



United Nations Population Fund



# ENDING FEMALE GENITAL MUTILATION (FGM) AND CHILD MARRIAGE

*The Role of Parliamentarians*

29-30 July 2016  
Johannesburg, South Africa

## Partners



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# CONTENT

|   |    |
|---|----|
| ACKNOWLEDGEMENTS  | 3  |
| BACKGROUND / RATIONALE  | 3  |
| INTRODUCTION  | 4  |
| OFFICIAL OPENING  | 4  |
| FGM: WHAT DO WE KNOW?   | 5  |
| Objectives and agenda   | 5  |
| FGM Overview and context  | 6  |
| FGM, a Threat to Women's Rights   | 8  |
| CHILD MARRIAGE AND AUC CAMPAIGN UPDATE                                      | 9  |
| Drivers and Consequences of Child Marriage                                  | 10 |
| ADDRESSING GENDER INEQUALITIES AND DISCRIMINATION                           | 11 |
| Experiences from Countries  | 11 |
| UNFPA-UNICEF Joint Programme to Accelerate the Elimination of FGM           | 13 |
| THE ROLE OF PARLIAMENTARIANS IN ENDING FGM                                  | 14 |
| Opportunities for Regional and National Collaboration between UNFPA and PAP | 14 |
| Areas of commitment by parliamentarians.                                    | 15 |
| Priorities for Action Plans   | 15 |
| CLOSING CEREMONY  | 17 |

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Further thanks go to the UNFPA Country Offices of Ethiopia, Kenya, Uganda, Guinea Conakry, Mali, Mauritania and the Islamic Republic of the Gambia for their active support towards this event.

Our gratitude to the President of the Pan African Parliament (PAP) and the President of the PAP Women's Caucus and all the Honourable Members of the PAP Women's Caucus for making the event possible and for their commitment and motivation to strengthen their mobilisation to end Female Genital Mutilation (FGM).

Our special thanks to the Governments of Finland, Germany, Iceland, Ireland, Italy, Luxembourg, Norway, Sweden and the United Kingdom for their generous contribution to the UNFPA-UNICEF Joint Programme to Accelerate the Elimination of Female Genital Mutilation.

## BACKGROUND / RATIONALE

Female Genital Mutilation (FGM) is one of the manifestations of gender-based human rights violations that aim to control women's sexuality and autonomy. In addition, FGM affects women and girls' sexual and reproductive health. It has adverse health effects it is part of many forms of social injustice that women suffer.

Since 2008, UNFPA, in partnership with UNICEF, has been at the forefront of accelerating the abandonment of this harmful practice through the Joint Programme (JP) on Female Genital Mutilation/Cutting: "Accelerating Change in West, East and North Africa". The JP engages with governments and different sectors of society, through integrated and culturally-sensitive approaches. It is implemented in support to national and community efforts to end the practice in 15 priority countries in the first phase (2008-2012) and 17 in the next phase (2014-2017).

The fact that ending FGM and child marriage are included in the Sustainable Development Goals that was unanimously adopted by world leaders in September, 2015 (Target 5.3: "Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation"), provides a pivotal opportunity for acceleration of actions at different levels. At the same time, it also demands close monitoring of progress by government and other actors at various levels.

In view of the fact that Members of Parliaments (MPs) are better placed to advocate and push for implementation of programmes in their countries, there is need to engage the MPs on how to better advocate for the strategic issues of partnership in SRHR. In partnership with ESARO, the Pan-African Parliament (PAP) Women's Caucus organised a regional meeting in Johannesburg to strengthen the engagement of MPs in the acceleration of efforts to eliminate FGM and Child marriage.

## INTRODUCTION

The Pan African Parliament (PAP) and UNFPA ESARO held a two day workshop in Sandton, South Africa to discuss the role of parliamentarians in ending female genital mutilation (FGM) and child marriages. Ninety-three (93) people attended the workshop, representing Forty-seven (47) countries in Africa. This report provides a summary of proceedings and resolutions of the workshop. It further contains a number of action points accented to by the members of Women's Caucus of the PAP.

## OFFICIAL OPENING

The official opening was moderated by **Mrs Wawa Dahab Josiane**, *Senior Clerk of PAP*. She congratulated all parliamentarians for sparing time from their busy schedules to engage on the role of parliamentarians in ending female genital mutilation (FGM) and child marriages.



