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and to the twenty-third special session of the General
Assembly entitled “Women 2000: gender equality,
development and peace for the twenty-first century”

Statement submitted by Association Mauritanienne pour la Promotion de la Famille, International Planned Parenthood Federation, and Orchid Project Limited, non-governmental organizations in consultative status with the Economic and Social Council*

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* The present statement is issued without formal editing.



Statement

This statement is submitted by International Planned Parenthood Federation, Mauritania Family Planning Association, and Orchid Project Limited who compose part of the Global Platform for Action to end Female Genital Mutilation/Cutting which comprises a dozen global organisations and regional networks fighting to eliminate FGM/C. Organisations represented include AMREF Health Africa (African Medical and Research Foundation, Inc), and Equality Now.

We welcome this year's priority theme being focused on the acceleration of achievement of gender equality by addressing poverty and having strengthened institutions and financing with a gender perspective. Eliminating female genital mutilation/cutting must be recognised as necessary aspect within this theme. The adoption of Sustainable Development Goal 5, target 5.3.2 to end female genital mutilation/cutting by 2030 placed end FGM/C firmly on the global agenda. However, the ambition to end female genital mutilation/cutting (FGM/C) by 2030 was not matched with financial commitments. With less than 7 years left until the 2030 deadline, a critical action is needed to resource the end FGM/C sector.

Over 200 million girls and women alive today from 31 countries have experienced female genital mutilation/cutting and over 4 million girls are at risk of undergoing FGM/C annually. And this number is on the rise. However, even these alarming figures fail to represent the full picture, as they do not take into account countries (particularly in Asia and the Middle East) which do not have national prevalence data on FGM/C. Another report (End FGM European Network, 2020) highlights that FGM/C has been reported to occur in 92 countries around the world.

The latest SDG report shows discouraging trends both in achieving good health, gender equality and the elimination of poverty. FGM/C elimination is necessary and relevant for the achievement of all these goals. It is proven that FGM/C increases risks of complications during child birth; moreover, its elimination, prevention and treatment is a key component of sexual health and reproductive rights, which are severely undermined across the world due, among other things, to lack of dedicated funding, lack of training for professionals and lack of access to services. We also know that women and girls in poverty are more likely to be exposed to ill-health and abuse, including child marriage and FGM/C. This is particularly true for contexts where FGM/C is practiced for the purpose of marriageability and economic security and social inclusion (UNICEF, 2020).

Despite positive changes in the field of eliminating FGM/C in the last few decades, rapid population growth, insecurity and humanitarian crises in some countries with high prevalence rates, as well as emerging trends, such as medicalization of FGM/C and cross-border FGM/C threaten to roll back progress. This is exacerbated by the critical lack of funds to the end FGM/C sector.

The intersection between the practice of FGM/C, poverty and social marginalisation that can result from the impact of humanitarian crisis, including climate change, needs to be addressed with comprehensive policies. In order to do so, more and better funding is needed. According to an UNFPA Report (2020), by investing \$2.4 billion by 2030 we could end FGM/C altogether in 31 priority countries; and only \$95 is required to avert one case of FGM/C. Yet only \$275 million in development assistance is available leaving a funding gap of >\$2.1 billion. However, the \$2.1 billion needed does not include other countries where FGM/C is known to take place and which have not traditionally been prioritized, including in Asia and the Middle East.

We urge the Commission to include the following recommendations in its agreed conclusions, calling on Member States and relevant stakeholders to significantly increase funding towards the end FGM/C sector, and more specifically:

- Invest in efforts geared towards ending FGM/C and remodel their traditional funding practices to more effectively support grassroots organisations.
- Prioritize funding for ending FGM/C in national budgets through direct budget allocations and integration of FGM/C into other budgets, such as healthcare, education, etc.
- Expand the funding direction beyond the 31 priority countries to include countries which have not traditionally been prioritised, including in Asia and the Middle East.
- Put in place an accountability mechanism to track the financial commitments with a focus on how much, to who, and in which geographies resources have been allocated.
- Explore new collaboration between traditional donors, private sector, governments and NGOs, particularly around innovative financing mechanisms.

We call on Member States and relevant stakeholders to also shift the funding to grassroots organisations, as working at the grassroots level is one of the most effective ways to end FGM/C. The complexity of accessing funds through a myriad of bureaucratic hurdles and requirements and often for funds that are too short-term in nature is a major challenge for community organisations. Funding models need to be rooted in the power of purposeful grant-making and best respond to grassroots' needs ensuring:

- Sustainable, multi-year funding
- Funding to support core/administrative costs
- Flexible funding with simplified requirements for application and reporting
- Capacity building/strengthening and leadership development support to grassroots organisation to access and manage funds
- Funding grounded in feminist principles that disrupt the power imbalance and shift the power to women and girls
- Support research and academic fact-finding on new trends and Atypical FGM/C (categorised by type 4 currently), such as re-cutting and re-infibulation practices in some settings.

As global women's rights and feminist civil society representatives from all over the world committed to end FGM/C and gender-based violence, we are deeply concerned about the negative trends we see and about the lack of resources our sector faces. This is why we all came together during the 2023 Women Deliver conference to discuss challenges and solutions during a dedicated Pre-Conference on FGM/C. The above-mentioned recommendations are the outcomes of this global gathering, together with our call for a Global Commitment Summit to accelerate results.