Technical Note

GIRLS’ EDUCATION, EMPOWERMENT, AND THE ELIMINATION OF FEMALE GENITAL MUTILATION
An adolescent girl is excited as she receives a new UNICEF school kit.
The Malala Fund estimates that approximately 20 million more secondary school-age girls may remain out of school even after the crisis has passed. This would add to the 129 million girls who were out of school prior to the pandemic.

1. Introduction

The coronavirus disease 2019 (COVID-19) pandemic has created a global and gendered crisis that is compounding existing inequalities and disproportionately affecting girls and women. Emerging evidence from the COVID-19 crisis in 2020 shows school closures, disruptions in essential services and rising poverty contributed to girls’ increased risk of female genital mutilation (FGM). School closures limited the monitoring and reporting of cases of FGM. Rising household monetary poverty may have contributed to families adopting negative coping mechanisms, including having girls undergo FGM as a precursor to marriage to reduce household costs. A report from the United Nations Population Fund (UNFPA) estimates 2 million additional cases of FGM by 2030 due to the pandemic.

The COVID-19 pandemic also caused an unprecedented disruption in girls’ education. School closures resulted in an increase in unpaid care work for girls, limiting their availability for learning. The gender digital divide affected girls’ ability to access remote learning. The Malala Fund estimates that approximately 20 million more secondary school-age girls may remain out of school even after the crisis has passed. In Kenya, as schools reopened in January 2021, re-enrolment overall was quite high; however, older adolescent girls (15–19 years) were the least likely to return, with 16 per cent of girls in this age group not returning to school, compared to 8 per cent of their male counterparts. This would add to the 129 million girls who were out of school prior to the pandemic.

Although the links between education and FGM are under-researched, girls’ education appears to be a protective factor in reducing FGM prevalence. As a result, girls’ risk of dropping out of school may contribute to an increase in risk of FGM for current and future generations of girls.
2. Background and Purpose

This technical note is intended for governments, practitioners, donors, academics, United Nations Girls’ Education Initiative (UNGEI) partners and UNICEF staff implementing policies and programmes related to girls’ education and child protection, including the elimination of FGM. As girls continue to be at an increased risk of undergoing FGM, and are disproportionately affected by the education crisis, this technical note seeks to understand and deepen linkages between girls’ education and FGM, as well as related strategies to eliminate FGM and advance girls’ education. To build back better following the COVID-19 crisis, there is an opportunity to build back equal by strengthening the link between ensuring girls’ access to inclusive and equitable quality education – from early childhood through to secondary – and the elimination of FGM by 2030.

The purpose of this technical note is to:

1. Exchange knowledge and emerging practices on girls’ education and the elimination of FGM.

2. Provide practical guidance on the application of key concepts and effective programming approaches for girls’ education and the elimination of FGM.

3. Outline key actions for global, regional and national stakeholders to collectively advance girls’ education and the elimination of FGM and meet the Sustainable Development Goals (SDGs) targets by 2030.

Although this technical note focuses on the nexus between girls’ education and FGM, this in no way suggests that a single sectoral intervention is an effective strategy for reducing FGM prevalence. Empowering girls through education and the elimination of FGM requires transforming the structures, institutions and dynamics which reinforce and perpetuate the practice, through strategies that bring together key sectors around a common set of outcomes across all levels of the social ecology.

3. Brief Overview of FGM as a Harmful Practice

FGM involves the partial or total removal of external female genitalia or other injury to the female genital organs for non-medical reasons. The practice can lead to immediate and long-term health problems that affect obstetric, gynaecological, sexual and mental health. FGM violates a range of human rights, including the right to health and bodily integrity, and the right to a life free of violence and discrimination. At least 200 million girls and women worldwide have experienced FGM, and approximately 4 million girls are at risk each year. While FGM is primarily concentrated in 31 countries in Africa, the Middle East and Asia, the practice is increasingly a global issue due to migration. In approximately half of the countries where FGM is practised, girls undergo FGM before the age of five, although there are local variations on age of cutting.

