







ACKNOWLEDGEMENTS

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INTRODUCTION

The UNFPA-UNICEF Joint Programme on the Elimination of Female Genital Mutilation ('Joint Programme') is helping to implement a Humanitarian-Development-Peace Nexus Approach ('Nexus Approach') in the context of female genital mutilation (FGM) elimination. Over the past year the Joint Programme has worked with select country offices to strengthen their technical capacity to effectively implement a Nexus Approach.

This work has helped the Joint Programme to gain insights and document innovative and practical ways in which country offices have been implementing the Nexus Approach for FGM programmes. This document aims to share knowledge and expertise among all stakeholders working to eliminate FGM, and to serve as a comprehensive reference that enhances performance, promotes best practices and supports continuous improvement of FGM Programmes. Sharing these cases will enable others to use the knowledge gained from successful cases to be more effective in their work. Embracing best practices not only accelerates the implementation process but also mitigates the risks associated with trial and error. The cases described here were collected in various countries through interviews with stakeholders before or during the workshop on the implementation of a Nexus Approach for the FGM Programme. The cases were then discussed during the workshop with all stakeholders and identified as illustrative cases for FGM Programmes.

The cases described in this report are 1 grouped in the following categories:

- 1. Innovative communication methods
- 2. Creating safe spaces
- 3. Harnessing and sustaining partnerships
- 4. Empowering affected communities
- 5. Introducing indicators and utilizing data



1 The examples were collected from stories shared during training with the respective offices as well as published stories.

1. INNOVATIVE COMMUNICATION METHODS

Effective communication methods are essential across the humanitarian-development divide. In times of crisis, innovative communication methods enable swift dissemination of vital information, and foster resilience within communities. Many lessons can be drawn from the COVID-19 pandemic, when physical distancing requirements led to increased reliance on mass media, social media and mobile technology to engage communities in eliminating FGM and child marriage. The annual report of the Joint Programme shares several response strategies that were used to address the multiple challenges posed by the sudden polycrisis situation.² Innovative approaches were launched with digital and remote interaction, even where access to digital resources was limited, by combining new and more traditional communication methods and by

addressing the gender digital divide. UNICEF produced a guidance note to help country programmes apply these innovative communication methods in their harmful practices programming.³

The Nexus Approach can enable country offices to maximize the value of their communications by repurposing them for various contexts. This allows the use of crisis communication channels for other initiatives, enhancing resource efficiency and responsiveness. Effective communication ensures swift dissemination of updates, coordinated response efforts, and continuous engagement with stakeholders, thereby reinforcing trust and confidence in the organization's capabilities during crises. The following examples highlight innovative communication methods used in the Nexus Approach.

3 UNICEF, COVID-19: Digital and remote approaches in eliminating female genital mutilation and child marriage, 2020, www.unicef.org/media/140991/file/Digitalapproaches-harmful-practices-2020.pdf; UNFPA and UNICEF, Reimagining Resilience: Eliminating Female Genital Mutilation in the Context of the Polycrisis, 2023, www.unfpa.org/sites/default/files/pub-pdf/2022%20FGM%20Annual%20 Report.pdf



² UNFPA-UNICEF, 2020 Annual Report of the Joint Programme on the Elimination of Female Genital Mutilation: Accelerating Change, Eliminating FGM in Fragile Contexts, Case Study of COVID-19, 2020, www.unfpa.org/sites/default/files/ resource-pdf/Covid19%20context%20report-2020_UNFPA-UNICEF%20 2020%20FGM%20Report.pdf.

Interactive communication

In 2021, during the pandemic, the Joint Programme in **Ethiopia** relied on mobile phone-based interactive voice recording (IVR)⁴ to provide refresher training for facilitators of sessions held for out-of-school girls. Over 6,000 adolescent girls from eight regions (development and humanitarian) actively participated in the regular life skill training and information sessions delivered through pre-recorded voice messages on mobile phones. They were also involved in co-designing the content and providing regular feedback through base-, mid- and endline surveys. They received weekly content addressing FGM and guidance on leading discussions on harmful practices among their peers. Switching from direct community outreach to IVR enabled the Joint Programme to reach many remote communities, target the most vulnerable girls (out-of-school girls), including when education services are less available, reduce the risk of experiencing FGM, empower girls through continued access to information, and provide training, informational messaging and remote guidance. This example demonstrates the importance of swift and innovative thinking, the value in leveraging technology, and the benefit of forging partnerships - in this instance with the communication company VIAMO.

