

REPUBLIQUE DU CAMEROUN
Paix-Travail-Patrie

MINISTERE DE LA PROMOTION DE LA FEMME
ET DE LA FAMILLE

SECRETARIAT GENERAL

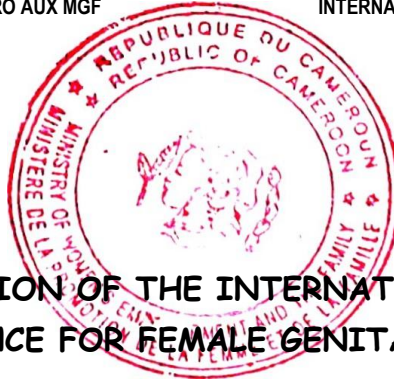
COMITE DE PILOTAGE DE LA 19^{EME} EDITION DE LA
JOURNEE INTERNATIONALE TOLERANCE ZERO AUX MGF

REPUBLIC OF CAMEROON
Peace-Work-Fatherland

MINISTRY OF WOMEN'S EMPOWERMENT
AND THE FAMILY

SECRETARIAT GENERAL

STEERING COMMITTEE OF THE 19TH EDITION OF THE
INTERNATIONAL DAY ZERO-TOLERANCE TO FGM



**19th EDITION OF THE INTERNATIONAL DAY
"ZERO-TOLERANCE FOR FEMALE GENITAL MUTILATION"**

6 February 2026

THEME:

***"INVESTING IN GIRLS AND COMMUNITIES FOR A FUTURE FREE
FROM FEMALE GENITAL MUTILATION"***

Terms of Reference

I. HISTORICAL BACKGROUND OF THE DAY

The “International Day of Zero-Tolerance for Female Genital Mutilation” was established in 2003 in Addis Ababa by the African Union, during the International Conference organised by the Inter-African Committee on Traditional Practices (IAC-TP) and at the initiative of the First Ladies of Africa. Celebrated on 6 February each year, this day was endorsed by the United Nations through the Economic and Social Council, and later in December 2012 by Resolution A/RES/67/146 of the United Nations General Assembly on “intensifying global efforts aimed at eliminating female genital mutilation”. From 2019 to 2023, the African Union implemented the SALEEMA initiative, which aimed at committing Member States to changing the negative social norms in which FGM is deeply rooted.

The United Nations recognises Female Genital Mutilation (FGM) as a grave violation of the human rights of women and girls because it constitutes a cruel, inhuman and degrading treatment under numerous international legal instruments. FGM specifically violates the principles set out in the Universal Declaration of Human Rights, the Convention on the Elimination of all forms of Discrimination against Women (CEDAW) and the Convention on the Rights of the Child (CRC). These instruments enshrine the right of women and girls to dignity, physical integrity and protection from all forms of violence.

II. CONTEXT AND JUSTIFICATION

Female genital mutilation (FGM) refers to all practices involving the partial or total removal of the external female genitalia or any other injury of the female genitalia for cultural or religious or any other non-medical reasons. The World Health Organisation (WHO) has classified FGM into types, namely:

- Type I (clitoridectomy): partial or total removal of the clitoris and/or the prepuce;
- Type II (excision): partial or total removal of the clitoris and labia minora, with or without excision of the labia majora;
- Type III (infibulation): narrowing of the vaginal orifice with covering by ablation and joining of the labia minora and/ or labia majora, with or without excision of the clitoris;
- Type IV: all other harmful practices performed on the female genitalia for non-medical reasons, such as pricking, piercing, incising, scraping, cauterising the genital organs/surrounding tissues or introducing corrosive substances, plants or other substances into it.

The persistence of FGM, also known as female genital cutting, is part of social and cultural dynamics deeply entrenched in gender relations and based on the demeaning of girls' status. Although this practice has patriarchal origins, it is not exclusively perpetuated by men. It is mainly carried out by male and female traditional practitioners, commonly known as excision practitioners. The fight against FGM therefore requires a comprehensive and multisector approach, aimed at preventing the practice among girls at risk, protecting potential victims, and providing medical, psychosocial and legal support to survivors suffering from lasting gynaecological, obstetric and psychosexual consequences.

The fight against FGM is a constant concern for the Government, reflecting the political will of the **Head of State, His Excellency Paul BIYA**, to end all forms of violence against women and girls.

In Cameroon, although the national prevalence rate remains relatively low, FGM persists in certain regions and communities, particularly in the Far North and South West Regions, and

among migrant populations in big cities like Yaounde and Douala. This persistence can be explained by socio-cultural factors, discriminatory social norms, poverty, illiteracy and gender inequalities. The results of the Demographic and Health Survey (DHS) conducted in 2011 indicate that FGM national prevalence rate stands at 1.4% and 20% in high-prevalence areas.

