

## Ending female genital cutting and the SDGs

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### About female genital cutting

Female genital cutting (FGC) is the forcible removal of all or part of a girl's external genitals. In half of the countries that practice FGC, the majority of girls are cut before age 5. Elsewhere, cutting occurs between 5 and 14 years of age.

The type of cutting varies in different communities. It ranges from cliterodectomy (removal of the clitoris) to infibulation - which can include complete removal of the external genitalia and sewing together to seal the wound that remains, with a small hole left for menstruation and urination. It can also include other harmful procedures carried out to the female genitalia for non-medical purposes: for example pricking, piercing, incising, scraping and cauterising.

In the short term, cutting can lead to infection and death. In the longer term, it can lead to obstetric and sexual difficulties and mental health problems.

At least 130 million women and girls are living with the effects of FGC worldwide, while recent UNICEF research shows that at least a further 30 million girls are at risk of being cut in the next decade; however, research on FGC in the Middle East and Asia is lacking. FGC is not a religious issue and is not a requirement of any of the major religions; it is a social norm, held in place by communities.

### Measuring female genital cutting

There are many countries where cutting takes place where it is not measured at all. We know that cutting takes place in at least 45 countries,<sup>1</sup> and affects at least a million women and girls in diaspora communities in Europe and America.<sup>2</sup> Currently, however, national prevalence data exists for only 29 practising countries.<sup>3</sup>

States can measure the extent of FGC relatively easily by including the FGM/C module within their household surveys.<sup>4</sup> It is, of course, only once states measure FGC that they can begin to develop a plan to end it.

**States can measure FGC accurately through the household surveys, and Orchid Project urges them to do so.**

It seems clear, however, that some countries will not choose to measure FGC without significant encouragement. The international community must work to make sure that all states where FGC takes place measure the extent of the practice. This task will be easier if the SDGs include a global indicator on the topic.

### Global indicator on FGM/C

The 'global indicator' on FGM/C is at risk of being removed from the SDGs. Without the inclusion of this indicator, the opportunity for maintaining global momentum for action and obtaining critical data on this worldwide issue will be lost.

#### **Background**

The UN has established an *Inter-Agency Expert Group on the SDGs* (IAEG-SDGs), which has been tasked with developing an indicator framework so that the goals and targets can be properly monitored. The group consists of representatives of national statistical offices and includes, as observers, representatives of regional commissions and regional and international agencies.

In preparation for the first meeting of the IAEG-SDGs, the UN Statistics Division (UNSD) prepared a paper, after consultation with UN Agencies, containing a list of suggested priority indicators.<sup>5</sup> This paper was based on the suggestions

<sup>1</sup> In addition to the 27 practising countries in Africa that UNICEF reports on, there are 17 practising countries in Middle East and Asia: Brunei, India, Pakistan, Indonesia, Malaysia, The Maldives, Singapore, Thailand, Iran, Iraq, Jordan, Kuwait, Oman, Saudi Arabia, Syria, UAE, and Yemen. FGC also takes place in one community in Colombia.

<sup>2</sup> A resolution of the European Parliament estimates that there are 500,000 women affected in the EU: European Parliament resolution of 24 March 2009 on combating female genital mutilation in the EU. In the USA, preliminary findings by the Population Reference Bureau estimate that 507,000 women and girls have undergone or are at risk of FGC. Detail on their findings is available online: <http://www.prb.org/Publications/Articles/2015/us-fgmc.aspx>

<sup>3</sup> Mostly in Africa, but also including Iraq and Yemen

<sup>4</sup> Of those practising countries not currently measured by UNICEF, twelve undertake DHS and/or MICS (India, Pakistan, Indonesia, Iran, The Maldives, The Philippines, Thailand, Jordan, Oman, UAE, Colombia, Syria (last occurrence 1999)) and five conduct other household surveys (Brunei, Malaysia, Singapore, Kuwait, Saudi Arabia) none of which include the FGM/C module.

<sup>5</sup> available online: <http://unstats.un.org/sdgs/2015/05/29/first-proposed-priority-indicator-list/> (accessed 6.7.15)

of the *Open Working Group on Sustainable Development Goals*; however, it cut a large number of the indicators suggested by that group.

Prior to the UNSD publishing their paper, the proposed indicators under 5.3 (*'eliminate all harmful practices, such as child, early and forced marriage and female genital mutilations'*<sup>6</sup>) were:

- 'Percentage of women aged 20-24 who were married or in a union before age 18 (i.e. child marriage)' and
- 'Percentage of girls and women aged 15-49 years who have undergone FGM/C, by age group (for relevant countries only)'.

The global indicator on FGM/C above was, unfortunately, one of the indicators which was excluded from the UNSD's list of recommended indicators (the *'First Proposed Priority Indicator list'*).

At the IAEG-SDGs' first meeting on the 1<sup>st</sup> and 2<sup>nd</sup> June 2015, there was substantial dissatisfaction with the move to cut down the list of indicators to one per target. The group stated in its report that 'while the number of global indicators must be limited, some targets might require multiple indicators to measure its different aspects'. As a result UNSD is now developing a new document, which is expected to contain a broader range of indicators.<sup>7</sup>

**Orchid Project recommends that member states push for the inclusion of two indicators, covering both child marriage and female genital cutting, under target 5.3.**

### Funding to end FGC

Understanding the prevalence of FGC is of course only of value to the extent that this knowledge is used to develop programmes to end the practice; indeed, target 5.3 calls for 'elimination' of harmful traditional practises. Whilst there must be a focus on measuring FGC, **donor countries should consider how an end to cutting can be accelerated through additional financing.**

The UN's joint programme has been highly successful at ending FGC.<sup>8</sup> With sufficient investment, this work could be scaled up substantially.

Many grassroots organisations are extraordinarily effective. For example, Tostan has been responsible for more than 7,000 communities abandoning FGC in West Africa.<sup>9</sup> Such grassroots organisations have an important role to play. **States should consider how funding policies can be developed which ensure that effective grassroots organisations with a track record of ending FGC receive the funding they need to continue and, where appropriate, expand.**

Alongside targeted funding there is a need for the inclusion of FGM/C within broader reproductive, maternal, newborn, child and adolescent health programmes and funding streams, for example the Global Financing Facility.

**States in the global north should also consider how they can develop policies towards, and provide funding for, ending FGC within their own diaspora communities.**

### About Orchid Project

Orchid Project's vision is of a world free from female genital cutting (FGC). We advocate to ensure stakeholders resource and prioritise an end to FGC; we communicate the potential for an end to FGC; and we partner with organisations that work with communities to deliver a sustainable, proven end to it.

<sup>6</sup> Schmidt-Traub, G., de la Mothe Karoubi, E., Espey, J. (2015) Indicators and a Monitoring Framework for the Sustainable Development Goals: Launching a data revolution for the SDGs, Revised working draft (Version 7). Paris, France and New York, USA: SDSN.

<sup>7</sup> meeting report available here: <http://bit.ly/1NJbtel> (accessed 6.7.15)

<sup>8</sup> (2013) Joint Evaluation UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting: Accelerating Change 2008-2012. New York: UNICEF/UNFPA Evaluation Offices

<sup>9</sup> <http://www.tostan.org/female-genital-cutting>