The power of technology

Burkina Faso also relied on innovative tools and harnessed the power of technology in the context of the deteriorated humanitarian situation in 2022 when at least 2.6 million people were affected by food insecurity, approximately 1.6 million were forcibly displaced, almost 24 per cent of education institutions closed, and 42 per cent of health facilities closed or operated below normal capacity.⁵

The Joint Programme in **Burkina Faso** has used digital platforms popular with young people, such as GQ Jeune and U-Report, to provide information on FGM and referrals to services. in 2022⁶, 131,913 U-Reporters accessed information by texting 'FGM' to learn more about the practice. This is an innovative response that can be adapted for different settings. Online platforms offer unparalleled reach, immediacy and flexibility in times of crisis and beyond. Whether disseminating critical updates, coordinating response efforts, or maintaining stakeholder engagement, these platforms provide a dynamic and adaptable means of communication across diverse contexts. Their ability to transcend physical barriers and swiftly adapt to evolving needs makes them essential components of modern communication strategies.

Community-led accountability

Throughout the COVID-19 pandemic⁷, most countries where the Joint Programme is implemented maintained their helplines, to provide accurate information, counselling, and/or referrals to community resources on FGM. The helplines were also used to integrate FGM prevention services into COVID-19 emergency response plans and adaptive response strategies. Djibouti conducted a rapid needs assessment and mapping of GBV and FGM services via online surveys to ensure that these services were integrated in the COVID-19 Humanitarian Response Plan.8 The **Djibouti** country office also used an emergency freephone number to ensure uninterrupted communication. Emphasis was placed on maintaining communication with civil society organizations, local partners and the government during the pandemic, and these efforts persist. This is also a good example of crisis responses that continue and were adapted to a post-crisis situation. Toll-free numbers are

⁴ UNICEF, Development of Interactive Voice Response (IVR) Training in Ethiopia, 2024, www.unicef.org/ethiopia/reports/development-interactive-voice-response-ivr-training-ethiopia

⁵ UNFPA and UNICEF, Reimagining Resilience: Eliminating Female Genital Mutilation in the Context of the Polycrisis: Country Profiles. Burkina Faso, p. 4, 2023, www.unicef.org/media/146166/file/2022%20Country%20Profiles%20on%20FGM%20.pdf

⁵ UNFPA and UNICEF, Burkina Faso Country Profile – 2022 Global Annual report: Eliminating Female Genital Mutilation, Oct 2023, https://www.unfpa.org/resources/burkina-faso-country-profile-2022-global-annual-report-eliminating-female-genital

⁷ UNFPA-UNICEF Joint Programme on the Elimination of Female Genital Mutilation, 'COVID-19 Disrupting SDG 5.3: Eliminating Female Genital Mutilation': technical note, April 2020, www.unfpa.org/sites/default/files/resource-pdf/COVID-19_Disrupting_SDG.3_Eliminating_Female_Genital_Mutilation.pdf

⁸ UNFPA-UNICEF, 2020 Annual Report of the Joint Programme on the Elimination of Female Genital Mutilation: Accelerating Change, Eliminating FGM in Fragile Contexts, Case Study of COVID-19, 2020.

an adaptive form of communication in various contexts, from online needs assessments to crisis hotlines. Their accessibility and convenience make them invaluable tools for facilitating dialogue, providing support, and disseminating vital information in humanitarian and development settings.

To ensure that people could still access reproductive, maternal, neonatal, infant, adolescent and nutrition health services (SRMNIA-N) in **Guinea** during the COVID-19 pandemic, the Ministry of Health, in collaboration with its

technical and financial partners, notably UNFPA, initiated the continuity of services project. The aim was to offset the reduction in access to services by offering alternatives (advanced strategies, community-based services and online information and referral services) in health facilities and at community level. It entailed enhancing the availability and use of SRMNIA-N health services, training and equipping health workers, and ensuring access to quality data for information management. These rapid responses can be reformulated and reused to address different emergency situations that may arise in future.