The Government, through the Ministry of Women's Empowerment and the Family and other partners, is making considerable efforts to eradicate this harmful practice. These include, among others:

- Implementing Resolution A/C.3/65/21Rev on intensifying global efforts to eliminate FGM, adopted in 2012 by the United Nations General Assembly;
- Adopting Law No. 2016/007 of 12 July 2016 on the Penal Code, with provisions relating to the repression of genital mutilation in Articles 277 and subsequent articles;
- Implementing the National Strategy to Combat Gender-Based Violence;
- Implementing the National Action Plan for the Elimination of FGM;
- Establishing and monitoring local committees to combat FGM under the coordination of administrative authorities;
- Capacity building for traditional and religious leaders, and community relays;
- Supporting the occupational transition of excision practitioners;

Despite all these actions, significant challenges remain, including persistent socio-cultural resistance, increased vulnerability of girls in areas at risk, need to strengthen the empowerment of communities, and insufficient sustainable resources to support prevention and protection actions.

II. EXPLANATION OF THE THEME

The 19th edition of the International Day Zero-Tolerance for FGM is a huge opportunity to speed up efforts to end this practice by 2030, by investing in girls and strengthening community-based mobilisation as key levers for lasting change.

This year's edition is commemorated under the theme: **“Investing in girls and communities for a future free from Female Genital Mutilation”**. This theme highlights the need to adopt a sustainable and inclusive approach to the total elimination of FGM. It is part of a structural commitment to the education, protection and empowerment of girls, while strengthening the capacities of communities. This theme underpins the view that eradicating this harmful practice cannot be achieved without targeted, coherent and continuous investment in girls, who are the main victims, and in communities, which are the real drivers of social change.

Investing in girls, is investing in our shared future. It consists of promoting their fundamental rights, guaranteeing their access to education, healthcare, protection and information. In a nutshell, it aims at building their capacity to know and exercise their rights, resist social pressures (early marriage and others) and become agents of change. The empowerment of girls and holistic management for survivors are therefore essential pillars in the fight against FGM.

Investing in communities consists of raising awareness and building the capacity of families, traditional and religious leaders, men and boys (positive masculinity), and other community actors, with a view to sustainably changing the social and cultural norms that

perpetuate FGM. This approach encourages the voluntary abandonment of harmful practices and the promotion of values that uphold human rights.

The eradication of FGM contributes to achieving Sustainable Development Goal (SDG) 5, namely: “achieve gender equality and empower all women and girls”. This SDG emphasises that the elimination of FGM is both a human rights requirement and a strategic investment in sustainable development. It calls for collective and coordinated action by States, partners, civil society and communities to build a future without FGM for girls and women.

IV. OBJECTIVES

1. General objective

Strengthening investment in girls and communities with a view to eradicating FGM.

2. Specific objectives

- Strengthening girls' education on their rights;
- Promoting girls' access to education and information;
- Strengthening investments in girls' economic empowerment;
- Strengthening the capacity of community and institutional actors in preventing, managing and fighting FGM;
- Popularising national, regional and international legal instruments relating to the elimination of FGM;
- Mobilising Technical and Financial Partners around sustainable investments for the abandonment of FGM.

V. EXPECTED RESULTS

- Girls are more aware of their rights;
- Girls' access to education and information has improved;
- Investments in girl's economic empowerment are strengthened;
- Capacities of community and institutional actors in preventing, managing and fighting FGM are strengthened;
- National, regional and international legal instruments are popularised;
- Technical and financial partners are mobilised for investments aimed at eliminating FGM.

VI. ACTIVITIES

- Official ceremony marked by a speech from the Minister of Women's Empowerment and the Family;
- Conferences, round tables, digital campaigns and programmes on FGM at national and local level;
- Educational talks and community dialogues in high prevalence areas;
- Organisation of socio-legal clinics within communities and associations across the country, particularly in high prevalence areas;
- Revitalisation of Local committees to fight against FGM;
- Distribution of dignity kits to survivors;

- Raising awareness among girls in both school and out-of-school settings of their rights;
- Advocacy for support from partners to update statistics on FGM in Cameroon and other related investments;

VII. SUB-THEMES

- FGM and girls' education;
- Communities' role in combating FGM;
- FGM and social norms;
- FGM and the health of girls and women;
- Positive masculinity and the fight against FGM;
- Legal framework for the repression of FGM in Cameroon;
- Economic empowerment of girls and women: a lever to end FGM.

VIII. STAKEHOLDERS

Stakeholders include the Ministry of Women's Empowerment and the Family, public administrations, regional and local authorities, administrative, traditional and religious authorities, civil society organisations, technical and financial partners, community leaders, men, boys, excision practitioners, victims/survivors, women and girls, communities where FGM is practised and the general population.

IX. VENUE AND PERIOD

Activities will take place across the country, with a special focus on areas with high prevalence rates of FGM. They may be extended throughout 2026.

X. GENERAL GUIDELINES

The reports on the activities carried out by the regions, central services and partners shall be submitted to the Steering Committee within fifteen (15) days after the celebration. A consolidated general report shall be submitted to hierarchy within thirty (30) days. Activities carried out after 6 February 2026 shall be subject to specific reports, which must be submitted as soon as possible to the central services of MINPROFF.

