sudan Criminalizes FGM in 2020: Following 14 years of an advocacy campaign led by women's and children's rights activists, non-governmental organizations (NGOs), community-based organizations (CBOs), donors, and women political leaders, Sudan formally ratified legislation criminalizing FGM in July of 2020. The experience in Sudan points to how introducing or amending legislation can take years and may require significant resources. UNICEF is coordinating a road map for rolling out the legislation, making sense of the law for communities, civil society and government ministries.

While FGM in humanitarian crises is largely under-researched, available literature suggests the practice is often deprioritized in emergencies as support for prevention and response interventions is not considered lifesaving or essential to girls' resilience. As the global community increasingly faces protracted crises that may disrupt FGM programmes, a **humanitarian-development-peace nexus** approach provides a solution for transcending the humanitarian and development divide by addressing the immediate needs and the long-term vulnerabilities of girls and women at risk of or affected by FGM.

INTEGRATING FGM IN NATIONAL POLICIES IN GUINEA-BISSAU:

In Guinea-Bissau, UNICEF worked with the government to ensure that FGM was mainstreamed in social development policy documents, including the National Poverty Reduction Strategy, as well as women's rights and child protection policies and action plans. With technical support from UNICEF, the 2018–2022 FGM National Strategy and Plan of Action in Guinea-Bissau was also finalized and disseminated. FGM is one of the priorities of the new Child Protection Policy (2018–2030) and the Child Protection Legal Code in which the law on FGM is being revised. The actions in Guinea-Bissau illustrate how policies for eliminating FGM are not limited to one specific action plan but rather the need to integrate FGM across policies and ministries to ensure prevention, protection and care programmes are in place.

4 **MONITORING:** Monitoring only the elimination of FGM as part of a gender transformative programming may not point to any noticeable change. This does not mean that change is not happening. Behaviors are normative which means that people's beliefs, aspirations, expectations, self-efficacy, might all be moving in the right direction but will not translate into behaviour change until specific conditions are met[24]. Gender transformation in the form of shifts in social and gender norms that sustain FGM is rarely linear, progress can be slow, but also very sudden following years of inertia. In the meantime, monitoring gender transformative approaches to FGM elimination involves documenting incremental change.

Suggested methodologies for monitoring such change include:

OUTCOME MAPPING: A people centered methodology for planning, monitoring and evaluating development initiatives that aim to bring about social change[25].

OUTCOME HARVESTING: An approach in which Outcomes, in programming contexts where relations of cause and effect relation are not clear, are verified, analyzed and interpreted[26].

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Community Mapping of Readiness to Publicly Pledge to End FGM in Eritrea:

In 2016 and 2018, UNICEF conducted FGM mapping studies in 140 villages in Eritrea to assess community readiness to publicly pledge to end FGM. The mapping studies measured: knowledge and exposure to anti-FGM activities; attitudes among respondents on issues related to FGM; attitudes among other community members surveyed; community's status in making a collective public pledge to end FGM; enforcement of legislation; and FGM prevalence among girls age 15 years and younger. The mapping studies also served to monitor whether communities were moving towards eliminating FGM.

Gender transformative approaches to evaluation actively **strive to examine, question, and change inequitable gender norms and imbalances of power** that contribute to the unequal distribution of roles and resources between men and women, boys and girls.

MOST SIGNIFICANT CHANGE: The process involves the collection of significant change (SC) stories emanating from the field level, and the systematic selection of the most important of these by panels of designated stakeholders or staff[27].

U-REPORT: U-Report is a social messaging tool run, owned and operated by UNICEF that allows anyone from any community, anywhere in the world to respond to polls, report issues, and work as positive agents of change on behalf of people in their community (see https://ureport.in).

5 **REPORTING:** Each year, UNICEF reports on its performance, describing the work that has been undertaken and the achievement made against specific objectives. It is important for country offices to document their most robust achievements on gender in their annual reporting, both for assessing and supporting further work and results on gender in their country contexts, and for effective aggregation in corporate level reports to the Executive Board, donors and key partnerships.

The Country Office Annual Report (COAR) captures Gender Results in the following sections:

- COAR Strategic Programme Narrative;
- Result Assessment Module (RAM);
- Key Performance Indicators (KPIs);
- Strategic Monitoring Questions (SMQs); and
- Outcome/Output Statement.