FGM is both a symptom and a result of inequitable gender norms that reflect and perpetuate inequitable power relations that, depending on the context, link the practice to increasing marriageability, which is perceived as providing girls and women economic security and social inclusion. There are different reasons for practising FGM that encompass sociological, cultural, religious and socioeconomic factors, as well as perceptions related to hygiene and aesthetics. Above all, however, FGM is a way to control girls’ and women’s bodies and sexuality.

With FGM, there are intersecting power axes surrounding the practice, including risk factors at the level of the individual (e.g., age, ethnicity), household (e.g., socioeconomic status, decision-making power, residence) and community (e.g., social norms, shocks and fragility), as well as structural factors such as poverty, legislation and political marginalization that shape gendered power relations. Discriminatory gender norms affect girls and women at all levels, limiting participation within their families and communities and access to education and livelihood opportunities, as well as altering their aspirations.
Rokia (8), Mariam (13), attending class in Man, in the west of Côte d’Ivoire.
"We have the right to work and to education, the right to be protected from violence, the right to vote, and the right to be protected from early marriage," says Ahed (18).
4. Concepts and Approaches

Provided below is a description of key concepts and approaches used in this technical note.

**EMPOWERMENT**

A personal journey during which an adolescent (age 10–19), through increased assets and critical awareness, develops a clear and evolving understanding of themselves, their rights and opportunities in the world around them, and through increased agency, voice and participation, have the power to make personal and public choices for the improvement of their lives and their world.¹⁵

**ASSETS**

The term assets can be categorized as human, social, productive and developmental, and includes resources, knowledge and skills that girls can draw upon to shape their lives and contend with shocks on their own and others’ behalf.¹⁶

**GENDER-TRANSFORMATIVE EDUCATION**

While schools are generally recognized as places where children are socialized in their communities’ gender ideologies, they are also places where ‘personal transformative processes associated with education’ can provide students with the space to challenge inequitable gender norms and practices such as FGM.¹⁷ Gender-transformative education refers to the system of designing, delivering and monitoring education in a way that empowers individuals and communities to shift prevailing gender norms, roles and power relations.¹⁸

**BODILY INTEGRITY**

Bodily integrity encompasses physical and mental health, positive self-relationships and agency. Bodily integrity is not a passive or negative concept based on being protected against various harms, but an active and positive one that necessarily implies that girls are active agents of their own lives, that they need their bodies to function and that they need to have control over them. Girls’ bodily integrity requires a balance between protection and personal agency. The need for special protection for girls does not mean to render their agency invisible. On the contrary, the aim of this protection is to guarantee their agency through their bodily integrity.¹⁹

**FRAGILE CONTEXTS**

Fragile contexts are characterized by a combination of exposure to risk and insufficient coping capacity of the state, system and/or communities to manage, absorb and mitigate those risks. The risks are defined by attributes and trends within economic, environmental, political, security and societal dimensions. Fragility poses a major global threat to the achievement of the SDGs and for sustaining peace, especially now that the COVID-19 pandemic threatens to leave the furthest behind even further behind.²⁰
5. A Synthesis of Evidence Linking Girls’ Education and FGM

For this technical note, a desk review of academic and grey literature was completed, looking at the relationship between girls’ education and FGM. The literature review builds on a white paper published by the International Center for Research on Women (ICRW) in 2016, ‘Leveraging Education to End Female Genital Mutilation/Cutting Worldwide’, which synthesized evidence linking FGM and education, and highlighted promising approaches.

The following linkages were identified between girls’ education and FGM:

I. Maternal Education is a Protective Factor for FGM

Higher levels of maternal education are associated with lower FGM prevalence rates. In Egypt, reductions in girls’ risk of undergoing FGM were linked not just to the educational attainment of their mothers, but more broadly to that of women throughout the community. The findings suggest that educational reforms and investments in girls’ education a generation ago had an ‘echo effect’ on girls’ FGM risk a generation later. Women with higher levels of education are less likely to have undergone FGM and also more likely to oppose the practice. In Egypt, 87 per cent of girls and women ages 15 to 49 years have undergone FGM whereas 14 per cent of girls under the age of 15 years have experienced the practice. Among girls and women ages 15 to 49 years who experienced FGM, 98 per cent have no education and 71 per cent have higher than secondary education. Support for FGM is significantly lower among girls and women ages 15 to 49 years with higher levels of education: 74 per cent of girls and women with no education support the continuation of FGM compared to 32 per cent with higher than secondary education.

