

The Girl Generation:

Support to the Africa-led movement to end female genital mutilation/cutting (FGM/C) programme





The Girl Generation: Support to the Africa-led Movement to End Female Genital Mutilation/Cutting (FGM/C) programme (TGG/ALM) is funded by Foreign, Commonwealth and Development Office. The programme is implemented by a consortium led by Options and including Amref Health Africa, ActionAid, Orchid Project, Population Council, Africa Coordination Centre for Abandonment of Female Genital Mutilation/Cutting and University of Portsmouth. The programme works closely with the Population Council's Data Hub, the programme's data and measurement arm



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1. Introduction to The Girl Generation: Support to the Africa-led movement to end FGM/C

The UK Government (Foreign, Commonwealth and Development Office) has a vision of a world free from female genital mutilation/cutting (FGM/C) by 2030, in line with the Sustainable Development Goals target 5.3: 'Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilations'. The Girl Generation (TGG): Support to the Africa-led Movement (ALM) to end FGM/C programme has been established to contribute to global efforts to achieve that vision, and builds on a prior UK Aid five-year investment from 2013-2018.¹

The current TGG/ALM programme works in partnership with the social movement to end FGM/C at multiple levels, complementing the work of other coalitions and alliances, grassroots community-based organisations and women's and girls' networks. The intended impact of the programme is an accelerated reduction in the practice of FGM/C by 2027 in focal regions of Kenya, Somaliland, Senegal and Ethiopia. A consortium led by Options together with Amref Health Africa, ActionAid, Orchid Project, Africa Coordination Centre for Abandonment of FGM/C (ACAAF) and University of Portsmouth (UOP) is responsible for programme implementation.



2. Introduction to the grassroots grants

One of TGG/ALM's focus areas has been the establishment of a grassroots grants mechanism through which smaller, less mainstream community-based organisations, who are closer to where FGM/C occurs, can receive funding and capacity development support to lead transformative and sustainable change within their communities.

The grassroots grants mechanism is grounded in established feminist funding principles.² Target grantee partners are women-, girl- and youth-led grassroots organisations, survivors and activists already respected and valued within their communities for their work to end FGM/C and/or on related issues. A gender equity lens is applied to grantee partner selection whereby the involvement of men, which is actively encouraged, is balanced with the importance of centring women and girls, and FGM/C survivors in particular, at the heart of the movement.

Grantee partner selection and grant management processes are informed by a scoping and validation exercise in each region, and are further guided by programmatic documents, and consultations with consortium partners and the local grants advisory committees (GAC)³ whose members are constituted from the local community and who are familiar with the FGM/C ecosystem. First-time recipients of any grants are prioritised, based on their reputation and existing anti-FGM/C work. This **locally-led** selection process aims to ensure that resources flow **directly** to those who are known within their local communities for their work to end FGM/C.

The vision of the grassroots grants mechanism is to strengthen the Africa-led movement to end FGM/C by resourcing and supporting those most affected by FGM/C and other forms of gender-based violence against women and girls at the grassroots to lead change within their communities, countries, and globally.

The fund is accessible to civil society, grassroots, and womenand youth-led organisations, survivors and activists in selected regions of programme countries (Kenya, Senegal, Somaliland, and Ethiopia).

Direct funding' intentionally delivers resources to feminist groups and movements, allowing them to determine their own priorities and recognising them as the agents and drivers of change. When groups and movements are rooted in their local communities and speak on their lived experience about realities that they know well, they own the advocacy and are best positioned to pursue solutions that are deep, empowering, and lasting.²

The grant values and type are categorised into the following four components:

- 1. Small grants: Eligible to receive up to £2,000 and intended for small grassroots organisations who may be first-time recipients of any formal funding and might not meet all of the typical formal (legal, financial, or operational) due diligence criteria.
- 2. Medium grants: Eligible to receive up to £20,000 per year. Intended for more established community-based organisations who meet more stringent due diligence criteria and have some track record in managing grants.
- 3. Anchor grants: Eligible to receive up to £100,000 per year. These grants are intended for larger, well-established organisations who will also provide capacity development support to small and medium-grantee partners in their area. There are likely to be 1-2 anchor grants awarded in each sub-national area.
- 4. Travel grants: Individuals eligible to receive between £1,300 and £3,500 to participate in movement-building events related to ending FGM/C (n.b. this category of grants is not covered in this learning brief).

