



**THE REPUBLIC OF UGANDA**

**STATEMENT BY**

**HON. MUTUZO PEACE REGIS**

**MINISTER OF STATE FOR GENDER AND CULTURE AFFAIRS**

**ON THE COMMEMORATION OF THE INTERNATIONAL DAY FOR ZERO  
TOLERANCE OF FEMALE GENITAL MUTILATION**

**AT THE UGANDA MEDIA CENTRE**

**5<sup>TH</sup> FEBRUARY 2020.**

## **1.0 Introduction**

Uganda joins the rest of the world tomorrow to commemorate the International Day of Zero Tolerance for Female Genital Mutilation. The purpose of the commemoration is to raise awareness among all Ugandans about the dangers of this practice and to advocate for its total elimination.

### **Definition**

Female Genital Mutilation refers to the total or partial removal or mutilation of external female genitalia for non medical reasons.

### **Types of FGM practiced in Uganda**

Types 1,2,3 &4 are all practiced in Uganda.

- ❖ Type I (clitoridectomy) and Type II-excision) are both practiced by the Sabiny.
- ❖ Type III (infibulation or pharaonic) is practiced by the Pokot.
- ❖ Type IV includes other types- Mainly Genital elongation practiced by Bantu e.g. Baganda.

### **Prevalence of FGM**

Globally, it is estimated that approximately 100 to 140 million girls and women have undergone some form of Genital Mutilation or cutting. The practice is prevalent in 28 countries in Africa and some countries in Asia and the Middle East.

According to the Uganda Demographic and Health Survey (UDHS 2016), the national prevalence of FGM among girls and women aged 15 - 49 is 0.3 percent. However an FGM specific survey (UBOS 2017) in the 6 FGM practicing districts revealed an average prevalence of 27 percent with Moroto having the highest prevalence of 53 percent.

Prevalence is highest among women aged 45 years and above (68 percent), and this is attributed to the fact that they were cut before the FGM Law was enacted, Anti-FGM campaigns were unavailable and it was generally accepted as a normal way of life within the practicing communities. Prevalence among girls aged 15-24 years is at 8

percent and this is due to the effect of the law and the ongoing interventions to decampaign the practice.

### **Knowledge and attitudes towards FGM**

The UBOS survey (2017) revealed an increase in knowledge of FGM and its consequences among female respondents at 99 percent. Similarly, 94 percent of people in the survey believe that the practice should be discontinued and 69 percent believe that abandoning FGM would have a positive impact on families and communities.

### **Geographical coverage**

In Uganda, FGM is practiced in the eastern part of the country among the Sabiny living in the districts of Kapchorwa, Bukwo and Kween in Elgon region; and the Pokot, Kadam and Tepeth living in Amudat, Moroto and Nakapiripirit districts in Karamoja region. FGM is also reported among migrant communities including refugees.

### **New trends in FGM**

A disturbing trend of FGM surge was observed within a period of three to four months (November 2018 to January 2019) in Kapchorwa, Kween and Bukwo districts which resulted in an estimated 350 girls and women being mutilated. This demonstrated the need for consistency and sustainability of interventions.

### **Why the fight against FGM is important**

FGM is a violation of the women's rights and has far reaching effects on their health and social well being. FGM/C has long- and short-term health and social consequences most of which are irreversible and require medical attention to mitigate their effects.

**Effects of FGM** include severe bleeding which may lead to death, permanent scars that may block the birth canal, obstetric fistula, urine incontinence, permanent disability, depression, trauma, feelings of disgust, loss of libido, among others. The effects of Type IV (pulling and others) include lesbianism, commercialization of the exercise through hiring special women to pull the girls/women, premarital/child sex and early marriage.

## **Linkage to global and regional campaigns**

In 2012, the UN General assembly designated 6<sup>th</sup> February as the international day of zero tolerance of FGM. The theme for 2020 is “**Unleashing Youth Power**”, **One decade of accelerating actions for zero Female Genital Mutilation by 2030.**

Ending FGM in one decade will require support from stakeholders at all levels. With significant population growth, especially among youth, investing in young people to champion the campaign to end FGM is very critical and this is the reason why this year's theme focuses on mobilizing youth around elimination of harmful practices including FGM.

## **KEY MILESTONES ACHIEVED IN ADDRESSING FGM IN UGANDA**

Since 2008, the Ministry of Gender, Labour and Social development (MGLSD) has partnered with UNFPA and UNICEF to implement a Joint program to accelerate the abandonment of Female Genital Mutilation/cutting (FGM) in Uganda.

## **PROGRESS HAS BEEN REGISTERED IN THE FOLLOWING AREAS:**

**Reduction in FGM prevalence rates:** According to the Uganda Demographic and Health Survey, national prevalence is 0.3% (UDHS 2016), a decrease from 1.4% in 2011 (UDHS 2011). This is attributed to law enforcement and community sensitization and mobilization efforts on the effects of FGM.

