

BORDERLESS FUTURES

Ending Cross-Border Female Genital Mutilation (FGM)



**A Knowledge Product by
Tunaweza Empowerment Organization
Kuria, Migori county Kenya– Tarime, Mara
Tanzania Borderlands**



FOREWORD

The fight against Female Genital Mutilation (FGM) continues even in the face of notable progress made over the years. While communities, governments and organizations have taken significant steps to protect girls and uphold their rights, the practice persists, often adapting to new challenges such as cross-border movement. This reality calls for renewed commitment, stronger collaboration and innovative approaches to ensure that no girl is left behind.

This booklet documents the collective efforts of stakeholders working tirelessly to end cross-border FGM. It highlights the power of partnerships between communities, civil society organizations and government institutions in addressing the complex dynamics that allow the practice to continue across borders. By sharing experiences, lessons learned and success stories, this publication serves as both a record of progress and a call to action for sustained intervention.

“Borders should not define a girl’s future.” This powerful reminder underscores the urgency of coordinated action beyond geographical boundaries. Every girl, regardless of where she is born or where she lives, deserves to grow up free from harm, with her dignity, health and rights fully protected. Ending cross-border FGM is not just a regional responsibility, it is a shared commitment to safeguarding the future of all girls.



“Borders should not define a girl’s future. Every girl, regardless of where she is born or where she lives, deserves the right to safety, dignity, education, and freedom from harmful practices. This cross-border movement is a testament to the power of unity among communities, governments, civil society, and development partners in protecting girls from FGM. Together, we are building a future where culture upholds the rights of women and girls rather than violating them. Our commitment remains unwavering until every border becomes a bridge of protection and hope for the next generation.”

Glory Ochola

**Executive Director,
Tunaweza Empowerment Organization**





ACKNOWLEDGEMENT

This report acknowledges the valuable contributions of all stakeholders who have been instrumental in the design, implementation and success of the Ending Cross-Border Female Genital Mutilation (FGM) intervention. Special appreciation goes to government agencies in both Kenya and Tanzania for their leadership, policy direction and continued commitment to strengthening child protection systems. Their efforts in promoting cross-border coordination, supporting enforcement mechanisms, and facilitating multi-sectoral collaboration have been central to the progress achieved so far.

Sincere gratitude is extended to AmplifyChange, Anti FGM Board, Association for Termination of FGM (ATFGM Masanga), C-Sema, AMREF health Africa, Power to Youth, NAYA kenya, UNICEF, UNFPA, Wallace global fund, Plan international Tanzania, Cross-Border Mutiniti CBO and Government officers from both countries and partners for their tireless dedication to community engagement, advocacy and capacity building. Their work in organizing dialogues, school programs, rescue operations and awareness campaigns has significantly contributed to changing attitudes and protecting girls at risk. The collaboration between these stakeholders has been vital in translating policy commitments and advocacy initiatives into practical action on the ground.

Appreciation is also given to the members of the Countering Cross-Border FGM Taskforce, notably Inspector Jane Agathe Wekesa HSC from Kenya and Inspector Claud Mtweve from Tanzania for their commitment to coordination, information sharing and joint action. This includes law enforcement officers, children's officers, health professionals, local administrators, community leaders and civil society representatives who have worked together to strengthen response mechanisms. Their collective efforts have improved rescue operations, enhanced case follow-up and reinforced accountability within communities affected by cross-border FGM.

Finally, this acknowledgment recognizes the courage and resilience of survivors, girls at risk, community champions and families who have chosen to stand against FGM despite cultural pressure and stigma. Their voices and experiences have played a critical role in driving change and inspiring communities to abandon the practice. Continued collaboration, dedication and shared responsibility among all stakeholders will remain essential in sustaining the gains made and achieving a future free from FGM.

EXECUTIVE SUMMARY

Cross-border Female Genital Mutilation (FGM) remains a major challenge in the Kuria region along the Kenya–Tanzania border, particularly between Kuria in Kenya and the Mara region in Tanzania. The practice persists due to the porous nature of the border, strong cultural ties among the Kuria communities living on both sides and deeply entrenched social norms that continue to uphold FGM as a rite of passage. Despite legal frameworks and ongoing interventions in both countries, families frequently move girls across the border during the cutting season to avoid detection and prosecution, making enforcement efforts complex and less effective.