Grants are reviewed and issued on an annual basis with the intention to fund for as long as possible (within programme timelines) and where appropriate, to graduate smaller grants to larger grants pending grantee partner performance.



3. Overview of learning brief

This learning brief details steps taken to set up grassroots grants in Narok and Isiolo counties in Kenya, where FGM/C prevalence is higher than the national average. The first cohort of sixteen grantee partners, selected in 2022, have had one full year of support (see table 1). Through a document review (from Options, grantee and consortium partners), coupled with reflections from the grants team, the brief highlights grantee partner activities, identifies initial learnings, shares challenges, and concludes with reflections and recommendations. The brief ends with a snapshot of grants set up in Garissa County, Kenya; Somaliland, Ethiopia and Senegal, where the grassroots grants mechanism was established later, building on experiences from Narok and Isiolo.



Table 1: Summary of FGM/C, demographic indicators and number of grantee partners in grants counties based on the 2022 KDHS with input from Population Council

	Narok County	Isiolo County	National
FGM/C prevalence (%)	51	66	15
Urban	25.1	58.6	9.7
Rural	53.9	80.9	18.4
Main religion	Christian (72%)	Islam (70%)	
Main ethnic groups	Maasai and Kalenjin	Borana, Samburu, Somali and Turkana	
Number and type of grantee partners	7 (One anchor; two medium; four small)	9 (One anchor; three medium; five small)	

Source: KNBS and ICF, 2023. Kenya Demographic and Health Survey (KDHS) 2022. Key Indicators Report. Nairobi, Kenya, and Rockville, Maryland, USA: KNBS and ICF.

4. The grants mechanism set-up in Narok and Isiolo

The following process ran separately but concurrently in Narok and Isiolo:

Step 1: A scoping and validation exercise conducted a deep dive into the FGM/C ecosystem in Narok and Isiolo Counties, and helped identify an initial list of potential grantee partners and other key stakeholders and individuals involved in end FGM/C activism in the project locations.

Step 2: Local grants advisory committees were set up for each county composed of representatives from the sub-county project locations. Representatives were selected through nominations by local community-based organisations, community leaders, activists and from the locally based TGG/ALM consortium partners Amref and ActionAid. The GACs received an orientation on TGG/ALM grants strategy and on their roles and responsibilities.

Step 3: Once constituted, the first task of the GACs was to review the initial list of potential grantee partners from the scoping and validation exercise. Based on their local knowledge, others were also added. A total of 35 potential grantee partners were identified from the two counties, including recommendations for those who could be designated as 'anchor' partners.

Grants Advisory Committees (GAC): are constituted from the local community in each of the programme's focal areas. Members include locally based representatives of consortium partners, representatives from women's, youth and girls' organisations, representatives from excluded or underrepresented groups including people with disabilities and people living in more remote communities. Committee members have a deep local knowledge of end FGM/C and other actors in the area.

The GAC mandate, articulated in a memorandum of understanding (MOU), is to propose potential grantee partners; review applications; make recommendations on grantee partner recipients and the type of grants to award (small, medium, anchor). First-time and grassroots organisations are given priority and the GAC base their recommendation on organisations' reputation and existing end FGM/C work within the community.

Step 4: A pre-award training for all 35 potential grantee partners and the GAC was conducted in their respective project locations focused on the following topics:

- Introduction to TGG/ALM
- Grants mechanism strategy
- Grantee partner eligibility criteria
- Review of call of application form (which was made as short and simple as possible)
- Proposal development
- Finance and budgeting
- Overview of safeguarding and do harm principles.

Step 5: Organisations identified as being eligible for small or medium grants were invited to submit their applications, whilst a request for proposals for anchor grantee partners was released.

Step 6: All applications were reviewed by the GAC, TGG/ALM grants team and consortium partners culminating in the selection of sixteen grantee partners (see Table 1).

Step 7: The sixteen selected grantee partners together with TGG/ALM consortium members and representatives from the Isiolo and Narok GACs participated in an inception workshop for all participants to present their workplans/activities; be briefed on compliance processes; understand timelines; discuss and agree on monitoring, reporting and dissemination requirements and exchange their experiences in the end FGM/C space.

Step 8: Contracts were signed, with the first disbursements made in November 2022.

Anchor Partners: These are larger, more established organisations who have been prior recipients of grants. They are selected through direct competition via requests for proposals. GACs are involved in the review, identification and selection of potential anchor partners, who must operate locally and have the ability to provide hands on capacity development support to a small network of medium and smaller grant partners. There is one anchor organisation per project location. The anchor partner might need to be identified first, as their size and capacity will determine how many small and medium grantees can feasibly be supported.