**Mrs Wawa Dahab Josiane**  
Senior Clerk of PAP

**Hon Haidara Aichata Cissé**, *Chairperson of the PAP Women's Caucus* gave a welcome address and said "violence against women cannot be accepted. It causes prejudice and cannot be practiced whether in private or in public". She encouraged participants to advocate for laws that protect women and girls. "As women and parliamentarians, it is our duty to partner and propose means to bring violence against women to an end", she added. She urged women in parliaments, to propose practical means that can bring FGM to an end. She thanked the Speaker of PAP and the UNFPA representatives for giving the parliamentarians the opportunity to engage with others on their roles and capacities in ending FGM and child marriages.



**Hon Haidara Aichata Cissé**  
Chairperson of the PAP Women's  
Caucus

**Ms. Justine Coulson**, *UNFPA Deputy Regional Director for Eastern and Southern Africa* thanked participants for taking time to come together in a collaborative effort to end FGM and child marriages. She reminded them of their important role in the society and how strategically positioned they were to fight FGM and child marriages.



**Ms. Justine Coulson**  
UNFPA Deputy Regional  
Director for Eastern and  
Southern Africa

According to a recent UNFPA report, "3 million girls are at risk of FGM in Africa alone while about 14 million girls under the age of 18 years are married every year world- wide". This translates to "39,000 girls being married every day. An average of 2 million under-age girls give birth in Africa every year".

**H.E. Hon. Roger Nkodo Dang**, *President of the Pan-African Parliament* officially declared the workshop open. MPs need to get involved in such discourse because they can end FGM. He noted that such workshops allow parliamentarians and international organizations to join hands and come up with ideas to tackle the challenges of FGM and child marriages; and reiterated the importance of men attending such workshops – they are the perpetrators of child marriages. The PAP is determined to come up with strategies to eliminate FGM and child marriages. He said, "we all have a double responsibility to defend women against human rights violation and challenge our Governments to take a stand in bringing FGM and child marriage to a complete end". He was convinced that if extra effort is made in defending women's rights, Africa will be able to guarantee a better life and continue the slogan "one life, one voice".



**H.E. Hon. Roger Nkodo Dang**  
President of the Pan-African  
Parliament



## FGM: WHAT DO WE KNOW?

The session was moderated by **Hon. Haidara Aichata Cisse**, Chairperson of the PAP Women's Caucus. She spoke passionately on the importance of understanding the effects of FGM and child marriages to the communities in Africa.

### Objectives and agenda

**Ms. Seynabou Tall**, Gender and Gender-based Violence Adviser, UNFPA ESARO highlighted the objectives as well as the expected results of the workshop.



### Objectives

1. Strengthen the knowledge of members of the PAP Women's Caucus on Female Genital Mutilation (FGM) and other harmful practices such as Child marriage as a human right and human dignity threat as well as a SRHR issue.
2. Enhance awareness of the effects of Female Genital Mutilation (FGM) and Child Marriage and share experiences including in the areas of participation and addressing inequalities and discrimination.
3. Strengthen the role of members of PAP Women's Caucus in the elimination of Female Genital Mutilation (FGM) and Child marriage
4. Identify opportunities for regional and national collaboration between UNFPA and PAP



## Expected results

It was expected that after the workshop,

1. *Members of PAP Women's Caucus are equipped to play a critical role of monitoring, tracking and reporting on progress in the elimination of FGM at country and regional levels, especially in the context of the SDGs (target 5.3) and the AU Agenda 2063 "Africa, the future we want"*
2. *Members of PAP Women's Caucus become an advocacy group to support countries without legislation to adopt one.*
3. *Members of PAP Women's Caucus support/initiate country level actions for the elimination of FGM*
4. *Members of PAP Women's Caucus are Champions of FGM elimination in their countries, national parliament and communities.*

## FGM Overview and context

**Ms. Seynabou Tall** presented an overview of FGM in Africa. She gave the definition of FGM according to WHO as, "all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs whether for cultural or other non-therapeutic reasons". Instead of talking of circumcision, she invited parliamentarians to use the term "excision".