2. CREATING SAFE SPACES

Creating safe spaces is vital for protecting vulnerable populations during times of crisis, particularly adolescent girls at risk of FGM or early marriage, as these offer refuge, support and essential services when they are most needed. The significance of these spaces extends far beyond crisis response; they continue to play a vital role in development contexts, as they serve as hubs for empowerment, education and community building. Safe 'Women and Girls Friendly Spaces' (WGFS) promote resilience and well-being, enabling individuals to thrive whether or not there is an immediate crisis.9 Several countries have applied key principles of the Nexus Approach in their use of safe spaces. The examples below highlight the value of recognizing that while the space may have been created as a result of a crisis, you can find ways to reshape the space to ensure it is safe and supportive for women and girls to raise their voices and to become empowered participants in their communities.

Identifying where safe spaces are needed – lessons from IDP camps

Ethiopia has a significant internally displaced persons (IDP) population, many of whom are diverted to IDP camps. In the Afar region, where early marriage and FGM are common, the Joint Programme created a Women and Girls Friendly Space (WGFS). FGM and early marriage are addressed during weekly sessions, and there are conversations about rape and other forms of sexual violence, which became more prevalent after the Northern conflict that formally ended in 2022. The Joint Programme tries to respond to the multiple needs of

women and girls affected by conflict and climate-related shocks throughout Ethiopia. In January 2023, UNFPA supported 17 WGFS across conflict and drought-affected regions, reaching nearly 5,000 women and girls with integrated GBV and sexual and reproductive health (SRH) services and skill-building activities. ¹¹ Specifically, in regions like Amhara, Oromia, Somali and Tigray, the Joint Programme established safe spaces for women and girls, set up child-friendly environments, and implemented secure reporting systems to combat sexual exploitation and abuse. These spaces offered access to trained facilitators who provided counselling, opportunities for play and the opportunity to create or re-establish social networks among peers.

Burkina Faso implemented adaptive programming FGM/ child marriage to reach families and community leaders in the IDP concentration sites, where UNICEF had built community-based platforms as an accelerator to improve access to social services in crisis-affected settings. These communities are the result of UNICEF's ongoing efforts to create ownership of community actors by transferring the knowledge and capacities for child protection to local actors, including young people, making them agents of change. This process of localization of services works as an adaptive programming strategy to improve access to vulnerable children and families in crisis-affected regions, by using existing local structures, co-creating solutions to meet social unmet needs, and enhancing community leadership, social accountability, and inclusiveness. The Joint Programme used these community-based platforms to adapt the FGM/child marriage interventions used in

⁹ UNFPA Ethiopia, 'A Safe Place to Shine: Raising the voices of girls affected by crises in Ethiopia', UNFPA-News, 24 February 2023, ethiopia.unfpa.org/en/news/safe-place-shine-raising-voices-girls-affected-crises-ethiopia.

¹⁰ UNFPA Ethiopia, 'Women & Girls Friendly Spaces: Creating Support & Community for Women', UNFPA-News, 14 June 2023, ethiopia.unfpa.org/en/news/women-girls-friendly-spaces-creating-support-community-women

¹¹ UNFPA Ethiopia, 'A Safe Place to Shine: Raising the voices of girls affected by crises in Ethiopia', UNFPA-News, 24 February 2023.

2. CREATING SAFE SPACES

the humanitarian context, and ensured the continuity of service delivery and community engagement in the short, medium and long term.¹²

In **Sudan** over 400 child-friendly spaces have been set up for IDP families. For example, at the Al Salam IDP gathering site, inclusive safe learning spaces have been established to support children on the move. These spaces play a vital role in helping children and caregivers to navigate, heal, and overcome past traumatic experiences. They offer structured learning opportunities, access to mental health services, psychosocial support, and referral pathways, as well as essential health care and child protective services. These programmes support the existing system through a referral method that includes an early warning system (EWS) for child marriage and FGM. This is an example of finding ways to use safe spaces in conjunction with the work of our EWS, which can be applied in both humanitarian and development settings.