5. Grant management

When the grants mechanism was set up, day-to-day management and monitoring, evaluation and learning (MEL) was carried out by a small grants team comprising the Grants Lead supported by one Grants Officer per focus country. Amref, who lead the programme's community intervention component (Output 1) were also tasked with supporting the grant mechanism's community-based activities.

A TGG/ALM programme manager provides quality assurance of grant agreements and donor compliance, and monitors and tracks grant disbursements whilst, communications and external engagements are overseen by a communications department. The grant team and MEL components have adapted significantly as described under the learnings section below.

ALM consortium partners: Amref Health Africa and ActionAid

Given their community presence in project locations, Amref and ActionAid play a pivotal role in providing additional community knowledge to the grants team, have helped with the establishment of the GACs and supported application reviews and selection processes. The activities of the grantee partners are designed to be complementary to the community-based interventions implemented under Output 1 by Amref and ActionAid to contribute towards a broader social movement committed to ending FGM/C.

Managing potential Conflicts of Interest (COI) within GACs:

The design of the grants mechanism means that the following COI may arise:

- GAC members have a current/ prior relationship with staff members of a grant applicant
- GAC member currently employed by a grant applicant

We manage potential COI within GACs as follows:

- The grants team provides training on potential COI, how to declare these, and the implications of these.
- GAC members must not work for a grant applicant organisation. Doing so will result in removal from the Committee.
- GAC members must declare any potential COI raised due to their membership on the committee in a timely manner.
- Committee membership requires members to agree and sign a COI Declaration.

6. The grantee partners: Who are they?

The two anchor partners in Narok and Isiolo are well-established organisations each supporting several medium and smaller grantee partners shown in table 2.

Table 2: Partners

Narok County	
Coalition on Violence Against Women (COVAW) ⁴	Anchor
AfyaAfrica	Medium
Murua Girls Education Programme	Medium
Ewangan Olosho Suswa	Small
Kikuyian CBO	Small
Nenkare Youth CBO	Small
Naretoi Suswa Women	Small

Isiolo County	
Samburu Women Trust (SWT)⁵	Anchor
Ardha Jabesa Foundation	Medium
Women Rising Initiative (WRI)	Medium
Call for Change	Medium
Dream Shapers	Small
Isiolo Human Rights Defenders	Small
Isiolo Unites	Small
Waso Hope	Small
Rapid Advocacy for Resource and Empowerment Programme (RARE-P)	Small

7. Key grant activities

Community meetings, dialogues and forums

Community meetings of varying configurations, and often described as community forums or dialogues, have been convened by all grantee partners. Awareness is raised, and knowledge and experiences are shared, to increase an understanding of the negative impacts of FGM/C and provide safe discussion spaces with different community members. These forums aim to question conventional gender stereotypes and to encourage communities to work together towards ending FGM/C. In general, the following topics are covered:

- Introduction to FGM/C, including harmful effects, myths and misconceptions, medicalised FGM/C,⁶ legal and policy framework governing FGM/C
- Social norms
- Human rights
- Other harmful social/cultural practices, including early/child marriages
- Menstrual management
- Involvement of men
- Climate change
- Sexual and gender-based violence (SGBV)
- Reporting processes for SGBV and FGM/C cases.

Community dialogues are nuanced to suit meeting participants who might be one gender (such as all men, or all girls); community leaders, religious leaders, young mothers, agesets, mixed and intergenerational. Some of the forums might include an end FGM/C champion or ambassador who is invited to speak to help

prompt and facilitate discussion. Champions are individuals with the confidence to speak out publicly to address FGM/C and other social challenges and may include survivors or community activists.

International day celebrations,7 which attract large crowds - often with high-level County government representation, donors and larger organisations - have also been used as platforms for larger, more visible community meetings to amplify the end FGM/C movement. Narok County's First Lady, who is an end FGM/C champion, was guest of honour at some of these events and wove end FGM/C messages into her speeches. Some of the international days in which grantee partners participated include Day of the African Child, International Woman's Day, Menstrual Hygiene Day and International Day of Zero Tolerance for FGM. All these days resonate with the end-FGM/C cause.

School-based activities

Several grantee partners collaborate with primary and secondary schools on FGM/C discussions using different entry points.