While maternal education is a strong predictor of FGM, it cannot be interpreted as a direct causal factor as household wealth and mother’s labour force participation are also predictors of FGM and both are linked to maternal education. As a result, more research is needed to better understand the role of maternal education in eliminating FGM.

There are outliers, such as Mali and Somalia, where higher levels of maternal education and household wealth are not associated with lower FGM prevalence rates among girls aged 0 to 14 years. Mali (FGM prevalence rate of 89 per cent) and Somalia (FGM prevalence rate of 98 per cent) have the highest FGM rates in the world. While FGM risk factors are complex, part of the issue is that girls are out of school in both countries. In Mali, 50 per cent of girls of primary school age and 80 per cent of girls of upper secondary school age are out of school. In Somalia, one study found FGM to be one of the main reasons for disparity in girls’ education; FGM is performed as a precursor to early marriage, resulting in the withdrawal of girls from primary school.

II. Education Empowers Girls to Say ‘No’ to FGM

Education can play a critical role in challenging discriminatory gender norms that drive FGM. In contexts where FGM is performed on adolescent girls, education – as a key driver of adolescent girls’ ability to make and implement decisions and choices – can empower girls to say ‘no’ to the practice. There is also a body of evidence that shows mainstreaming FGM in school curricula can be effective in shifting attitudes towards the practice.

III. Life Skills Programmes Empower Girls to End FGM

Life skills programmes offered in schools or through school clubs aim to build knowledge and skills, and to promote empowerment and resilience. There is evidence that life skills programmes can shift discriminatory gender norms and practices, build stronger peer networks and increase civic engagement, which can lead to girls challenging FGM individually or collectively. While life skills programmes can support girls’ empowerment, FGM elimination also requires the broader enabling environment to support and realize empowerment, which means working with the wider community to change their attitudes towards the practice as well.

IV. Schools Play an Essential Role in Protecting Girls From FGM

During the COVID-19 crisis, school closures, in addition to disruptions in essential services, limited the monitoring and reporting of cases of FGM which, according to assessments conducted in 2020, increased the risk of FGM. Schools can play an essential role in protecting girls from the practice by training teachers and school administrators in monitoring and reporting cases of FGM as well as creating opportunities for self-reflection on their own biases and beliefs, and to feel comfortable discussing FGM with students, parents and community members.

V. Understanding the Effects of FGM on Girls’ Education Requires More Research

There is limited qualitative analysis that shows the effects of FGM as a barrier to girls’ education, including grade transition, retention, academic performance and completion. Further research, including impact evaluations, are needed to determine to what extent FGM is a barrier to girls’ education.
6. Key Considerations for Girls’ Education and the Elimination of FGM

The classroom remains the most radical space of possibility in the academy... Urging all of us to open our minds and hearts so that we can know beyond the boundaries of what is acceptable, so that we can think and rethink, so that we can create new visions...

– bell hooks (1994), Teaching to Transgress: Education as the Practice of Freedom

Listed below are key considerations for girls’ education programmes targeting girls at risk of FGM. Additional resources are provided in Annex 1.

Girls most left behind are at higher risk of FGM. More than two thirds of FGM-affected countries are least developed countries and fragile contexts. Girls at risk of FGM are more likely to live in monetary-poor households and communities; experience deprivation in areas such as education, health care and child protection; reside in rural areas with poor infrastructure; have limited exposure to mass media and digital platforms; and live in fragile contexts. As countries transition from high to low prevalence rates, there are growing socioeconomic inequalities for families and communities that practise FGM.

The COVID-19 pandemic has created additional barriers to girls’ access to education. There is an opportunity to build back gender-transformative and resilient education systems, and to use targeted measures to ensure girls – including those most left behind before the pandemic – are returning to and staying in school and learning.