Efforts in **Somalia** highlight the interplay of the refugees and host communities, as well as the value of empowering affected populations in challenging spaces.

The Camp Coordination Camp Management (CCCM) cluster aims to strengthen inclusive community selfmanagement and access to information for displaced populations, prioritizing the diverse needs of affected individuals. Governance structures within IDP sites aim for equitable representation, including youth, women, minority groups and people with disabilities. By prioritizing inclusive community self-management and equitable representation within governance structures, efforts in Somalia demonstrate a commitment to recognizing the interconnectedness of displaced populations and host communities. This approach not only promotes empowerment but also fosters cohesion and resilience within both groups. Moreover, emphasizing the diverse needs of all individuals involved underscores the importance of inclusive decision-making that considers the perspectives of youth, women, minority groups and people with disabilities. Overall, the collaborative efforts between displaced persons and host communities in Somalia highlight a holistic approach to addressing challenges in complex environments, aligning with the principles of the Nexus Approach.



3. HARNESSING AND SUSTAINING PARTNERSHIPS

Strong partnerships are indispensable in times of crisis and beyond, as they foster collaboration, resource sharing and collective action to address complex challenges effectively. Strong partnerships use diverse expertise, networks and resources to enable organizations to pool their strengths, maximize impact, and respond with agility to evolving needs. Beyond crises, these partnerships lay the foundation for sustained cooperation and innovation, driving progress towards shared goals and promoting resilience in the face of future uncertainties. The examples highlight how the Nexus Approach enables new partnerships to be forged as well as how existing ones can be sustained in different contexts.

Engaging women-led organizations

Sudan urgently needed to map and engage womenled organizations (WLOs) on the ground before, during and after the outbreak of the war in Sudan in April 2023. The capacity of WLOs needed to be assessed for further support and proactive engagement. The analysis of the findings from 42 organizations and two detailed case studies focused on the impact of conflict on gender-specific issues and the capacity to address humanitarian needs and move towards gender-transformative programming.

UNICEF's partnership with women leaders, women front-line service providers and local women's groups/girl-centred organizations ensures life-saving actions through capacity mapping, solid gender analysis, consideration for vulnerability, and accountable interventions that meet the identified needs, differentiated risks, and capacities for equitable, responsive and transformative inclusive programming and gender-responsive assistance. Protecting and advancing the rights of all women and girls, ensuring inclusive access to essential services, and promoting safety from violence and exploitation are pillars of UNICEF's

response and the humanitarian-development continuum.

Leveraging partnerships on the ground

When it was not possible to continue working in hospitals and clinics during the COVID-19 pandemic in Ethiopia, community health workers who could travel house-tohouse proved invaluable in carrying out routine medical check-ups and immunizations as well as identifying FGM survivors and women/girls at risk, essentially forming a grass-roots surveillance system. This initiative was conducted in partnership with the Ministry of Health, and thus shows the importance of leveraging partnerships both with the government and on the ground when access and mobility become restricted due to a crisis. Another example is the training given to social workers specifically on FGM in emergencies, to enable them to observe risks, detect incidences, facilitate response services, and generally remain engaged during a humanitarian crisis.

New partnership with religious leaders

In **Guinea**, the partnerships created during the Ebola crisis provided an opportunity to break the taboo on public discussion of FGM as a harmful cultural practice and a risk of spreading Ebola. During the Ebola outbreak, FGM was reduced in Guinea. Country offices collaborated with religious leaders to incorporate messages on handwashing and the continuity of health services into services in mosques and churches. The religious leaders successfully engaged communities in disease surveillance and played a vital role in fostering social cohesion. These partnerships, initiated during a crisis, have been nurtured and continue with a specific strategy involving religious leaders working towards ending FGM. Notably, the Joint Programme organized capacity-building sessions for prominent religious leaders to continue engaging

them in the process of ending FGM. This illustrates the powerful role of crisis partnerships that can endure into a development setting leading to a positive impact. The country has even developed a specific strategy with the Ministry of Religious Affairs to engage religious leaders in the renunciation of FGM.

