Ending FGM by 2030: Update (2018)
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- February 6th 2018 was international day of zero tolerance to female genital mutilation (FGM). This African-led initiative is stronger than ever. We are close to a pan-African ban and it is still legal in only three countries with higher prevalence levels - Mali, Sierra Leone and Sudan.

- In 2018 Liberia banned FGM for one year for under 18s. Hopefully this will become permanent and for adults too. There are indications that Somaliland may also ban it in coming months. This builds on previous momentum in 2015 when Nigeria and The Gambia banned it.

- Some countries are more successful than others in reducing prevalence. Kenya leads the way globally and over a 30 year period DHS surveys show it was reduced there from 41% to 11%. In a similar period Liberia reduced it from 72% to 31%; Burkina Faso from 89% to 58%; and Egypt from 97% to 70%. Countries including Guinea, Sudan, Somalia and Mali have had less success.

- Over 200 million women and girls around the world have been affected and each year 3 million girls are at risk. Around 100 million girls and women affected live in just three countries – Indonesia, Egypt and Ethiopia. Over half a million women and girls in each of the European Union and in the United States have been affected. FGM is a global issue and ending it is part of Global Goal 5 of the United Nations Sustainable Development Goals adopted in 2015

- Funding to end FGM has been minimal. In 2013 the UK Department for International Development (DfID) made the biggest commitment of £35m, but little funding has reached front line groups that are leading the change. (Development Initiatives estimated in 2016 that less than 2% of funding reaches the grassroots).

- It is hoped that FGM can be reduced by 30% by 2020 and eliminated entirely by 2030. A world where girls are no longer at risk of undergoing FGM is within reach.
What is FGM?

According to the World Health Organization, FGM includes procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons.

It is categorized into four types:

**Type I:** Often referred to as clitoridectomy, this is the partial or total removal of the clitoris (a small, sensitive and erectile part of the female genitals), and in very rare cases, only the prepuce (the fold of skin surrounding the clitoris).

**Type II:** Often referred to as excision, this is the partial or total removal of the clitoris and the labia minora (the inner folds of the vulva), with or without excision of the labia majora (the outer folds of skin of the vulva).

**Type III:** Often referred to as infibulation, this is the narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the labia minora, or labia majora, sometimes through stitching, with or without removal of the clitoris (clitoridectomy).

**Type IV:** This includes all other harmful procedures to the female genitalia for non-medical purposes, e.g. pricking, piercing, incising, scraping and cauterizing the genital area.

FGM doesn’t have any health benefits. Instead it can have immediate complications including bleeding, fever, extreme pain, urinary or other infections, swelling, shock and even death. In the longer term a girl or woman faces a lifetime of potential consequences including vaginal or urinary-related health problems, scar tissue, fistula, problems urinating or menstruating, pain or lack of sensation during sex, infertility or childbirth complications, as well as a host of psychological problems.

FGM is a human rights violation and is used to subjugate girls and women. It is not mentioned in any major religious texts and pre-dates contemporary religions.

Donor Direct Action set up a Fund for Front Line groups Working to End FGM after legendary activist Efua Dorkenoo OBE. Partners like the Tasaru Rescue Center in Kenya and the Galkayo Center in Somalia have been building the movement for change from the roots up.

Due to vast population growth and and other reasons we need to accelerate efforts and funding to end FGM (particularly to activists on the front lines) to help us end it by 2030.

To find out more please go to donordirectaction.org where you can make a (US only) tax deductible donation to our FGM Fund.