Household monetary poverty is a barrier to education, including girls at risk of FGM. Effective policies and programmes for improving school enrolment and enhancing girls’ educational attainment include gender- and age-responsive social protection, Village Savings and Loans Associations (VSLA) and school feeding programmes. Social protection programmes such as cash transfers have proved successful in addressing poverty and poor educational outcomes. Gender-responsive social protection can be an effective strategy for preventing families from resorting to negative coping mechanisms to alleviate household poverty, such as having girls undergo FGM as a precursor to child marriage, which is linked to economic security and social inclusion.

Schools provide a protective environment for girls at risk of FGM. For girls at risk of FGM, schools can be a protective environment. Interventions that support the role of schools in FGM prevention include integrating in-service and pre-service training for teachers and school administrators on detecting and reporting cases of FGM, as well as providing referrals to appropriate services.
Girls at risk of or affected by FGM may need mental health support. The immediate and long-term complications that follow FGM have implications on girls’ mental health. Mental health awareness and referrals through schools, and mental health and psychosocial support (MPHSS) in the education sector should consider the mental health needs of girls who have undergone the practice as well as girls who may face social stigma because they remain uncut.

Girls at risk of FGM face barriers to education caused by fragility. Most FGM-affected countries are fragile contexts. As a result, girls at risk of FGM, along with their families and communities, may be facing multiple emergencies. Girls in emergencies are more likely to be out of school than girls in non-crisis settings, and be at an increased risk of undergoing FGM. Girls living in crisis-affected contexts make up more than 25 per cent of children and young people out of school globally (equivalent to 67 million girls). As the global community increasingly faces complex, protracted crises related to climate change, conflict and violence, populations on the move, and public health emergencies, girls’ education in emergencies is a critical intervention for addressing FGM.

Education is a pathway to economic empowerment. Girls with limited access to education and livelihood opportunities are more likely to rely on FGM in contexts where the practice is performed to improve marriageability and ensure financial security. A girl-intentional approach supports girls’ skills development and has the potential to support the elimination of FGM as girls are empowered economically:

- Providing access to technical/vocational training that leads to participation in the labour market;
- Creating the space for girls and young women to develop digital skills and knowledge and consider careers in the growing digital economy;
- Increasing girls’ participation in science, technology, engineering and math (STEM) learning;
- Creating initiatives to support girls’ school-to-work transition, such as career guidance, apprenticeships and work experience programmes; and/or
- Providing access to training, financing and enterprise development for female entrepreneurs.

In addition to supporting girls’ economic empowerment through a girl-intentional approach, empowering families through social protection may also mitigate girls’ risk of FGM.

CASE STUDY 1

Gender Equity Movement in Schools

Although not related to FGM, the Gender Equity Movement in Schools (GEMS) is an example of a programme that actively promotes more equitable gender norms in education. GEMS was first piloted in 45 schools in Mumbai with 12- to 14-year-olds over two years. It has subsequently been implemented and evaluated in Viet Nam, and in Bihar, Maharashtra and Jharkhand states in India. In Mumbai, one group of participants was exposed to an awareness-raising campaign only, while another group also received 24 classes focused on gender equality and preventing gender-based violence. When the project was scaled up in Jharkhand, the classes were combined with a community awareness campaign for all participants. Students also received interactive workbooks to take home and follow up learning from the classes.

In Mumbai, the evaluation found that the proportion of students believing girls should be at least 18 (the legal age) at the time of marriage increased, reaching nearly 100 per cent at end line (though baseline figures were not reported). For those who received a combined intervention (group lessons and a school campaign), the proportion of girls believing they should delay marriage until the age of 21 increased from 15 to 22 per cent. Students who were involved in both group-based education and an awareness-raising campaign were 2.4 times more likely to oppose violence than those in the control group; those who took part in the awareness-raising campaign only were 1.5 times more likely to do so than the control group.

In Jharkhand, the GEMS curriculum was used in 20 schools targeting around 3,000 students. Participation had a clear positive impact on students’ attitudes towards gender equality, with a significant increase in the proportion of participants considered to have moved from the ‘low’ gender equality attitudes category to the ‘medium’ and ‘high’ categories. In Danang, Viet Nam, GEMS was piloted in 10 schools with 11- to 12-year-olds and has been similarly successful in helping students move from medium to high commitment to gender equality. In both cases, students’ attitudes in comparison schools changed significantly less.