Increased government ownership and accountability

In **Somalia**, the adoption of the Nexus Approach by the UNFPA country office has resulted in greater government ownership and accountability. This was the result of improved coordination and coherence among humanitarian, development and peace actors and actions in responding to FGM, ensuring respect for humanitarian principles while maintaining development cooperation objectives. A ministerial coordination platform for FGM was established to work with policymakers on FGM and GBV, and more broadly to increase resources for girls and women.¹⁴

¹⁴ UNFPA and UNICEF, Reimagining Resilience: Eliminating Female Genital Mutilation in the Context of the Polycrisis, p. 31, 2023.



4. EMPOWERING AFFECTED COMMUNITIES

Investing in community-based platforms

In an effort to accelerate access to social services in crisisaffected areas, the Joint Programme has been working to ensure the active involvement of community actors. Recognizing the importance of leveraging existing local structures, the country office in Burkina Faso enhanced its investment in community-based responses, ensuring the delivery of comprehensive child-centric services, especially in remote regions. Localizing services facilitated access to vulnerable children and families in crisis zones, while also empowering communities to drive change and develop resilience. Notably, through this approach traditional leaders and healers have become important partners in nutrition, yielding tangible outcomes for children. Given the cultural and religious factors that influence the FGM context in Burkina Faso, there is great scope for meaningful engagement with traditional leaders, and such partnerships should be strategically leveraged during and beyond times of crisis to respond to FGM.

Empowering affected populations

The 'model girls' (filles modèles) programme in Burkina Faso was seen as a useful programme to sensitize other girls at the community level and a provide framework that is resistant to changes in the given context. However, the practice of using model girls must always be contextualized according to the particular situation.

117,723 adolescent girls participated in life skills training across 2,747 adolescent clubs and safe spaces, advocating for freedom from FGM. Empowered by community mentors and role models, these girls initiated intergenerational dialogues on FGM within their families. Furthermore, 106,081 boys and young men committed to addressing FGM through education sessions promoting gender equality and positive masculinities. Additionally, 131,913 U-Reporters sought information on FGM by texting the keyword 'FGM', contributing to awareness efforts. This demonstrates the value and importance of partnering with local groups and affected populations and innovative communication mechanisms to ensure swift access to information.

Repurposing existing or new tools

Adapting the Community Conversation Toolkit¹⁵ for both development/non-humanitarian settings, and coming up with a redesigned version for crisis and emergency settings, was an innovative response in Ethiopia to ensure that appropriate structures, tools and techniques could be applied in different settings to ensure community engagement. The redesigned/alternative manual for humanitarian settings meant that communities were still given space to "identify concerns, reflect on shared challenges, deliberate on solutions and map out courses of action". This is a great example of tweaking or recalibrating existing tools for use in different settings.

5. INTRODUCING INDICATORS AND UTILIZING DATA

Data collection and the availability of key indicators are crucial in both humanitarian and development settings to ensure the effectiveness of response mechanisms. By systematically gathering and analysing data, country offices can identify trends, assess needs, and allocate resources more efficiently. This enables tailored interventions that address the specific challenges faced by communities, ultimately leading to more effective outcomes and sustainable development. Robust data collection also enhances accountability, transparency and evidence-based decision-making, laying the groundwork for informed action and continuous improvement in both humanitarian aid and development initiatives.

Indicators to leverage emergency resources

In Ethiopia, the Joint Programme has introduced a new key indicator, "# women, men, girls and boys reached by social norm change interventions", in UNICEF's Humanitarian Action for Children (HAC) plans for drought-affected areas as well as the Integrated Northern Ethiopia Response & Recovery Plan for the conflict. This has helped the Joint Programme as well as the UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage (GPECM) to leverage emergency resources within UNICEF.