The practice is often carried out secretly during the long December school holidays, a period traditionally associated with initiation ceremonies within the Kuria community. Because the Kuria clan occupies both sides of the border and shares common cultural beliefs, FGM ceremonies are sometimes coordinated simultaneously in Kenya and Tanzania. This cross-border dynamic creates significant protection challenges for girls, as perpetrators exploit jurisdictional gaps, limited surveillance and weak coordination among authorities. As a result, many girls remain vulnerable to the practice despite increased awareness and legal prohibitions.

This initiative seeks to address these challenges through strengthened cross-border collaboration and coordinated action among key stakeholders. The program brings together government agencies, community leaders, law enforcement officers, civil society organizations, religious leaders, women and youth groups and child protection actors from both countries to create a unified response against FGM. By fostering information sharing, joint planning, coordinated rescue efforts and harmonized prevention strategies, the initiative aims to reduce opportunities for perpetrators to exploit the border and evade accountability.

In addition, the initiative focuses on enhancing protection mechanisms for girls at risk while promoting long-term social norms transformation within affected communities. Community dialogues, awareness campaigns, school engagement, survivor advocacy and alternative rites of passage are among the strategies used to challenge harmful cultural beliefs and encourage positive change. Through sustained collaboration and community ownership, the initiative envisions a future where girls on both sides of the Kenya–Tanzania border are protected, empowered and able to grow up free from violence and harmful traditional practices.



GENESIS OF THE CAMPAIGN

The genesis of the campaign against cross-border Female Genital Mutilation (FGM) can be traced back to the landmark 2019 Inter-Ministerial Meeting held in Mombasa. The meeting brought together representatives from Kenya, Tanzania, Uganda, Ethiopia and Somalia to collectively address the increasing challenge of cross-border FGM. The forum recognized that the movement of girls across national borders to evade prosecution had become a growing concern that could not be effectively addressed by individual countries acting alone. As a result, participating states committed themselves to a coordinated regional approach aimed at eliminating the practice and strengthening the protection of girls and women across the region.

The Mombasa meeting marked a significant turning point in the fight against FGM because it created a platform for governments to openly discuss shared challenges, lessons learned, and opportunities for collaboration. Delegates acknowledged that porous borders, shared ethnic identities, and deeply rooted cultural practices were enabling perpetrators to continue conducting FGM despite national laws banning the practice. The meeting therefore emphasized the need for stronger partnerships, harmonized interventions, improved information sharing and joint accountability mechanisms among neighbouring countries affected by cross-border FGM.

Following the resolutions made during the meeting, participating countries began cascading these commitments to national, county and community levels. Governments worked toward aligning policies, strengthening legal and child protection frameworks and enhancing collaboration between security agencies and community structures. At the local level, stakeholders engaged elders, religious leaders, women groups, youth champions and civil society organizations to translate the commitments into practical actions that could directly address the realities faced by communities vulnerable to cross-border FGM.

In the Kenya-Tanzania border region, particularly within the Kuria and Mara communities, local organizations and government actors took deliberate steps to operationalize these commitments. Tunaweza Empowerment, working in collaboration with Association for Termination of FGM (ATFGM Masanga), C-Sema, the Cross Border Mutiniti CBO, AMREF Health Africa, Power to youth project, UNICEF, UNFPA, NAYA Kenya, Plan International Tanzania, Wallace Global Fund and key government officials from Migori County and the Tarime area in Tanzania, played a critical role in bringing the regional commitments into action. These stakeholders recognized that sustainable progress would only be achieved through coordinated efforts that involved both sides of the border and directly engaged affected communities.