Source: Achyut et al. (2011); Achyut et al. (2016).
Gender-transformative education challenges discriminatory gender norms that perpetuate FGM. Gender-transformative education aspires to tackle the root causes of gender inequality and engages girls and boys in challenging discriminatory gender norms that perpetuate FGM. Gender-transformative education is informed by gender analysis that identifies context-specific gender issues such as FGM, and supports gender-responsive pedagogy that educates girls and boys about the consequences of the practice and supports girls at risk of or affected by FGM.

Life skills programmes and school-based girls’ clubs build girls’ assets and agency. Life skills for adolescent girls equip girls with information, skills and support networks so that they can be change agents in their own lives.53 School-based girls’ clubs, as an extracurricular activity, offer life skills programmes, vocational training and savings, or promote sports activities. Girls’ clubs are effective at creating safe spaces that build girls’ self-confidence, aspirations and self-efficacy, and social and productive assets; they develop girls’ leadership skills and provide opportunities for civic engagement.54 Life skills programmes and girls’ clubs that include health education and focus on gender norms and power relations can be effective in shifting attitudes that support FGM.55 As previously stated, life skills programmes and girls’ clubs should part of a programme that promotes wider community engagement and an enabling environment for social norms change.

Comprehensive sexuality education (CSE) can also be a key strategy for strengthening girls’ agency and voice, and providing alternative choices to FGM; however, further integration of FGM in CSE curricula is required. CSE can play a critical role in engaging boys as allies in advancing gender equality and the elimination of FGM. Out of 19 countries with available data, the majority (more than 50 per cent) of men and boys in 14 countries opposed the continuation of FGM.56 However, even when boys are against FGM, they do not feel comfortable speaking out about the practice.57
CASE STUDY 2

Berhane Hewan in Ethiopia

UNFPA, in partnership with the Ethiopian Ministry of Youth and Sport, implemented Berhane Hewan (‘Light for Eve’ in Amharic), a programme funded by the Nike Foundation. Berhane Hewan created safe social spaces for the most vulnerable and isolated girls to meet with peers and interact with caring adults, reduced the prevalence of FGM and child marriage, and increased the use of sexual and reproductive health and rights (SRHR) services. Through Berhane Hewan, female mentors created adolescent girls’ groups which included a life skills programme, economic incentives for girls to remain in school and community dialogues about harmful practices. Life skills sessions were facilitated by mentors who were recognized leaders in their community. After receiving training, mentors went door to door to identify young women aged 10 to 19 years and encouraged them to join the programme. An evaluation found improvements in all programme outcomes, including friendship networks, school attendance, age at marriage, SRHR knowledge and communication, and contraceptive use. Community dialogues led to community members committing to end FGM.

Source: Erulkar and Muthengi (2009); Mekbib and Molla (2010)

CASE STUDY 3

Somali Girls’ Education Promotion Project (SOMGEP-T)

SOMGEP-T aims to improve learning outcomes and increase transition rates for 27,146 girls and 30,053 boys in 148 primary and 51 secondary schools in rural and remote areas of Northern-Central Somalia affected by drought and conflict. The programme also supports accelerated learning classes for 3,712 girls. SOMGEP-T uses evidence from longitudinal research to inform an integrated approach to identifying and addressing barriers to adolescent girls’ education. Our research indicates that girls’ learning outcomes are affected by multiple, interconnected factors – with traditional gender norms driving exclusion and normalising violence playing a fundamental role. Therefore, our activities address gaps in content delivery and teaching methodology, but also seek to transform social norms contributing to exclusion from education. Through activities such as Girls’ and Boys’ Empowerment Forums, coaching of Community Education Committees and teacher training, SOMGEP-T brings communities and schools together to shift gender norms and promote long-term social change.

