

# Financial Cooperation with Developing Countries

Frankfurt, January 2010

## Female Genital Mutilation

### A fundamental breach of human rights

Female Genital Mutilation (FGM) is a collective term referring to all procedures involving partial or total removal of the external female genitalia or other injury to female genital organs for non-medical reasons. Worldwide an estimated 100 to 140 million girls and women have been subjected to FGM, with another 3 million girls at risk of undergoing the procedure every year. FGM is practised predominantly in 28 countries in Africa and in a few Asian and Middle Eastern countries. It is also common among certain immigrant communities in North America and Europe with an estimated 20.000 women affected in Germany.

The procedure causes severe psychological and physical damage, which women have to cope with for the rest of their lives. Among others, it is responsible for infections, increases the risk of severe childbirth complications and can result in the death of the woman and/or the newborn.

Today it is widely recognised that female genital mutilation constitutes one of the most severe human rights violations against women and girls reflecting deep-rooted inequality between the sexes. The ritual infringes the right to health, security and physical integrity of the person, the right to be free from torture and inhuman, degrading treatment and – when resulting in death – the right to life. As FGM is mostly carried out on minors it is also a violation of the rights of the child. A number of international conventions condemn FGM. Amongst them the Maputo Protocol on the Rights of Women in Africa; a Protocol to the African Charter on Human and Peoples' Rights signed in 2003. In several countries, female genital mutilation is now an offence punishable by law and counteracted in the framework of national programmes.

### German efforts to counteract FGM

Germany too has pushed resolutely to bring FGM to an end. For instance, it has included specific measures in its Gender Action Plan 2009-2012. These measures include the systematic discussion of the topic with affected countries as part of the ongoing political dialogue and the financing of successful approaches to overcome the practices as part of relevant programmes in high prevalence settings. These programmes are being financed by the German Federal Ministry for Economic Cooperation and Development (BMZ) and implemented by the German bilateral agencies GTZ, DED, KfW as well as by a number of NGOs.



*Young girls at the age of being circumcised*  
© KfW Bildarchiv / Photothek.net

The Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ) GmbH - on behalf of the BMZ - has been active in international efforts to stop female genital mutilation since May 1999. The DED, the German Development Service, is deploying experts to various African countries to help with the development of local capacities and measures aiming at eliminating female genital mutilation.

## Financial Cooperation

The long-standing commitment of KfW Entwicklungsbank (German Development Bank) in sub-Saharan partner countries revealed the impact of FGM on other development efforts already in the second half of the 90s. The topic was addressed initially in Guinea during KfW's support for the country's national family planning programme. Relevant complementary measures to an irrigated farming programme in Mali followed.

The topic only came to be integrated proactively into Financial Cooperation (FC) projects in the framework of new health sector projects and programmes where FGM is increasingly being taken into account within an integrated approach to sexual and reproductive health and under gender aspects. Two FC-typical approaches have since emerged:

1. Use of Social Marketing instruments to affect behaviour change
2. Establish fund mechanisms to support local initiatives



*The group "Nyogolan" performs an anti-FGM play on the Anti-FGM Action Day 6 Feb 2008 © Photo by Harandane Dicko*

## Promoting Behavioural Change

The currently most widely supported approach to combat FGM is through social marketing programmes that also include components for HIV prevention and family planning and which are based on respective national strategies. Examples include the HIV/AIDS prevention and reproductive health programme in Mali, Burkina Faso, Guinea and Niger. The main components are studies aimed at identifying the behavioural determinants that bring people to continue and discontinue the practice, the development and implementation of a communication strategy based on the use of mass media (short videos, TV spots, radio broad-

casts) as well as interpersonal communication for diverse target groups: dialogue with religious and political leaders, theatre performances, establishment of decentralised structures at village level, development of educational materials and visual aids.

## Scaling up of good practice examples

In most countries where FGM is known to be practiced a wealth of local initiatives and international NGOs is dedicated to combating the ritual. Many of them have gained valuable experience over the years and succeed in targeting decision-makers, leaders of change as well as affected communities and families very effectively. With the aim to give these organisations access to financing and technical support in order for them to expand and assure the quality of their activities KfW assists a governmental partner to establish and manage a fund to which these NGOs can apply. Examples include the health sector development programme in Kenya (component reproductive health and HIV/AIDS prevention) and the HIV/AIDS prevention programme in Sierra Leone.

All of the programmes currently underway are being implemented in cooperation with GTZ and/or DED.

Moreover, KfW Entwicklungsbank (co-)finances studies designed to improve the national database on FGM, which is an important basis for developing and adapting anti-FGM strategies and programmes in the partner countries of German Development Cooperation (as has been done in Mali).

In addition to its commitment at project level, KfW Entwicklungsbank also contributes to promoting general awareness of the issue: Represented by its Sector and Policy Division Health, KfW Entwicklungsbank is a member of the German network *INTEGRA* and of the "Donors Working Group on Female Genital Mutilation/Cutting".

## CASE STUDY

### Fighting harmful traditions in Mali through behaviour change communication

In Mali 85% of girls and women aged between 15 and 49 years have been subjected to FGM, and a majority of the population supports its continued practice.