Introducing indicators in the Humanitarian Response Plan

FGM was integrated into Somalia's 2023 Humanitarian Response Plan (HRP 2023), which emphasizes community engagement, specialized protection services, involvement of religious leaders, and collaboration with social media influencers. The Humanitarian Response Plan now includes indicators on FGM and child marriage, offering funding opportunities through direct allocations to partners and the Central Emergency Reserve Fund. This is helpful because efforts to link health promotion

with humanitarian programming require evidence that can be demonstrated using these indicators. Incorporating key indicators not only enables country offices to track progress and measure the impact of interventions but also helps with identifying gaps and refining strategies, ensuring that responses are targeted, timely and responsive to the evolving needs of affected populations.

The power of data

The Joint Programme is currently supporting the Ministry in charge of gender in Burkina Faso to develop an integrated FGM database of key FGM data, with data collected on FGM at the community level. This will increase the technical capacity to produce data that facilitates joint action in the field. This FGM database helps create a more holistic understanding of the situation, enabling concerted action between the Government and the Joint Programme to identify emerging trends, prioritize needs, and tailor responses effectively. In times of crisis, such partnership enables swift and coordinated data-collection efforts, facilitating rapid needs assessments and informed decision-making. Beyond crises, the data collected through partnerships serve as a source for evidence-based programming, enabling the partners to continue with their efforts to eradicate FGM.

Finding alternative sources of data

Given that data on FGM and child marriage are often difficult to collect due to a lack of reporting and services, among other factors, alternative sources of data can help in assessing key trends and formulating appropriate responses. For example, school dropout rates can be a key proxy indicator of increased child marriage and FGM. "Growing numbers of parents or caregivers are marrying off girls to secure dowries to help support the rest of the family, to have one less mouth to feed, or in an attempt

to help the bride enter a better-off household."¹⁶ In the Horn of Africa, the Joint Programme has identified that the increased dropout rates of schoolgirls place them at a higher risk of child marriage and FGM.¹⁷ Evidence suggests that school dropout rates can be linked to climate crises; for example, a British Red Cross appeal website reported in 2024 that "in Ethiopia, Kenya and Somalia the number of children at risk of dropping out of school due to drought-related impacts has surged threefold within just three months, escalating from 1.1 million to an estimated 3.3 million children." Using different and/or intersecting sources of data can help in planning swift and targeted responses, in both humanitarian and development contexts.

FGM trend analysis

The Joint Programme in Ethiopia conducted a trend analysis of FGM cases to find out more about the increase of FGM during the drought in the SNNP region of Ethiopia as a trigger for child marriage as families exchange with lifesaving cash, goods, fish or animals as documented. The analysis showed a 27 per cent increase of FGM during a period of drought from September 2020 to August 2021, compared with September 2021 to March 2022. Based on these findings, the Joint Programme in Ethiopia tailored its FGM interventions, including outreach, mobilization, and activation of surveillance committees in the four districts of Dasenech, Benatsemay, Yangatom and Hamer.¹⁸

¹⁸ Information provided 24 April 2024, during validation of the draft of this paper by key resource person, Haithar Somo, Child Protection Manager, UNICEF Country Office, Ethiopia.



¹⁶ UNICEF Eastern and Southern Africa, 'Child marriage on the rise in Horn of Africa as drought crisis intensifies', Press Release, 28 June 2022, www.unicef.org/press-releases/child-marriage-rise-horn-africa-drought-crisis-intensifies

¹⁷ Ibic

CONCLUSIONS AND RECOMMENDATIONS

The value of learning from practical cases in implementing the Nexus Approach cannot be overstated. These illustrative cases show the importance and opportunities of the humanitariandevelopment nexus for FGM programming. By studying successful approaches and adapting them to our own contexts, we not only streamline our efforts but also increase our chance of success, particularly when these strategies are used in times of polycrisis. Recording and sharing success stories further enriches this learning process, offering valuable insights and inspiration for others facing similar challenges. As more country offices begin to implement this approach, the collection and sharing of illustrative cases should be prioritized to ensure a culture of continuous improvement, innovation and resilience.

The Nexus Approach also provides new opportunities for coordinated and coherent FGM programming for humanitarian and development interventions, ensuring respect for humanitarian principles while maintaining development cooperation objectives and vice versa.