Source: Renault and Gure (2020)
Girl-led participatory action research promotes social change. Undertaking participatory action research that is led by girls can be used to learn about the lives and priorities of girls as part of community resource and needs assessments, or to guide the design, monitoring, adaptation and evaluation of targeted services, including girls’ education programmes targeting girls at risk of FGM. Girl-led participatory action research also promotes social change, supports meaningful participation and empowers adolescent girls to influence education policies and programmes that affect their lives.58

Social mobilization is key for girls’ access to education and ending FGM. Addressing the root causes of gender inequalities by transforming gender roles, norms and power relations is key to ensuring girls’ access to education and ending FGM. Community mobilization interventions can raise awareness, create space for self-reflection and encourage critical questioning of prevailing gender norms. Community-led dialogues and education sessions that are human rights-based, inclusive and participatory, that build trust, clarify perceptions and foster change towards investing in girls, are central to creating safe and enabling environments and ensuring girls’ equitable access to education and the elimination of FGM.

CASE STUDY 4

Girls’ Holistic Development Programme in Senegal

Since 2008, UNICEF’s partner, the Grandmothers Project, has been implementing the Girls’ Holistic Development (GHD) Programme in the Vélingara Department in Senegal. GHD promotes change in social norms related to girls’ education and FGM by empowering girls and creating an enabling environment where family and community support change for girls. GMP uses the ‘Change Through Culture’ approach, which involves adolescents, parents, elders, traditional community and religious leaders, local health workers and teachers in various dialogue-based activities that strengthen relationships and communication both between generations and between men and women. It increases social cohesion between community leaders and members – a prerequisite for collective action for girls. It restores the role of elders in communities and empowers grandmothers to be active allies of young girls. An evaluation of GHD found an increased belief in the value of education for girls. Parents described their own transition from dismissing school as unimportant and not necessary for girls, to seeing the value of girls’ education as a road for them to have access to better jobs and income. As a result, though girls were traditionally expected to be heavily involved in unpaid care work, mothers decreased domestic tasks assigned to their daughters to allow them to have more time for studying. Though GHD works to shift community norms on FGM, the study was unable to observe this change, given that girls are cut as infants. However, parents and grandmothers perceived a decline in FGM.

Source: Institute of Reproductive Health (2020)
Social movements advance gender equality. Few of the normative advances on gender equality would have been possible without the advocacy of feminist organizations and movements to raise public awareness, pressure governments for change, and hold governments accountable for implementation of policies and legislation. Social movements have played a critical role in shifting gender norms and public policy on key gender issues, including girls’ access to education, and policies and legislation that protect girls from FGM. Linking girls’ education, child protection and anti-FGM activists and advocates has the potential to strengthen social movements to hold governments accountable to the 2030 Agenda and the SDGs.

7. Call to Action

Gender equality and girls’ and women’s empowerment are intrinsically linked to the right to quality education for all. COVID-19 has created an unprecedented crisis that has set back progress towards meeting the SDGs by 2030, including target 4.1 – ensuring girls’ access to inclusive and equitable quality education, from early childhood through to secondary – and target 5.3 – the elimination of FGM. The following bold and urgent actions are required from all stakeholders supporting girls’ education and the elimination of FGM:

1. Sector planning: Establish the elimination of FGM as an explicitly named goal in education sector policies and plans, with appropriate strategies and accountability frameworks to end FGM through education. Gender analyses of education sector plans should include an understanding of the prevalence of FGM and the factors which perpetuate the practice. Gender-responsive sector planning should also include strategies for the elimination of FGM, such as CSE or SRHR curriculum, pedagogical approaches, clear referrals to monitor and report FGM, and life skills programmes including extracurricular activities that empower girls. This includes prioritizing gender transformative approaches that challenge and change social and gender norms which underpin the practice.

2. Build partnerships: Partnerships offer key stakeholders in girls’ education and FGM an opportunity to combine their efforts and maximize their impact. Governments, international organizations, non-governmental organizations and civil society, grassroots and women and youth-led groups, academia and the private sector can help accelerate action by building and sustaining political will to eliminate FGM through girls’ education, and invest in research to understand the intersection between girls’ education and FGM. Partnerships also mean developing advocacy strategies to increase visibility and investments in girls’ education and FGM, and to collaborate with other international, regional and national FGM and girls’ education coalition platforms on shared messaging.