There is no consensus on the origins of FGM and there are NO benefits to it. FGM is NOT related to Islam or any other religion. Many reasons have been given to justify FGM but none of them qualifies this act of human violation. Some of the reasons offered may include:

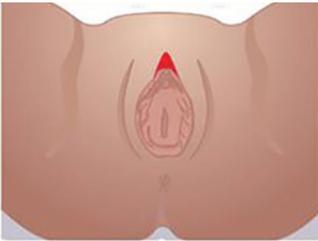
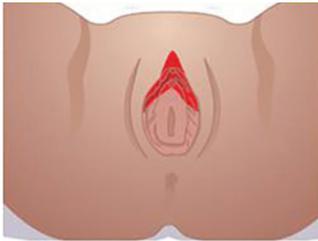
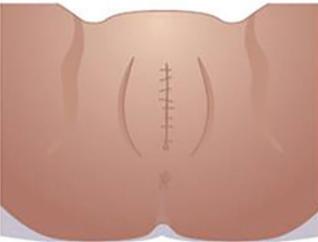
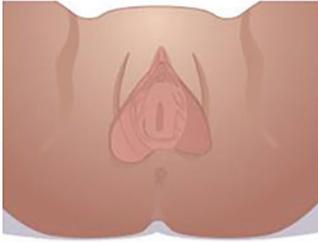
1. *To control woman sexuality where virginity is prized and to ensure "marriability".*
2. *Rite of passage from Childhood to Womanhood*
3. *To remove the clitoris and labia - viewed by some as the "male parts" of a woman's body*
4. *Hygiene: in some FGM-practicing societies, uncut women are regarded as "unclean" and are not allowed to prepare food and fetch water.*
5. *Religion: Muslims, Christians, Jewish, Animists*
6. *Myths: the clitoris is unattractive, can cause infertility and death of the new born*



**Ms. Seynabou Tall**  
Gender and Gender-based  
Violence Adviser, UNFPA  
ESARO

FGM Definition  
according to WHO  
**"all procedures  
involving partial  
or total removal  
of the external  
female genitalia  
or other injury to  
the female genital  
organs whether for  
cultural or other  
non-therapeutic  
reasons"**

WHO has classified FGM into 4 categories:

|  |  |
|--|--|
| <p><b>Category 1 (Clitoridectomy)</b></p>  <p><i>partial or total removal of the clitoris (a small, sensitive and erectile part of the female genitals)</i></p>   | <p><b>Category 2</b></p>  <p><i>Partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (the labia are the 'lips' that surround the vagina).</i></p>             |
| <p><b>Category 3</b></p>  <p><i>Narrowing of the vaginal opening by the creation of a covering seal. The seal is formed by cutting and sewing over the outer, labia, with or without removal of the clitoris or inner labia</i></p> | <p><b>Category 4</b></p>  <p><i>All other procedures that involve pricking, piercing, stretching or incising of the clitoris and/or labia; introduction of corrosive substances into the vagina to narrow it</i></p> |

The work of parliamentarians in ending FGM and child marriages should go towards saving girls and women from abuse. It should protect them from the known immediate and long term consequences of FGM.

1. **Immediate Consequences** of FGM include severe pain, excessive bleeding, difficulty in passing urine, infections, trauma, psychological disorder, and death.
2. **Long Term Consequences** of FGM include urinary tract infections, keloid, risk of bleeding during intercourse, poor quality of sexual life, birth complications, danger to the new-born, and psychological consequences.

The United Nations has been highly involved in eliminating FGM through many of its agencies and came up with resolutions that can be practical if adhered to. On 20 December 2012, following sustained leadership from the African Union Member States, the 67th UNGA adopted Resolution 67/146 “Intensifying global efforts for the elimination of female genital mutilations” which provides a clear political call to action to strengthen efforts aimed at the elimination of female genital mutilations.

UNFPA engages with governments and different sectors of society – from NGOs, media, religious leaders and health workers to girls at risk and parliamentarians/legislators. Since 2008, UNFPA in partnership with UNICEF has been at the forefront of accelerating the abandonment of this harmful practice across Africa through the Joint Programme on Female Genital Mutilation/Cutting. The programme was geared towards “accelerating change in 15 countries in West, East and North Africa” for the first phase (2008-2012) and then for 17 countries in the (2014-2017) phase, of which 16 in Africa.

