



## **Quality Criteria of INTEGRA, the German network against female genital mutilation, FGM, for working in program countries.**

### **Introduction**

*Programs that have demonstrated success in promoting abandonment of female genital mutilation on a large scale build on human rights and gender equality and are non-judgemental and non-coercive. They focus on encouraging a collective choice to abandon female genital mutilation.<sup>1</sup>*

An estimated 140 million girls and women are genitally mutilated worldwide. Yearly, about 3 million girls are threatened by FGM. Genital mutilation is practiced above all in 28 African countries, to a small extent in some countries of Asia and the Middle East, and through migration into countries of the Western hemisphere. According to the European Parliament the estimated yearly number of girls and women at risk in Europe is 18.000.

The practice of FGM violates fundamental human rights including children's rights. It signals lack of gender equality and structural disadvantages for girls and women. FGM as a socio-cultural problem is deeply rooted in the given social, economic and political structures.

Legal bases for the work against this harmful practice are international and regional agreements such as the UN Conventions on the Rights of the Child (1989) and on the Elimination of all forms of Discrimination against Women (1979), the Action plans of important international conferences – World conferences for Women, Nairobi (1985) and Beijing (1995), ICPD,

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<sup>1</sup> Eliminating Female Genital Mutilation – An interagency statement, 2008, p.13

International Conference on Population and Development (1994) and the Protocol of the African Union on the Rights of women in Africa, Maputo Protocol (2003).

### **Quality criteria**

Social change is indispensable for durably ending the practice of FGM. Efforts to reach this goal require global long-term engagement and tackling the root causes of the practice.

On the basis of these premises the *Donors' Working Group on Female Genital Mutilation/Cutting*<sup>2</sup> which comprises the main donors for ending FGM, in 2007 agreed on a common position for their work. The *UNICEF Innocenti Research Centre*<sup>3</sup> too, has established criteria that prove to be conducive to successfully working against FGM/C. The basic idea is to identify overarching strategies for replicating successes.

The members of the *German network to end Female Genital Mutilation, INTEGRA*, in their projects against FGM in Africa, adhere, as a general rule, to the below criteria. This does not mean that all of their measures always take all criteria into consideration. Depending on the given context relevant aspects are selected.

Project examples are on <http://www.netzwerk-integra.de/>

### **Participation and Community approach**

The practice of FGM is deeply rooted in the societies in question. Therefore, a positive societal transformation process is needed. In its course community members are individually and jointly strengthened to protect the girls from the harmful practice. Hence, a participatory approach including the largest possible number of target groups of a community is a crucial prerequisite for successful work to end FGM. Besides considering the special interests, aims and needs of girls and women, both boys' and men's participation as an important factor should not be underestimated. This is why, if possible, right from the beginning 50 % men and 50 % women should be included in the activities.

The practice of FGM varies much within regions and countries. Therefore, taking into account the local context with its given specific conditions, is a prerequisite for successful work. Locally adapted and culturally appropriate measures have to be developed together with the community concerned. This promotes the readiness to discuss the issue, and is important for durably changing social attitudes. As a rule, communities accept measures against FGM more readily if the initiative comes from themselves.

### **Dialogue approach**

Clinging to the tradition of FGM is often not due to a lack of information. In spite of education and sensitisation on the negative consequences, in many places the practice is continued. FGM being a social convention with a high societal pressure to follow the norm, individual families have extreme difficulties to durably protect their daughters from the practice. It is therefore important to include the various actors of a community, and to mention and elaborate difficult

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<sup>2</sup> Toward a Common Framework for the Abandonment of FGM/C, 2007

<sup>3</sup> UNICEF, 2010, the Dynamics of Social Change – Towards the Abandonment of Female Genital Mutilation/Cutting in Five African Countries. UNICEF 2005: Changing a Harmful Social Convention, Female Genital Mutilation/Cutting.

issues in an open dialogue (*non-directive dialogue*).

Dialogue approaches<sup>4</sup> in the closed space of a group enable members of a community to have a debate on sensitive issues like FGM or the power relations between the sexes. With the help of trained multipliers of both sexes they bring up their own solutions and actions for eliminating the practice. The different actors of a community can then carry the processes of reflections and changes into the whole community.

### **Promotion of the human rights of girls and women**

FGM is a multi sector issue touching in particular the areas of discrimination. Activities for ending discrimination are, therefore, all the more successful if they contribute to equal rights of girls and women in the communities and reduce violent behaviour against them. In the process, and with a view to the issue of FGM, the status of women and their multiple discriminations should be analysed as well as power relations and decision-making structures.

### **Plural level approach and multi actor approach**

The plural level approach holds that developmental cooperation –if it is to have structural and durable effect – has to encompass different levels of a society<sup>5</sup>. Therefore, on the one hand measures should be carried out that aim at the individual empowerment of a community (for example, sensitisation of target groups – micro level technical support of national or regional NGOs – intermediary level) and, on the other hand measures that aim at changing frame conditions (for example, policy design at national and international levels – macro level) and strengthen governments in their responsibility towards victims.

Moreover, the various actors on different levels such as community groups, NGOs, human rights groups, government authorities and international organisations should link up. They should jointly exchange knowledge as to successes in their work against FGM, lobby at the level of decision-makers and, to the highest possible extent, cooperate in a complementary way.

### **Multi sector approach**

Work against FGM is linked to various sectors such as education and health systems, public finance and the judiciary. Each sector can contribute to end the practice by implementing specific measures within its competence.

The different sectors should coordinate their measures, integrate them into their regular programs and speak with one voice. This requires a clear political positioning against FGM.

The role of the media for ending FGM should not be underestimated, since they can provide the necessary information to the communities in a focussed and locally adapted way. Rural radio stations that broadcast in local languages play an important role.

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<sup>4</sup> Examples for dialogue approaches are the “Dialogue of generations” or the “Value centred approach”.

<sup>5</sup> Harmonised use of intervention instruments of development cooperation at global, national, regional and local levels (Theo Rauch, 2009: Development policy. Theories, strategies, instruments).

## **Efficiency evaluation and research**

Measures against FGM should be accompanied by scientific research that permits contributions to improve approaches, as well as by an integrated efficiency evaluation that, for example, at the level of target groups, assesses if intended attitudinal changes actually occurred and whether they are durable.

Translated from German by Gudrun Haupter  
April 2012