3. Data and evidence: Invest in rigorous evaluations to understand the complexities of the practice, including the multifaceted factors that drive FGM. Ensure adequate funding or emphasis on formative and participatory research and rigorous evaluations for measuring the sustainability and effectiveness of policies and programmes. Conduct rigorous evaluations that study the link between girls’ education and the elimination of FGM.

4. Financing: FGM in emergencies is underfunded and neglected, as prevention and response interventions are not considered life-saving or essential to girls’ resilience. Multi-year funding is required for girls’ education and FGM, especially in emergency settings.

5. Integrate FGM in CSE programmes: CSE can play an important role in eliminating FGM as a violation of girls’ and women’s human rights and bodily integrity. Curricula should include information about the physical, mental and sexual health risks associated with the practice.
ANNEX 1: Resources

Girls’ Education in Emergencies

Reimagining Girls’ Education: Solutions to Keep Girls Learning in Emergencies (UNICEF): This solutions book highlights promising evidence-based actions in education for designing and implementing interventions that support girls’ education in low- and middle-income country humanitarian settings and settings where education has been interrupted. It documents practical examples of approaches that have been or are being tested, and from which lessons can be drawn.
Website: https://www.unicef.org/reports/reimagining-girls-education

The EiE-GenKit: A core resource package on gender in education in emergencies (UNGEI, Education Cannot Wait [ECW] and Inter-agency Network for Education in Emergencies [INEE]): Grounded in internationally recognized minimum standards and guidelines, the EiE-GenKit is the first resource of its kind to provide a comprehensive suite of programming tools for education practitioners to promote gender-responsive EiE programming. Built on research evidence and good practice, the EiE-GenKit seeks to foster new approaches that will stimulate step change in the gender and education outcomes of learners living in crises.
Website: https://www.ungei.org/publication/eie-genkit

Gender in Education in Emergencies Resource Centre (UNGEI and ECW): This online resource centre provides curated resources and learning content for everyone working to deliver gender-responsive education in crisis-affected contexts.
Website: https://www.ungei.org/knowledge-hub/gender-education-emergencies

Building Back Equal: Girls’ Back to School Guide (Malala Fund, Plan International, UNICEF, UNGEI and United Nations Educational, Scientific and Cultural Organization [UNESCO]): This guide was developed to help governments and school communities to ‘build back better’ after COVID-19, calling for action to ‘build back equal’ – promoting the development of gender-responsive education systems and targeted actions to ensure girls’ continuity of learning and return to school.
Website: https://unesdoc.unesco.org/ark:/48223/pf0000374094/PDF/374094eng.pdf.multi

Gender-Responsive Pedagogy

Gender Responsive Pedagogy: A Toolkit for Teachers and Schools (Forum for African Women Educationalists [FAWE]): This toolkit synthesizes good practices in gender-responsive pedagogy, as well as research on gender equality and gender-responsive education in the African context. The toolkit includes SRHR, and covers FGM as a harmful practice.

Portal for Gender Equality in Schools (PEGE) (Promundo): PEGE has teaching resources for lessons on gender equality. Teachers have accessible manuals for Programmes H and M (flagship community-based informal education programmes on gender-sensitive masculinities).
Website: https://promundoglobal.org/programs/portal-for-gender-equality-in-schools/

Creating Supportive Learning Environments for Girls and Boys: A Guide for Educators (International Research and Exchanges Board [IREX]): This guide describes how to ensure gender-friendly classrooms and teaching materials, using a workbook format to help teachers create their own action plan and monitor change.
Website: https://www.irex.org/resource/creating-supportive-learning-environments-girls-and-boys-guide-educators

Literature that explores the impact of education on gender norms include the following: World Bank’s 2013 On Norms and Agency, which draws on primary research in 20 countries to highlight education as a key driver of shifting gender norms; and Naila Kabeer’s 2011 analysis of evidence on the forces underpinning women’s economic empowerment also emphasizes education.
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Cover photo: Children at the playground of their school in Niamey, the capital of Niger.
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Technical Note
GIRLS’ EDUCATION, EMPOWERMENT AND THE ELIMINATION OF FEMALE GENITAL MUTILATION