Anti-FGM/C school clubs have been established in some areas. One of the anchor grantee partners, SWT, uses its grant to support teachers from six primary schools to better manage their FGM/C clubs and ensure they keep running. They report that the clubs have 'created a ripple effect' where club members reach out to their peers with information on FGM and its effects. This has contributed to enhanced knowledge on the effects of FGM among school-going girls and the teachers acknowledge the important role they play, but have requested continued support from the grantee partner':

"As teachers, we have the responsibility to create a safe environment for young girls at risk of being cut by facilitating non-judgemental club meetings and encourage the girls to speak out against any planned action related to cutting of girls."

Primary Teacher during an anti-FGM School club meeting

School-based **sporting events** have been successfully used to hold discussions with boys and girls, their teachers and with community members, who come to watch the tournaments. One of the teachers said:

"The sports activities provide a safe space to openly and in a non-judgemental way challenge harmful traditional practices like FGM and agree on collective action to end FGM."

Primary Teacher, Narok

In Isiolo, a three-day girl-only football tournament was organised to bring together communities, promote gender equality, and educate the public on the harmful effects of FGM/C. Girls from six different schools who were passionate about football took part.

"The tournament successfully reached a wide audience, with over 200 attendees, including players, community members, and guests. The girls who participated in the tournament gained confidence and a sense of empowerment. They have become self-aware and know their rights and vowed to become future advocates in the community. The event garnered significant media attention, including coverage on social media platforms, further spreading the message."

Women's Rising Initiative, Medium grantee, Isiolo

WRI supported football match: Merti Boarding Girls (Yellow) Vs Khalifah Primary Girls (Pink)



Other school platforms include convening peer group discussions and facilitating plays, poems and mobile theatre groups in schools on ending end FGM/C. In addition, a leadership and mentorship forum for teenage girls in both primary and secondary schools has been supported to enhance their confidence and self-determination.

Menstrual management and the provision of dignity kits have been used by some grantee partners as entry points to convene conversations with school-based girls. This approach seemed to be more common among the Isiolo-based partners.

Community radio

Local community radio is an effective medium with a broad reach to audiences that some grantee partners are using. One partner in Isiolo has launched a radio campaign to raise awareness of the dangers of FGM and to promote its abandonment in the region. The aired programme centred on an FGM survivor who was interviewed on her experience. Later, phone lines were opened for the public to phone in with feedback and questions. The radio session was reported to have reached a total of over 80,000 listeners and generated positive feedback from the community. The interviewee was described as 'engaging and used storytelling to keep the listener's attention by narrating personal stories, and examples to illustrate her points and to make the topic more relatable' (RARE-P, Small grantee, Isiolo). Social media platforms were used to publicise the radio show. Another partner's radio format was slightly different in that the programme focussed on the religious and health dimensions of FGM/C and also included testimonies from survivors.

Digital platform promotion



Engagement on digital platforms

One of the medium grantee partners in Narok, Murua Girl Education programme, organised a digital advocacy workshop for girl champions and duty bearers. Following the workshop, eight individuals gained the confidence to share and have their FGM/C journey recorded, which were aired as part of a digital media campaign series entitled **#FGMVoices.** Duty bearers who also publicly supported the girl champions included the First Lady of Narok who committed to denouncing FGM/C and to act as a mentor to one of the identified champions. The recordings of the champions' experiences have been aired on several other digital media platforms including Better for Kenya, Facebook, Instagram and X (Twitter), making an important contribution from survivors towards breaking the silence, ending the stigma and holding duty bearers

Survivor personal stories video



accountable.

Survivor forums

Women's rising Initiative, an Isiolo-based medium grantee partner, has established forums specifically for survivors of FGM/C for them to cope with their traumatic experiences and work towards both physical and emotional recovery. One of the forums is in the form of therapy sessions for girls and women at different stages of their healing journey. The sessions provide a safe space for participants to share their experiences through telling their stories, and include wellness sessions, creative arts, group discussions and an introduction to

"Through such forums provided by Women Rising Initiative, we have an opportunity to support ourselves as survivors and strengthen our recovery through psychosocial support."

A participant from a therapy session

the importance of self-care, led by a qualified therapist.

Women's Rising Initiative also brings together mothers and daughters⁸ to help heal the mother-daughter relationship, often damaged by FGM/C. Safe spaces are created for daughters to understand why their mothers inflicted FGM/C on them and for mothers to share their own experiences and pain. A common reported theme is the belief that

"We are going to also educate other women and girls who are not with us here today about the effects of this act. I am one of those who were prepared to take our girls for the cutting but now we know better, and we won't practice. We are going to pass the information to every woman in the community. Galatoomaa (thank you)."