## FGM, a threat to women's rights



**Mr Idrissa Ouedraogo**  
Gender Adviser UNFPA  
WCARO

Speaking on human rights violation, **Mr Idrissa Ouedraogo**, Gender Adviser UNFPA WCARO said, “FGM has already been identified as a human right violation”. He explained that some human rights that are violated through FGM practices and child marriages include:

- a. The right to life and physical integrity, including freedom from violence:** The right to physical integrity includes the right to freedom from torture, inherent dignity of the person, the right to liberty and security of the person, and the right to privacy.
- b. The right to be free from all forms of discrimination against women defines discrimination against women broadly as:** “any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field.”
- c. The right to health:** FGM can result in severe physical and mental harm and because it constitutes an invasive procedure on otherwise healthy tissue without any medical necessity, it is seen as a violation of the right to health.
- d. The rights of the child:** Because FGM predominantly affects girls under the age of 18, the issue is fundamentally one of protection of the rights of children. The Convention on the Rights of the Child (CRC), 1989, acknowledges the role of parents and family in making decisions for children, but places the ultimate responsibility for protecting the rights of a child in the hands of the government.

In addition to recognising that FGM violates these fundamental rights, numerous instruments establish that Governments have a duty to prohibit the FGM and protect women and girls vulnerable to the practice. This duty is fulfilled by enacting legislation

and implementing other methods of social and cultural education. Legislation should be enacted that encompasses these fundamental rights and governmental duties related to the practice of FGM:

1. The duty to modify customs that discriminate against women
2. The duty to abolish practices that are harmful to children
3. The duty to ensure health care and access to health information
4. The duty to ensure a social order in which rights can be realized.



# CHILD MARRIAGE AND AUC CAMPAIGN UPDATE



**Dr. Asha Mohamud**  
Youth Adviser, UNFPA ESARO

**Dr. Asha Mohamud**, Youth Adviser, UNFPA ESARO mentioned that there are many stakeholders and organs in place to protect women from human rights violation. Of interest to the workshop are the **Global and regional commitments on Adolescent Sexual and Reproductive Health**. These include:

- Universal Declaration on Human Rights;
- Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW);
- Convention on the Rights of the Child (CRC) (and General Comment on Adolescent Health);
- African Charter on the Rights and Welfare of the Child;
- African Charter on Human and People's Rights and its protocol on the Rights of Women in Africa;
- African Youth Charter

She said child marriages in Africa are still being practiced. Data collected show following:

1. More than 700 million women alive today were married as children. 17% of them, or 125 million, live in Africa.
2. Approximately 39% of girls in sub-Saharan Africa are married before the age of 18.
3. All African countries are faced with

the challenge of child marriage, whether they experience high child marriage prevalence, such as Niger (76%) or lower rates like Algeria (3%).

4. Child marriage is widespread in West and Central Africa (42%) as well as Eastern and Southern Africa (36%).

5. Relative reduction in some countries, however, continuous increase in absolute number of girls married before age 18 due to population growth in Africa.

6. Child marriage is a human rights violation and is a determining factor for exclusion from education and sustaining elevated rates of teenage pregnancy, HIV, and GBV with long-lasting and devastating consequences for the girls and their children later in life.

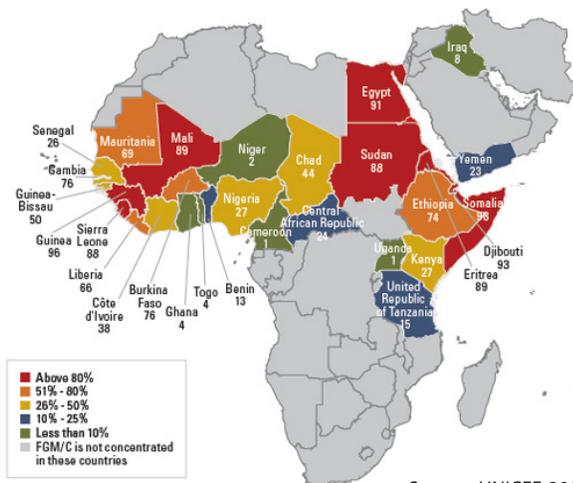


More than  
**700 million**  
women alive today were  
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**39%**  
girls in sub-Saharan  
Africa are married before  
the **age of 18**

Percentage of girls and women aged 15 to 49 years who have undergone FGM, by country



Source: UNICEF, 2013

## Drivers and Consequences of Child Marriage

Child marriages have drivers and consequences. Drivers can be identified as the causes while consequences are the effects, whether immediate or long term.