### **Strong Legal and Policy framework**

The Legal and Policy framework is conducive and the following Laws and Policies are in place, namely: The Prohibition of FGM Act 2010, The FGM Regulations 2013, The Domestic Violence Act 2010 and its Regulations, the National Policy and Action Plan on Elimination of Gender Based Violence (2016).

### **Strengthened Partnership and coordination for FGM abandonment**

The Ministry acknowledges the critical role of partnerships at all levels and between various stakeholders and hence has continued to build and strengthen these partnerships with other Ministries, Departments and Agencies, Local Governments and Civil Society Organizations, Faith Based Organizations and Cultural Institutions in order

to provide holistic and comprehensive services, including generating local level commitment towards abandonment of FGM.

### **High-level advocacy efforts and engagements between Kenya, Uganda and Tanzania for increased national commitment to end FGM**

The Government with support from partners has continued to build on and strengthen strategic engagements between Uganda and Kenya and in-country to ensure accountability at all levels. More so, Government is a signatory of the EAC Regional Action Plan for ending cross boarder FGM. Dialogues have also been conducted at national and district level to advocate for incorporation of FGM in plans and budgets for sustainability.

### **Intensified Community awareness on FGM**

This is a milestone in the abandonment of the practice, as communities are increasingly beginning to realize and appreciate the benefit of not cutting their girls and women and willingness to discontinue the practice.

### **Capacity development of duty bearers**

Capacity building for service providers has been done to ensure an integrated package for FGM prevention and response and these include health workers, social and community workers (DCDOs, CDOs, Religious and Cultural leaders, Community Actors and Police.

### **Alternative sources of livelihood for former cutters/ surgeons and survivors**

The Ministry has supported the alternative sources of income through mobilizing and linking FGM survivors and former cutters/ surgeons to the existing Government income generating programmes like Uganda Women Entrepreneurship Programme, Social Assistance Grants for Empowerment (SAGE) and the Youth Livelihood Programme (YLP).

### **Community policing:**

Community policing has become a critical approach in building bridges and relationships between community and the security organs in what would be fragile and hostile relationships. The interaction has provided a platform for open discussions and feedback from both parties-communities and Law enforcement officers.

### **Strengthened capacity to generate and use data for policy making and improved programing**

Uganda has put in place functional data systems and has created forums for sharing of good practices among stakeholders and this has influenced actions on law enforcement and evidence based programming to eliminate FGM/C. Notably, the National Gender Based Violence Data Base (NGBVD), Uganda Demographic Health Survey (UDHS), data from Child helpline and Community Information Systems.

### **Rescue Centers for GBV/FGM survivors**

The Ministry has developed National Guidelines for Establishment and Management of GBV shelters and Guidelines for provision of Psycho social support to survivors.

### **Model Girls' Secondary Schools in the fight against FGM**

The Model Girls' Secondary Schools are: Kwasir Girls School in Kween, Kortek Girls Secondary School in Bukwo and Pokot Girls Secondary School in Amudat. The above schools have increased enrolment of girls in school, reduction in dropouts and early marriages, thus enabling families to keep girls at school and minimize the risks of exposure to FGM/Cutting.

## **EMERGING CHALLENGES**

**Cultural beliefs:** A number of cultural beliefs prevail in the FGM practicing communities. In Sebei region for example, there was a local prophecy for communities to cut women and girls to prevent the “Nugut tree” from flowering that would stop circumcision of boys, which is a mandatory ritual. Also, the circumcision of women and girls is perceived as sacrifice to prevent the Nugut tree” from flowering.

**Influence of young people through Social Media:** The young people have utilised social media platforms e.g WhatsApp, Facebook, to openly campaign for preservation of FGM, as an important practice of the Sabinu culture using the slogan “**our culture, our identity**”.

**Political influence:** Some local leaders and politicians in the region encouraged and supported communities to practice FGM as a way of galvanising political support.

**Medicalization of FGM** which makes it easy to tolerate because it reduces pain.

**Cross border dynamics** affect implementation of the FGM Law.

## **FUTURE PLANS FOR ACCELERATING FGM ABANDONMENT**

The Ministry will focus on the following broad interventions in addressing FGM with the goal of eliminating the practice by 2030:

Specific interventions to achieve these will include;

- Community engagement for development of agreed and locally accepted alternative rites of passage to initiate girls and women into womanhood. This will eliminate the practice while at the same time retaining a sense of cultural identity among the communities.
- Strengthening male involvement
- Strengthening law enforcement including retooling the Law enforcement Workforce and establishing Police Posts in hard to reach areas.
- Tailor-made sexuality education for FGM practicing districts
- Review of the FGM Law
- Mobilization of resources for establishing community radios in the FGM practicing districts.
- Strengthening the multi sectoral framework for Adolescent Girls development.
- Strengthening cross border Coordination