

HOW TO GUIDE

THE
GIRL
GENERATION

TOGETHER TO END FGM

DO NO HARM GUIDELINES

Do No Harm means that those undertaking research or projects, or offering services, should **not** – intentionally or otherwise – cause harm. For example, doctors avoid giving drugs whose side effects are more harmful than the condition they are treating. Harmful effects are often unforeseen and unintended: well-meaning individuals or organisations can easily make mistakes and ‘get it wrong’.

The Girl Generation has adapted this principle to guide all of our activities, and we promote our Do No Harm guidelines across the movement to end FGM. Harm can be avoided through careful consideration of the complexity and sensitivities around FGM - these guidelines can support you in the development of communications messages and activities.

AREA OF POTENTIAL HARM

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COMPROMISING DIGNITY

Images which are shocking can be traumatic (especially for those who have undergone FGM), and can alienate communities. **Avoid using images which show FGM or directly suggest the procedure, such as pools of blood or razor blades.**

Using judgemental or negative terms to describe FGM can reinforce discrimination. **Do use not language which criticises the community’s culture or religion, or which stigmatises women and girls who have undergone FGM, or use terms such as barbaric and uncivilised.**

RISKS TO VULNERABLE PEOPLE

No individual child or other vulnerable person to be identifiable in mass media or online images.

Your project might highlight health problems related to FGM, or may make people aware of the pressure for their own child to undergo FGM. **Be prepared to link people to support services (such as medical services, helplines, community groups - where they are available) or ask for advice from your country The Girl Generation programme officer.**

NEGATIVE BACKLASH

Some forms of backlash can be a sign that positive change is occurring and can provide an opportunity to discuss issues

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more openly, and work towards conflict resolution. However, unproductive backlash resulting from insensitivity or not involving communities effectively can alienate people who might otherwise have supported an end to FGM. **Engage a wide cross-sector of society in community discussions, including men and faith/traditional leaders. Highlight the benefits of ending FGM that are relevant to the community – health, economic, familial, etc.**

INCREASING SUPPORT FOR FGM

Ethnic or religious groups may feel under attack if they are portrayed negatively in the campaign to end FGM, or if they feel that change is being imposed from afar, rather than led locally. This may result in increased support for FGM. **Ensure that efforts to end FGM are locally led. Make sure that all references to religion and ethnicity and FGM are based on evidence from reliable sources.**

INACCURATE INFORMATION

Using incorrect data or information undermines the end FGM movement. **Use reliable data sources e.g. data.unicef.org/resources/female-genital-mutilation-cutting-country-profiles/**

SENDING THE PRACTICE UNDERGROUND

Avoid focusing solely on the illegality of FGM: laws against FGM are important but do not succeed in isolation. **A holistic response is required:** prevention of FGM, protection of girls, provision of services to women affected, partnerships across society (with communities, leaders, schools, health workers, religious leaders, etc.), and prosecution when prevention fails. **Community approaches and behavioural change initiatives are needed to complement the law.**

MEDICALISATION

Focusing too narrowly on the health consequences of FGM may lead to medicalisation rather than abandonment of FGM. **All forms of FGM are violence against women and girls. Involve health professionals in the campaign to end FGM.**

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HOW CAN HARM BE AVOIDED

Effective change is **locally led**. Efforts to end FGM must be based on deep local knowledge and visible local leadership.

To start with:

- Understand how ready the community is to end FGM, and adapt your approach accordingly
- Ensure you have a good grasp of the facts (including about FGM, and the local context)
- Plan for potential risks, including risks to yourself and your team, what you will do if you encounter strong opposition, and what you will do if you come across children at risk of harm. Evaluate the political situation, degree of press freedom, and government approach to human rights so as not to put yourself and others at risk.
- Where possible, identify sources of additional support (e.g. psychological and health services for women affected by FGM)
- Even if you are focusing on FGM, a holistic approach is needed to end the practice. Think about how you can integrate FGM into broader efforts for child welfare, health and development – linking up with other campaigns e.g. child, early and forced marriages, maternal health, or education.

In partnership with the community:

- Develop non-judgemental, locally appropriate communications
- Select ambassadors or spokespeople carefully
- Start discussions and conversations about FGM rather than lecturing people
- Alert people before presenting material in which FGM is depicted and allow them to leave if they wish – and only do so if you have carefully considered the audience (e.g. is it age-appropriate?)
- Keep a close eye on how the work is developing, and adapt your approach if there is a risk of harm

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