These valuable examples show that the Humanitarian-Development Nexus Approach offers new opportunities to accelerate the elimination of FGM. Although the effectiveness of the above-mentioned illustrative cases is strongly determined by the local context, we recommend considering the following key aspects of the Nexus Approach:

Create common ground between development
and humanitarian staff for action to eliminate
 FGM: The humanitarian response plans (HRPs) are
often FGM-blind because FGM is not considered
a priority in a humanitarian response. Advocacy for
redefining FGM as an emergency must be considered
as one of the priorities in humanitarian response and
should be reflected in the objectives and targets of the

HRPs. The principles of doing no harm and leaving no one behind, the mandate of child protection, women's sexual and reproductive health and rights (SRHR), and the recognition that FGM is a violation of women's and girls' human rights, are shared commitments and a mandate for duty bearers in both development and humanitarian settings.

• Enhance coordination and joint programming:

A general problem that complicates the work across the development and humanitarian programmes is that there are different timelines for programming, funding and reporting. Carrying out a joint gender analysis which includes a wide consultation on FGM across government and civil society may lead to some level of coordination, as it provides data on who is 'left behind' and makes it possible to design programmes that ensure the inclusion of women and girls who have survived FGM or who are at risk of FGM. Joint gender country analysis and data are key for coordination and joint learning on how to coordinate complementary development and humanitarian interventions.

• Strengthen the capacity of the country office in resilience and preparedness: The country team should be prepared for emergencies, even if there is no immediate emergency on the horizon, because contexts can change quickly and have an immediate impact on the programme at the field level. In a development setting, a community dialogue process can take more than a year, but in a humanitarian situation you may be forced to stop any intervention and adopt an emergency strategy in a short space of time. The Nexus Approach is about being prepared to respond immediately to an emergency, while keeping in mind the long-term development goal of eliminating FGM, and about having the flexibility to switch to long-term FGM programming after

the emergency. Although country offices have an idea of what the Nexus Approach is, they fall short in terms of how to apply it in the context of the Joint Programme. Sharing illustrative cases and practical tools can help country offices to implement the Nexus Approach and accelerate the results of the Joint Programme.

 Strengthen partnerships with the government, civil society, international development partners, and other duty bearers and right holders: Most progress to eliminate FGM is made in countries where the government has a strong political will. This often comes with national funding and accountability. The strength of the Joint Programme depends on the way it works with partners, from working with women-led organizations or religious leaders at the grass-roots level to national Ministries in charge of gender and family issues. The workshops organized in 2023 by the Joint Programme to roll out the Nexus Toolbox on FGM brought together different stakeholders in each of the countries, leading to shared strategies and complementary action for mutual strengthening of the process to eradicate FGM through the Humanitarian-Development Nexus Approach. It is recommended that all partners of the Joint Programme use the Toolbox on Female Genital Mutilation and the Humanitarian-Development Nexus and the corresponding training materials.

 Advocate among partners for priority-setting in budgeting to end FGM: The Nexus Approach is not about shifting funding from humanitarian to development programmes, or from development programmes to humanitarian. Its focus is more on priority-setting to leave no one behind and to do no harm, and about how to steer the existing funds to put these principles into practice. This involves a dialogue with governments about delivering the global commitment of ending FGM by 2030, and about the benefits of investing in reducing FGM. The benefits of the elimination of FGM include a decrease in disability related to FGM: an increase in workforce participation thanks to gains in healthy years of life; improved maternal health and reduced rates of stillbirths and neonatal mortality; and a decrease in obstetric care costs because women with FGM experience higher rates of obstetric complications.¹⁹ An analysis by UNFPA of the benefitcost ratio of ending FGM in 31 countries concluded that an additional investment of about US\$2.7 billion in preventing 20 million cases of FGM between 2020 and 2030 would bring returns on investment of approximately US\$27.8 billion between 2020 and 2050 in terms of health, social and economic benefits.²⁰ These data may not only be interesting for traditional international donor agencies, but also for the national Ministry of Finance, and lead to prioritizing a new budget line, or an increased budget line for ending FGM by 2030.

¹⁹ United Nations Population Fund, *Investing in three transformative results: Realizing powerful returns*, 2022, pp. 17–19: Estimating the benefit-cost ratio of ending female genital mutilation.



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