| DRIVERS  | CONSEQUENCES  |
|--|---|
| Gender inequality and lack of empowerment of girls | Adolescent and new-born mortality and morbidity, e.g. obstetric fistula |
| Poverty  | Adolescent pregnancy  |
| Insecurity, especially in times of conflict        | Human rights violations   |
| Limited and lack of quality education              | Emotional and mental health   |
| Lack of adequate and inconsistent legal framework  | Long lasting and devastating consequences for the girls later in life   |
| Tradition and cultural practices                   | GBV   |
|  | HIV   |

According to Dr. Asha Mohamud the best approaches to delay child marriage are those that elevate girls' visibility and status in their families and communities. These approaches should also build their skills and knowledge, and must be cost-conscious and economical.

UNFPA and UNICEF have Global Programmes to Accelerate Action to End Child Marriages in order for girls to fully enjoy their childhood free from the risk of marriage. They experience healthier, safer and more empowered life transitions in control of their own destiny. They make choices and decisions about their sexuality, relationship formation/marriage, and childbearing. The programme has been running from 2016 to 2019 and expected to decrease at least 10% in the percentage of women 20-24 who are married or in union by age 18.

Targeted countries for the programme are: Burkina Faso, Ethiopia, Ghana, Mozambique, Niger, Sierra Leone, Uganda, Zambia, Bangladesh, India, Nepal and Yemen, regional and global advocacy and partnerships, e.g. with the African Union, SADC, EAC and ECOWAS.

Parliamentarians were reminded of their critical roles, therefore they can do a lot to echo the voice of change. Some potential actions may include:

1. Learn more about Laws and policies affecting adolescent SRHR (e.g. child marriage)
2. Support Adoption of the Model Law on Child Marriage or another Comprehensive law to protect adolescents
3. Support allocation of resources for adolescent sexual and reproductive health and child marriage eradication
4. Monitor national and regional level progress on adolescent health and child marriage eradication in parliament

# ADDRESSING GENDER INEQUALITIES AND DISCRIMINATION



**Hon. Hansa Houmed Bilil**  
Chairperson of the Permanent Committee on Gender, Family, Youth and People with Disability of the PAP

**Hon. Hansa Houmed Bilil**, chairperson of the Permanent Committee on Gender, Family, Youth and People with Disability of the PAP chaired the session. Experiences from regions were shared.

## Experiences from Countries

### UGANDA

**Ms. Roselidah Ondeka** of UNFPA Uganda said a law against FGM was passed in 2011 resulting in many mutilators jailed while others decided to abandon the practice. Media played a crucial role in reporting many FGM cases and raising awareness against FGM. Currently, the Government is allocating resources to Districts where FGM was being practiced to help maintain the momentum against FGM.

| CHALLENGES  | ACTIONS   |
|---|---|
| Most girls are being sneaked into neighboring countries like Kenya to be cut. | Intensify cross-border initiatives and community awareness to limit FGM activities. |

### KENYA

**Ms. Florence Gachanga** of UNFPA Kenya announced that Kenya has experienced a reduction of FGM prevalence from 32% in 2003 to 21% in 2013. The FGM ACT, legislation and The Office of The Director of Public Prosecution are in place to specifically deal with FGM perpetrators. Apart from media advocacy campaigns, men, religious leaders and the youths have been involved in raising awareness against FGM.

| CHALLENGES  | ACTIONS  |
|---|--|
| Lack of resources and structures to protect and support FGM survivors | Develop a national strategy and national plan to address FGM and help FGM victims. |

### ETHIOPIA

**Ms. Tsehay Gette** of UNFPA Ethiopia provided a positive outlook for Ethiopia in the campaign to end FGM. She said, Ethiopia used to have a high FGM prevalence but the numbers have been reducing lately. The reduction is largely due to the following:

A criminal Court for FGM perpetrators was set up

1. Front line health workers training module on HTPs
2. Revised minimum age of marriage to 18 years
3. Development of a national action plan on girls and women's rights
4. Creation of an environment where religious leaders can engage in the elimination of FGM

Community dialogue to openly discuss FGM, not seen as a taboo anymore.

| CHALLENGES                                     | ACTIONS   |
|--|---|
| Lack of mechanisms and structures to stop FGM. | Use of community based structures such as women's organisations and youth networks to stop FGM. |

## THE GAMBIA

**Mr Kunle Adeniyi** from the UNFPA Country Office for the Islamic Republic of the Gambia said, “we are trying to have a situation where the young people today who are the next generation will not tolerate FGM”. UNFPA is working with partners in the education sector in the country. The curriculum on health has had anti-FGM messages incorporated. Work has also been done with the madrasas (Islamic schools) to educate young people on FGM.