Participant in a WRI mother-daughter forum, Isiolo – see photo

FGM/C is prescribed by religion. These forums help to unpack these myths and discuss the harmful consequences of FGM/C.

One of Women's Rising Initiative's FGM/C activists took part in a TGG/ALM Survivors Leadership training (see the box on the next page for more information) before receiving the grant, which has equipped her with knowledge, skills, confidence and

Participant forum, Isiolo



TGG/ALM's Survivor Leadership Initiative

When adequately supported and empowered, survivors can take their rightful place as effective and compelling leaders in the movement to end FGM/C, while also protecting their well-being as individuals who have undergone a traumatic experience. The Survivors Leadership Initiative, also being implemented as part of TGG/ALM, is founded on training which draws on emotional wellbeing approaches developed and tested in 2018, and rolled out in Kenya in two stages (March 2022, with follow-up training with the same participants in November 2022) for 20 grassroots activists who are survivors of FGM/C. Survivors are the centre of the training which aims to:

- Provide sustainable emotional support for women and girls affected by FGM/C, including self-care approaches, to enhance prevention efforts and support survivors;
- 2. Promote the centrality of survivors' leadership in the end FGM/C movement by equipping and empowering survivors as leaders;
- Connect survivor-activists with one another, with funding opportunities, and with established networks and duty bearers who can help them achieve their goals; and
- 4. Break down stigma associated with FGM/C and emotional/mental health issues.

A recommendation from a recent SLT evaluation is to establish a grantmaking mechanism specifically for participants in the initiative, to support their subsequent social change and advocacy activities. TGG-ALM is currently reviewing the feasibility of this.

determination that has helped steer the organisation to support the end FGM/C movement and lead transformative local change.

Policy advocacy

Narok's anchor grantee partner, COVAW, has been providing support to fifteen youth leaders who have come together to petition Narok County to do more to end FGM/C. The youth group participated in a series of workshops organised by COVAW to equip them with skills

to pitch advocacy asks to policy-makers. The position paper entitled 'FGM As a precursor to Teenage Pregnancies and Child Marriages' aims to shed light on the detrimental consequences of FGM/C in Narok County and emphasises the urgent need for action to protect the rights and well-being of girls in the region. It includes facts and statistics on FGM/C; provides the country context and culminates with seven key asks towards ending FGM/C, protecting the rights and well-being of girls and women, and creating a society free from teenage pregnancies and child marriages. The

youth leaders aim to submit their end FGM/C position paper to the Narok County Assembly towards the end of this year.

The anchor grantee partners

The anchor grantee partners in Narok and Isiolo are also responsible for providing capacity development and guidance to the small and medium grantee partners in their project locations. Organisational capacity assessments of the grantee partners have been conducted under their auspices, followed by capacity development workshops focussed on financial management, reporting, managing risks, compliance and building and monitoring budgets.

Both anchors have also taken part in some other broader activities. COVAW has

"The findings are a true reflection of what is happening at the community level, women and girls are victims of the vice and a lot needs to be done to mitigate this challenge. We even feel the prevalence might be even higher than what has been shared"

GAC Member

conducted an FGM/C baseline assessment and convened a validation workshop of the findings with County representation as well as representatives from all Narok grantee partners and stakeholders.

The findings have informed many of the activities that grantee partners have been engaged in (see box below for some key findings).

COVAW has also commissioned research on the medicalisation of FGM/C in Masaai communities in Narok County, to influence the abandonment of FGM/C among health workers and to develop a road map on how to reach abandonment. A meeting was held with

Key findings of the research include:

Practitioners of FGM:

- 73.4% by Traditional Cutters
- 21.5% by Health Care Workers
- 5.1% by Traditional Birth Attendants

SWT capacity building session with grantee partners, Isiolo



Commitments made to address FGM medicalisation in Narok County

- 1. Sensitization of health workers on human rights approach and do no harm principle.
- 2. Surveillance and monitoring of private practitioners' and clinics' activities and acting on those who perform FGM
- 3. Integrating FGM advocacy information into healthcare services. E.g. During antenatal care visits.

health workers to share the findings, where commitments by COVAW and health workers were made. TGG/ALM plans to disseminate this research along with other research that has been conducted across the programme.