6 **EVALUATION:** Gender transformative approaches to evaluation actively strive to examine, question, and change inequitable gender norms and imbalances of power that contribute to the unequal distribution of roles and resources between men and women, boys and girls. Gender transformative approaches directly engage diverse evaluation stakeholders to ensure the evaluation process itself is participatory and contributes to the empowerment of girls and women.

UNICEF's Guidance on Gender Integration in Evaluation is a useful tool for planning evaluations.

Measuring whether a programme is gender transformative requires investing in research including impact evaluations. The global evidence base on gender norms is relatively sparse, although interest in evidence generation in this area is growing.

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ACKNOWLEDGEMENTS

UNICEF wishes to thank the people and governments that have contributed to this work. Specifically, we thank the European Union and the governments of Austria, France, Iceland, Italy, Luxembourg, Norway, AECID (Spain), Sweden, the United Kingdom and the United States of America for their generous financial contributions and technical support to UNICEF towards the elimination of FGM.

This technical note was developed in response to the Joint Evaluation of the UNFPA-UNICEF Joint Programme on the Elimination of Female Genital Mutilation: Accelerating Change Phase I and II (2008-2017) recommendations and produced by a team at the United Nations Children's Fund (UNICEF) from Child Protection and Gender with technical leadership from Ms. Nankali Maksud. Authors of the report include Harriet Akullu, Stephanie Baric and Yasmine Sinkhada with contributions from Mar Jubero, Helen Belachew, Alessia Radice, Dora Byamukama and Haithar Ahmed.

LINKS AND RESOURCES

Please find below useful resources for understanding gender transformative approaches.

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ENDNOTES

1 The 22 countries where UNICEF is implementing programmes supporting the elimination of FGM include Burkina Faso, Chad, Djibouti, Egypt, Eritrea, Ethiopia, Gambia, Guinea, Guinea-Bissau, Kenya, Liberia, Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone, Somalia, Sudan, Togo, Uganda and Yemen.

2 The 17 countries where the Joint Programme is being implemented include Burkina Faso, Djibouti, Egypt, Eritrea, Ethiopia, Gambia, Guinea, Guinea-Bissau, Kenya, Mali, Mauritania, Nigeria, Senegal, Somalia, Sudan, Uganda and Yemen (although Yemen was not included in 2019).

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ENDNOTES *(continued)*

5 Ibid.

6 Cislaghi, Ben, and Heise, Lori, 'Four avenues of normative influence', Health Psychology, 37, 562– 73, 2018, <https://onlinelibrary.wiley.com/doi/ full/10.1111/1467-9566.13008>. Note: Social influence is primarily based on the attitudes and behaviors of those whose opinion we value the most, who we consult regarding certain issues, and those whose perception of us matters. Members of this reference group or network include peers as well as influencers and role models who exert some form of influence over us. People tend to imitate the behaviors of their reference group or network frequently, and sometimes automatically.

7 Ibid.

8 Gamal Eldin, Ahmed, Babiker, Suad, Sabahelzain, Majdi, and Eltayeb, Mona 'FGM/C Decision-Making Process and the Role of Gender Power Relations in Sudan', Evidence to End FGM/C: Research to Help Girls and Women Thrive, New York, Population Council, 2018, <https://www.popcouncil.org/uploads/pdfs/2018RH_FGMC-GenderStudySudan.pdf>.

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13 United Nations Children's Fund, UN Women and Plan International, 'A New Era for Girls: Taking Stock of 25 Years of Progress', New York, 2020, <https://data.unicef.org/resources/a-new-era-for-girls-taking-stock-of-25-years-of-progress/>.

14 Structural barriers are bottlenecks that are not related to people's willingness to change, or the legal and social environment, but often link to infrastructure, services and types of livelihoods, and are commonly consequences of poverty and underdevelopment.

15 United Nations Children's Fund, UN Women and Plan International, 'A New Era for Girls: Taking Stock of 25 Years of Progress', New York, 2020, <https://data.unicef.org/resources/a-new-era-for-girls-taking-stock-of-25-years-of-progress/>.

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