## MALI

In Mali, UNFPA Mali country office is working with its partners on cross-border activities. Neighbouring countries have laws criminalizing FGM, **Ms Aminata Dicko** of the UNFPA Mali Country office noted. This is therefore make it possible for number of perpetrators to cross the border to mutilate girls in Mali.

## GUINEA

The UNFPA country office in Guinea is working on raising awareness and sensitizing on FGM practice. This, according to **Ms Fanta Wague**, will ensure that the issue is front and centre of the development discourse. She emphasised the need for partnerships with all stakeholders to curb FGM.

## MAURITANIA

**Ms Khadijetou Cheikh Lo** of UNFPA Mauritania Country Office stressed the need to raise more awareness of FGM and other harmful traditional practices. She highlighted the need to strengthen partnerships with Imams and Parliamentarians to accelerate the eradication of FGM within this generation.



**Ms. Meike Madeleine Keldenich**  
Technical Specialist FGM,  
UNFPA WCARO

From the UNFPA West and Central Africa Regional Office (WCARO) **Ms. Meike Madeleine Keldenich**, *Technical Specialist FGM*, emphasized the need to “work together to speed up the elimination of these practices”. West Africa is home to some of the countries with the highest prevalence of FGM and child marriage and a lot has been done to eliminate these harmful practices. It’s important to highlight the positive movement of change that is underway in all countries, but there’s still a lot that needs to be done. We can end FGM and child marriage in one generation when we work together - especially with young people. Their voices are powerful and can ensure that they are the last generation to have experienced these harmful practices. Members of Parliament (MPs) can play a crucial role in this.



**Ms. Enhrah Ahmed**  
Regional Gender Advisor,  
UNFPA ASRO

**Ms. Enhrah Ahmed**, *Regional Gender Advisor* for UNFPA Arab States Office (ASRO), called for taking action to End Child Marriages and allow girls to fully enjoy their childhood free from the risk of marriage. She said this will enable them to experience healthier, safer and more empowered life transitions. They will be in control of their own destiny, including making choices and decisions about their sexuality, relationship formation/ marriage, and childbearing. The consequences of child marriages in the region include human rights violations; adolescent pregnancy; adolescent and new-born mortality and morbidity; emotional and mental health; HIV; GBV; and other long lasting and devastating consequences of the girls later in life.

## UNFPA-UNICEF Joint Programme to Accelerate the Elimination of FGM



**Ms. Seynabou Tall**  
Gender and Gender-based  
Violence Adviser, UNFPA  
ESARO

**Ms. Seynabou Tall** explained that this is a joint program of the two agents working with different stakeholders towards the same goal since 2008. This is known as ONE Program in the United Nations.

Data has been collected that clearly show the 17 countries with high and less FGM prevalences. She however, encouraged all participants from all countries represented to continue working hard to eliminate FGM. The two agents (UNFPA and UNICEF) are supporting Governments, Civil society Organizations and communities to end FGM. Continued efforts will definitely bring FGM to an end.



# THE ROLE OF PARLIAMENTARIANS IN ENDING FGM

## Opportunities for Regional and National Collaboration between UNFPA and PAP

Participants went into group discussions to identify roles that members of PAP Women's Caucus can play in eliminating FGM and Child Marriage in their countries and the region. They were grouped according to their language blocs – English, Arabic, French, and Portuguese. Each group reported back with specific action areas at regional and national levels.