SWT commissioned a study to document stories of change among adolescent girls, young women, and reformed cutters in the community, which they intend to use to inspire change and encourage resilience and determination to end FGM/C: 'These stories serve as beacons of hope for others, showing that it is indeed possible to break free from deeply entrenched traditions. They provide role models and success stories that empower individuals within affected communities to challenge the status. The stories of change are persuasive tools for advocacy and awareness creation.' A series of the stories have been captured in a monthly newsletter published by SWT.

SWT recommendations for Isiolo grantee partners following capacity assessment.

- Organisational capacity building of the staff and board members
- Provision of hardware: laptops, computers; access to internet.
- Support core costs such as office rents, stationery and staff salaries
- Guidance and support on development of key operational and administrative policies: financial, human resource, procurement and strategic plan.
- Increase collaborations between organisations, like minded civil society organisations (CSOs) and the donors through trainings and exchange programs.
- Support on monitoring and evaluation of project activities to enhance project delivery and harvesting of good practices for future programming.

(SWT Capacity Needs Assessment Workshop, March 2023)

8. Key learnings

Community discussion platforms

Most learnings from the different community meetings relate to an increase in participants feeling freer and confident to talk about FGM/C, which is helping to break the silence around the practice. In Isiolo especially, there were more references to participants feeling reserved and shy to talk about FGM/C, which many people feel should not be discussed publicly, linked primarily to religious and cultural reasons. 'People whisper in silence to avoid the wrath of the community, not to conflict with the culture and religion'. However, with more community meetings convened and conversations encouraged, grantee partners reported increased acceptance and an openness to discuss FGM/C more publicly, despite the stigma.

Encouraging the involvement of men in end FGM/C discussion spaces was also recognised as important by several grantee partners, with some reporting an increase in the number of male participants attending their regular dialogue sessions.

"There is a lot of stigmatisation with regards to FGM/C issues within pastoralist communities and therefore making it difficult for the survivors to speak much about the FGM/C issues."

Ardha Jabesa Foundation, Small grantee, Isiolo

Community meetings are also opportunities to learn more about the harmful effects of FGM/C, thus are valued as important platforms for improved awareness and knowledge.

Radio and digital platforms as well as the survivor and mother-daughter forums use the voices and experiences of survivors to also create awareness, challenge beliefs and unpack myths about FGM/C. Being able to narrate personal experiences as survivors has also been reported as having a powerful positive effect on individual wellbeing.

"It is noted that ending FGM/C cannot be successful without roping in men and boys since they play the vital role in elimination of FGM/C. Men and boys are seen as key actors with a huge capacity to influence the prevalence of FGM/C in their communities."

Call for Change, Medium grantee Isiolo

Grantee partner capacity development:

a) Anchor partner perspectives: Following organisational capacity assessments in Isiolo by the anchor SWT, grantee partners were reported to be reasonably set up: they had boards (albeit with varying degrees of functionality) with designated leaders and deputies, although for most of the smaller grantee partners, the majority of staff worked on a voluntary basis. Some, most notably the medium grantee partners, are more established with more funding experience, and all had varying degrees of operational and financial procedures and structures. All reported they would benefit from additional capacity development support to manage their grants effectively and efficiently, and several mentioned the need for MEL support.

b) The ALM grassroots grant team perspectives: For many of the smaller grantee partners, the usual due diligence criteria had to be relaxed which has required more 'handholding' from the grants team during the on-boarding process. Although this was doable for the Kenya-based grants team, because direct access from Nairobi to the Narok and Isiolo-based grantee partners is relatively easy, it was clear this approach would not be sustainable whilst rolling out in other countries. In addition, anchor grantee partners have also had capacity challenges in fulfilling the full breadth of their role, putting more demands on an already stretched and lean grants team. In some instances, consultants have been used to fill these gaps. Learnings from the last year, coupled with plans to recruit additional staff, should ease grants-set up and implementation in other project locations.