A comparison of the figures from the two most recent population health surveys (Demographic Health Survey, or DHS) from 2001 and 2006 shows a decline in the prevalence rate by seven percentage points, yet a closer look at the figures reveals that in all probability, it is not a real decline but rather a change of values prompting women to not always correctly state their circumcision status. A recent study on the social determinants of FGM in Mali and the status among girls aged 0 to 14 years, cofunded by KfW Entwicklungsbank and the national programme against FGM "Programme Nationale de la Lutte contre les Pratiques de l'Excision / PNLE", also shows that there is little sign of a fundamental change in common attitudes towards FGM in Mali. Yet, the practice is becoming more urbanised, is being executed increasingly amongst smaller children and even babies and is commonly supported with a wide range of arguments: it is rooted in tradition, requested by Islam or necessary to control a woman's sexuality.

FGM is a highly controversial socio-cultural phenomenon that, to this day, remains firmly entrenched in Malian society and is still hardly seen as a problem. This is one of the reasons why Mali is the only country in western Africa that has not explicitly prohibited the practice.

Since 2006, KfW Entwicklungsbank on behalf of the German Government has been financing a health project in Mali that, for the first time, includes a specific component dedicated to the fight against FGM. The project is being implemented by the NGO "Population Services International Mali" (PSI Mali). With the aim of improving the reproductive health of the Malian population it uses a social marketing approach to induce behavioural change with respect to AIDS prevention, family planning and the combat of FGM.

#### First steps

In order to identify the social determinants of FGM in Mali and design socially adapted anti-FGM messages and activities, the project drew on an extensive base analysis carried out by DED and on its own surveys to better understand the resistance to giving up the practice. The results of the recent qualitative FGM study will again be used to refine communication strategies aiming at eliminating FGM.

The project's activities during the first three years of its implementation evolved around three main topics:

1. Improvement in the social standing of uncircumcised women
2. Religious component
3. Consequences of FGM

#### 1. Improvement in the social standing of uncircumcised women

In Malian society - in which nearly all women are circumcised - uncircumcised women and girls are shown very little respect. Even if Malians are aware of the serious health risks associated with FGM, the prejudice surrounding uncircumcised women - i.e. that they are not respectable - continues to hinder behavioural change.

The project addressed the image of uncircumcised women with an advertisement on the topic. The short TV spot showed a conversation between a mother and her son about his uncircumcised wife. In spite of initial concerns, the son expresses his good fortune in having such a good, virtuous and loyal wife who is also a good mother to their children.

It was the first ad dealing with FGM that had ever been broadcast in Mali and it gave rise to considerable controversy. After two months the ad stopped being shown on state television and has not been resumed

since. Yet, 77% of those surveyed who had seen the ad said they appreciated the open discussion about the topic. Overall the ad generated more discussion among men than women (61% as opposed to 43%).

## **2. Religious component**

Mali is a country that is heavily influenced by Islam and in which Islamic leaders have considerable authority. In addition, the majority of these leaders tend to advocate female genital mutilation, which impacts the position of Malian society on the topic in many different ways.

In November 2007 PSI Mali together with other partners (including the PNLE, DED Mali and GTZ) organised the "Forum of Ségou", the first national forum of religious leaders on the topic of female genital mutilation. Over fifty religious leaders from all eight of Mali's regions took part in the three day event that helped establishing a dialogue among influential religious leaders and different religious groups. Although the discussions were controversial, the intervention of national and international experts was able to influence and slightly change the position of the religious representatives. At the end of the forum the latter declared that the practice is not absolutely required in Islam and that every Muslim woman - whether she be circumcised or uncircumcised - is able to fulfil her religious duties.

A brief time later contact was established via the PNLE between the project and the Islamic preacher Karamoko Béfô, who intended to take a public stance against FGM. The project made four recordings with Karamoko Béfô: one on the topic of the nonexistence of an obligation to perform circumcision in Islam, one on the origins of the tradition, another on the non-circumcision of the Prophet's daughters and a fourth on the health consequences of FGM.

The ensuing broadcast of the recordings on 26 local radio stations across the country set off an important and long overdue public debate in Mali about the relation between Islam and FGM. The statements by Karamoko Béfô became the subject of intense controversy in some sections of Malian society and also among Malians living abroad. Disputes in Internet forums illustrated how difficult and how heated this debate is in Mali, as did the reaction of an association of Malian imams, who swiftly shut Karamoko Béfô out of their group.

## **3. Consequences of FGM**

Genital mutilation has consequences for a person's health. And yet a large majority of the Malian population remains ill informed about these consequences, as has been confirmed by the surveys mentioned above.

For this reason three advertisements with a well-known doctor were broadcasted on television and local radio stations about the medical, psycho-social and economic consequences of FGM. Enhancing the people's knowledge about the health consequences of FGM also serves to put more pressure on the religious debate: given that Islam teaches that practices which hurt people must cease, it is hoped that religious leaders will take a stand against the practice once they are knowledgeable about their severe health consequences.

Apart from the awareness campaigns in connection with the three topics mentioned above, the project also initiated other activities. A "FGM Kit" was assembled comprising a training handbook and interpersonal communication tools for trainers working for NGOs attempting to curb FGM. The handbook and the interactive materials focus on the relation between religion and FGM, the status of uncircumcised women, interpersonal communication and the health and human rights issues associated with FGM.

### **For further information contact:**

KfW Entwicklungsbank

Sector and Policy Division Health, Education and  
Social Protection

Attn: Annette Gabriel

E-mail: [Annette.Gabriel@kfw.de](mailto:Annette.Gabriel@kfw.de)

Tel: +49 (0) 69 7431-2133