### FRENCH SPEAKING COUNTRIES

#### Countries:

Cote d'Ivoire, Burkina Faso, Guinea, Mali, Mauritania, RDC, Djibouti, Rwanda, Senegal, Cameroon, RCA, Burundi

1. Advocacy for the ratification and implementation of the Maputo protocol.
2. Development of model laws on FGM and child marriage for countries without laws.
3. Engaging Men MPs in all initiatives for laws on FGM and child marriage

### ENGLISH SPEAKING COUNTRIES

#### Countries:

Malawi, Kenya, Uganda, Rwanda, Ethiopia, Tanzania, Botswana, Lesotho, Swaziland, Seychelles, Sierra Leone

1. Awareness raising on FGM and child marriages using media, disseminating laws, collaborating religious and traditional leaders and target lady practitioners.
2. Advocacy - implement law, formulate policies, budget allocations, free and

compulsory primary schooling

3. Law enforcement - establish Anti FGM and Anti child marriage policies and laws, sensitize community members, monitor the implementation of laws, move motions on law creation and amendments.

### ARABIC SPEAKING COUNTRIES

#### Countries:

Egypt, Algeria and Sudan

1. Law and strategies formulation, implementation and monitoring of programmes
2. Active involvement of parliamentarians in social roles
3. Community awareness raising through literacy.
4. Integration of FGM and child marriages in school curricula
5. Media Anti FGM campaigns - media is a mirror of the state and population. It has the power to change or make any situation worse.

### PORTUGUESE SPEAKING COUNTRIES

#### Countries:

1. Communities mobilisation to end FGM
2. Involvement of traditional and religious leaders, media, youths and other stakeholders to end FGM
3. Coordination of efforts amongst partners to put FGM to an end.
4. Enforcement of legal age of marriage laws
5. Capacity building and empowerment of girls to speak out

# AREAS OF COMMITMENT BY PARLIAMENTARIANS

Parliamentarians cast votes on their areas of commitment per country. They were to vote for a maximum of three priority areas for commitment and collaboration. After the polling the following were the results:

|                        |    |
|------------------------|----|
| Policy Advocacy        | 26 |
| Legislation            | 28 |
| Community Engagement   | 28 |
| Resource Allocation    | 14 |
| Implementation of Laws | 30 |

Participants ranked the need for implementation of laws above all other areas for action. While a number of points had been discussed on the need for allocation of adequate resources, members were of the view that if current laws were implemented well, it will reduce the need for efforts in other areas. Resource allocation may even become a lesser challenge.

## Priorities for Action Plans

Priorities were identified for the various areas of commitment.



### IMPLEMENTATION

1. To ask oral questions in parliament on the implementation of existing laws. Ask Government to report on how they have enforced national and international laws on ending FM and child marriage
2. Share good practices among countries on how laws have been implemented
3. Set up M&E framework as countries to give good reports to PAP



### COMMUNITY ENGAGEMENT

1. Identify and promote alternative rites of passage to communities instead of FGM
2. Develop initiatives to strengthen actions against cross border FGM
3. Every MP should communicate or organize events to engage their constituencies to discuss issues on stopping FGM and child marriages



### LEGISLATION

1. Present a statement of FGM and child marriage on the floor of PAP in October 2016 towards a resolution of PAP to be sent to AU and state parliaments
2. Propose specific FGM laws or amendments in countries without legislation
3. Harmonize laws at regional level



## POLICY ADVOCACY

1. Undertake high level policy advocacy (targeting relevant ministries and heads of strategic departments)
2. Target male parliamentarians to gain support for PAP undertaking advocacy against FGM
3. Conduct advocacy activity for all countries to ratify and sign the Malabo protocol
4. Conduct advocacy activity for all countries to remove reservations, ratify and sign and Maputo protocols to make them more effective



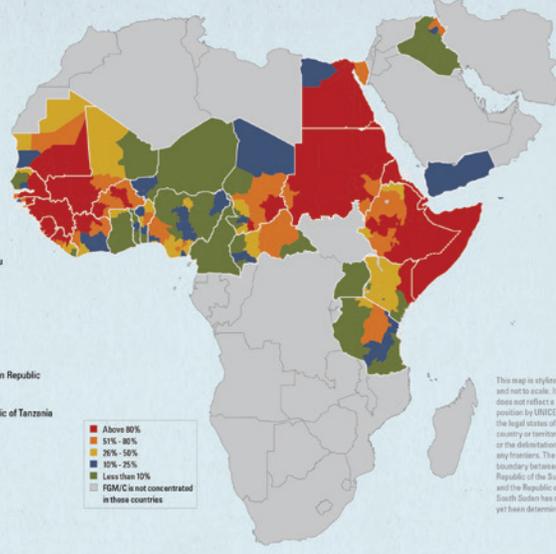
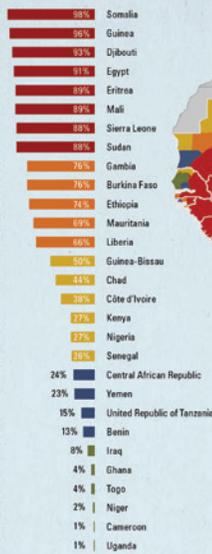
## RESOURCE MOBILIZATION