Grants management

The grassroots grants mechanism has been more intensive than originally envisaged and some adaptations have been made to a) the grants team personnel and b) GAC management.

a) The grants team is in the process of being upsized in response to unforeseen additional support needs and demands to effectively and efficiently manage the grassroots grants mechanisms and provide the required MEL. In addition, it has also been a challenge for Amref to have both oversight of overall community implementation on the broader TGG/ALM programme, and to provide the required support to the community-based activities of grantee partners. In response, there is now a MEL lead and further recruitments are underway for additional multi-skilled field support staff to provide hands-on

- technical support (work planning, activity implementation, reporting and MEL) in each of the project locations.
- b) There has been a need to revisit, clarify and provide additional training on the role and mandate of the GAC resulting in some additional clauses added to their MoU as follows:
 - a. GAC Members will not hold direct communications with grantee partners.
 - b. Unexpected engagements between GAC members and grantee partners should be declared to the Grants Officer to be logged by the programme.
 - c. GAC Members sign a conflict of interest and code of conduct upon joining the programme.

Role of AMREF and ActionAid in the granting process: The grassroots grants mechanism was designed to complement the community interventions under Output 1 and collectively contribute towards a social movement to ending FGM/C. In practice, however, Amref and ActionAid were often delivering similar activities in the same locations raising concerns about duplication. A collective joint mapping of interventions and locations was conducted which has since resolved these concerns.

Reported challenges: A range of challenges were captured from the grantee partner reports which have been grouped under the themes in the next box.

Culture and tradition

- Entrenched cultural views from influential community members who are resistant to change.
- Religious leaders resistant to change and claim FGM/C is enshrined in religion.
- Discrimination and victimisation of FGM/C champions which risks them withdrawing away from the public movement.
- Stigma towards those who have not undergone FGM/C. It is also considered taboo to publicly and openly discuss FGM/C, especially reported in Isiolo among the pastoral communities.
- Community reluctant to speak out on FGM/C.

Health and service access

- Limited access to referral health and psychosocial services for girls and women at risk.
- Insufficient psychosocial support for survivors.
- Lack of rescue centres (safe places to protect girls who are trying to escape FGM/C or forced marriage).
- Concerns reported from both Isiolo and Narok grantees of an increase in the medicalisation of FGM/C (FGM/C performed by health care workers) [see also COVAW report on medicalisation of FGM/C in Narok County).

Administrative and operational

- Limited funds, staff and laptops to work effectively and efficiently.
- Delays in grant fund transfers, delaying activities.
- High expectation of handouts among community members.
- Inflation, high costs and difficulties to keep activities within budget.

Climate and geography

- Harsh climate affected community turnout for meetings.
- Drought in some areas caused tension as communities were more focused on livelihoods support than engaging in FGM/C advocacy meetings.
- Drought exacerbates vulnerabilities especially for girls and women.
- Some project locations are vast and many more rural and vulnerable communities are being left out of the movement.
- Travel in these areas is also hazardous and some roads are impassable.

Knowledge

Lack of knowledge about the law and FGM/C.

Reflections

Most of the learning so far relates to designing, setting up and implementing a grassroots grants mechanism in Isiolo and Narok. It is important to acknowledge that, despite some of the set-up challenges, the grassroots grants mechanism is managing to identify and disburse funds to groups who otherwise would not have had the resources to conduct the type of activities being implemented. The activities are also reaching the intended target groups with evidence that breaking the silence around FGM/C is happening. Spaces are being created for conversations to take place with a range of different community members and survivors are having the courage to share their experiences and speak. However, change takes time and so far, it is too early to conclude whether grantee partner activities are shifting norms and attitudes. Further capacity development, more robust MEL approaches, and time are required before richer learnings can be captured to reflect on what's working and what isn't working to end FGM/C.

Lastly, the grants team report that the process of rolling out the grassroots grants in new project locations is faster compared to Kenya, due to the application of lessons learnt and tools and processes developed in Narok and Isiolo.

Recommendations for TGG/ALM programme team:

1. Integrate grantee partners into programme learning processes, while acknowledging that the first year of implementation was focused on getting the basics in place. The next stage is to reflect on what is working and what is not working to shift attitudes, norms and practices to change behaviours. Are the approaches being used effective? Is there a need for grantee partners to have tailored social behaviour change communications training?

- 2. Strengthen the provision of leadership skills to the partner grantees including the anchor partners.
- 3. Encourage greater linkages between grantee partners and the wider TGG/ALM programme, e.g. COVAW conducted a study on FGM/C medicalisation: how can this be linked with ACCAF's work on integrating FGM/C prevention and care into preservice training for health professionals? Are grantee partners invited to AMREF or ActionAid trainings or activities that will enhance their activities? Are there other programme tools or curricula which could be shared, such as the school club aides?
- 4. Is there scope to extend the grant-making mechanism to the Survivors Leadership Initiative by building on the experiences of the grassroots grants? Can aspects of the initiative be integrated into the existing grantee partners' work?
- Consider how to support small grantee partners in acquiring or accessing basic structures like computers/laptops to enable them to generate reports and which may help them grow.
- The MEL team should explore how to link and cross-reference data and insights from the Longitudinal Panel with grantee partner reports.

The section below (Table 3) provides a snapshot of the grant mechanism's set-up in the other project locations, which took place after learning from the Narok and Isiolo experience.

Table 3: Summary of grants set-up in other focal countries

Senegal

Two scoping and validation exercises have been conducted for Sedhiou and Kolda Regions (with support from AMREF), and for Tambacounda and Kedougou regions (with support from ActionAid)

Grantee partner set up has commenced in the Tambacounda and Kedougou regions

10 grantee partners are on board who are either youth-led or focused on gender-based violence.

- Tambacounda: 1 small, 3 medium, 1 anchor
- Kedougou: 2 small, 2 medium, 1 anchor

GACs have been established, a grants inception workshop conducted and grants disbursed in October/November 2023.

The borders with the Gambia, Guinea Bissau, Guinea Conakry and Mali pose a key challenge in the end FGM/C movement; there is no legal framework (or lack of enforcement) in these countries therefore leading to an increase in cross-border FGM/C

Project locations are very remote and travel to project sites is challenging due to long distances. It has been a challenge to identify suitable anchor partners

These locations also do not have the same access to resources since they are far from urban areas and especially during wet weather they can be cut off from communications and transport

Lower grantee partner capacity compared to Kenya, which has required a longer due diligence process

Ethiopia

Project locations: Farte and Guna Woredas in the Amhara Region

Scoping and validation exercise conducted

6 grantee partners identified and contracts have been signed (Small: 3; Medium: 2; Anchor: 1)

An inception workshop has been held and the first round of funds were disbursed in September 2023

ActionAid is the leading ALM partner in Ethiopia

Security continues to be a challenge for the project

There is a national-level political commitment to ending FGM/C, but this is not always translated to sub-national level government departments where awareness and law enforcement are poor

Important to contextualise and translate Kenya-focused grants documents

Pre-award meeting is planned for Kolda and Sedhiou regions in March 2024

The Foundation for a Just Society International (FJSI) provide match funding to the value of USD1.5 million to the grassroots grants mechanism in Senegal; this has enabled some additional staff recruitment

FJSI have recommended to include more organisations that also work with disabilities

Somaliland

Scoping and validation exercise finalised in July 2023

Pre-award trainings and grantee partner applications have been submitted

There are plans to have 9 grantee partners but due to the conflict in the region and security challenges it is possible the project location may change

Inception workshop/training was conducted in February 2024

Project locations are very remote so limited infrastructure and connectivity

No policy/legal framework on FGM/C (something which programme partner ActionAid is advocating for at national level)

Garissa County, Kenya

Pre-award training conducted in May 2023

Grantee partner applications and due diligence completed by August 2023

7 grantee partners contracted - Small: 4; Medium: 2; Anchor: 1

Inception workshop/training took place in September 2023









References

- **1.** See https://options.co.uk/publication/the-girl-generation-impact-report-2017-2018/ for more details.
- 2. Lever, E., Miller, K. and Staszewska, K. (2020). Moving More Money to the Drivers of Change: How Bilateral and Multilateral Funders Can Resource Feminist Movements. AWID and Mama Cash with support from the Count Me In! Consortium: http://www.cmiconsortium.org
- 3. Note Grants Advisory Committees are sometime referred to as Grants Advisory Panels. The names are used interchangeably.
- 4. https://covaw.or.ke/
- 5. https://www.samburuwomentrust.org/
- 6. Medicalisation is the situation in which health care professionals carry out FGM/C, whether in a health facility or at home or elsewhere. (Source: UNICEF. Female Genital Mutilation/Cutting: A Statistical Overview and Exploration of the Dynamics of Change. New York: UNICEF; 2013)
- 7. International days are recognised by governemnts and UN bodies and are opportunities to generate awareness and demonstrate high level political support for issues. At sub-national level they provide opportunities to gather larger crowds for influential individuals to speak out, challenge norms and demonstrate their support to end FGM/C to larger audiences. The presence of political leadership also attracts media attention creating opportunities for wider message dissemination.
- 8. https://www.citizen.digital/news/shattered-by-the-cut-survivors-rise-above-the-psychological-effects-of-fgm-n318496

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