1. Have an FGM specific resource allocation in the budgets of the Ministries responsible for gender, children, women, justice and other strategic ministries to make impact
2. Elaboration of specific projects to help mobilize resources for the campaign against FGM and child marriage
3. Develop a comprehensive regional plan to mobilize resources for the campaign against FGM in Africa.

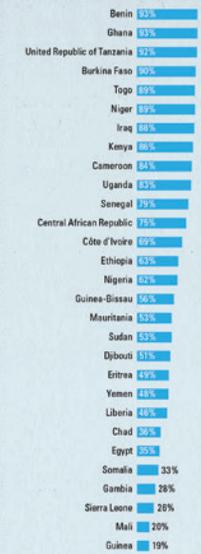
# 29 countries, more than 125 million girls and women



**FGM/C is concentrated in a swath of countries from the Atlantic Coast to the Horn of Africa, with wide variations in the percentage of girls and women cut, both within and across countries**



**In most countries where FGM/C is practised, the majority of girls and women think it should end**



## WHEN

In half of the countries, the majority of girls were cut **before age 5**. In the rest of the countries, most cutting occurs between 5 and 14 years of age

## HOW

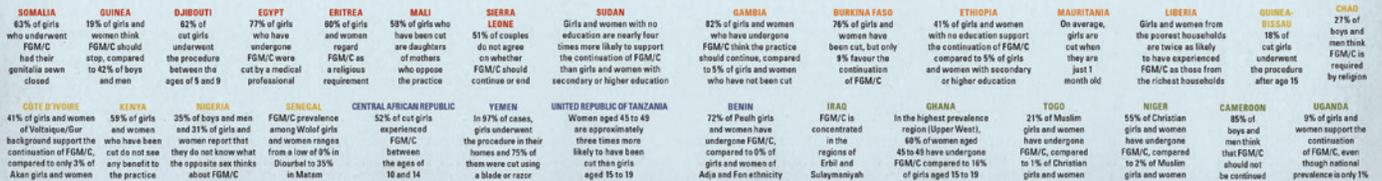
Across a majority of countries, most daughters have had their **genitalia cut, with some flesh removed**

## BY WHOM

In nearly all countries where FGM/C is concentrated, **traditional practitioners** perform most of the procedures

## WHY

**Social acceptance** is the most frequently cited reason for supporting the continuation of the practice



Source: [www.unicef.org/protection/files/00-FMGC\\_infographiclow-res.pdf](http://www.unicef.org/protection/files/00-FMGC_infographiclow-res.pdf)

## CLOSING CEREMONY

**Hon. Cecilia Chazama**, 1<sup>st</sup> Vice Chairperson of the PAP Women's Caucus moderated the official closing ceremony. She thanked all participants for putting effort in identifying the roles of parliamentarians in ending FGM and child marriages.

**Ms. Seynabou Tall**, Gender and Gender-based Violence Adviser, UNFPA ESARO, presented the conclusions and way forward regarding elimination of FGM and child marriages. She explained the importance of implementing all the priorities on national and regional levels.

The Vice-Chairperson of the Women's Caucus, **Hon. Gloriose Nimenya** thanked all participants for sparing time to come to the workshop and join efforts in trying to eliminate FGM and child marriages. She encouraged all participants not to give up the mobilisation for women's rights.

**Hon. Safia Elmi Djibril**, the second Vice-President of PAP also encouraged participants to continue in the fight against abuse. She emphasized on the need for all women to take initiative in ending FGM and child marriages.

**Hon. Bernadette La Haye**, Vice-President of PAP thanked all participants for coming together to work towards the end of FGM and child marriages. She appreciated all the women that are standing in the gap to make a difference in the world, particularly in Africa and declared the workshop officially closed.





**United Nations Population Fund**  
East and Southern Africa Regional Office  
Telephone Office: +27 11 603 5337

**<http://esaro.unfpa.org>**