One of the major outcomes of these collaborations was the establishment of the Countering Cross-Border FGM Taskforce. The taskforce was formed to strengthen coordination among stakeholders, facilitate information sharing and drive joint interventions aimed at preventing FGM and protecting girls at risk. Over time, the taskforce has become an important platform for collaboration between government agencies, law enforcement officers, community leaders, civil society organizations and child protection actors. Through joint planning, rescue operations, awareness campaigns and advocacy initiatives, the taskforce continues to play a central role in advancing the collective vision of ending cross-border FGM and safeguarding the rights and dignity of girls across the region.

"The Ending Cross-Border FGM Campaign was born out of the painful reality that many girls continued to face the threat of FGM across porous borders despite national efforts to end the practice. It became clear that no single country or institution could address this challenge alone. The campaign therefore emerged as a united call for regional cooperation, community action, and stronger protection systems to safeguard every girl at risk."

Inspector Agatha Wekesa

Former Task force coordinator



CONTEXT AND PROBLEM

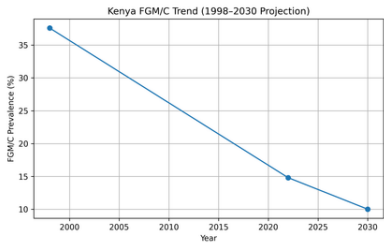
The prevalence of Female Genital Mutilation/Cutting (FGM/C) in Kenya has significantly decreased over the last two decades. According to the Kenya Demographic and Health Survey (KDHS) 2022 report, the prevalence of FGM/C among women aged 15 to 49 was 37.6% in 1998 and decreased to 14.8% by 2022. Projections indicate that this rate is expected to decline further to around 10% by 2030. This decline reflects concerted efforts by government agencies, non-governmental organizations, and community-based organizations working collaboratively to eradicate the practice. Despite progress, FGM/C remains prevalent in specific ethnic and geographic hotspots, particularly among the Somali (86.9%), Kisii (70.3%), Maasai (56.7%), and Samburu (75.9%) communities. In Migori County, where this outcome harvesting activity took place, the prevalence of FGM/C is 20%, which is higher than the national average. Challenges persist due to the medicalization of FGM/C, cross-border FGM practices and uneven progress in decreasing the severity of cutting types.

Female Genital Mutilation/Cutting (FGM/C) in Tanzania has an estimated national prevalence of about 8–10% among women aged 15–49, reflecting a steady decline from nearly 18% in the mid-1990s, with significantly lower rates among younger women, indicating gradual abandonment of the practice. However, FGM remains highly concentrated in specific regions, particularly in northern and central Tanzania. The Mara Region, which borders Kenya, stands out with a high prevalence estimated at around 32%, making it one of the country's hotspots. This elevated rate is closely linked to cross-border cultural practices, shared ethnic traditions and mobility across the Kenya–Tanzania border, which continue to sustain FGM despite national legal prohibitions and prevention efforts.

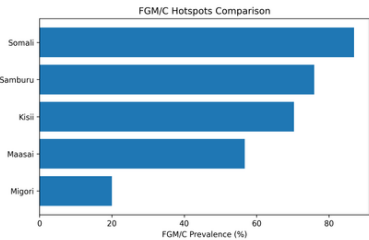
Kenya's legal framework is strong, with the Prohibition of Female Genital Mutilation Act (2011) and other important laws and policies such as the Children Act (2022) and the National Policy for the Eradication of Female Genital Mutilation (2019) supporting anti-FGM/C efforts. Additionally, there is solid political commitment shown by the creation of the Anti-FGM Board, inter-ministerial coordination, and active government involvement, including presidential declarations supporting the abandonment of this harmful practice.

Community-led interventions, often driven by CBOs, are a vital part of the comprehensive strategy against FGM/C. These local organizations engage in behaviour change communication, community dialogues, advocacy and the development of alternative rites of passage, addressing the socio-cultural beliefs that support FGM/C practices. Understanding the specific changes in behaviours, relationships, practices and policies within affected communities and how these local interventions contribute to these outcomes is essential for guiding future programs and policies.

Migori County, particularly Kuria East and Kuria West sub-counties and neighboring Tarime district of Tanzania remain a hotspot for Female Genital Mutilation/Cutting (FGM/C), child marriage and related forms of gender-based violence. These practices are deeply embedded in cultural identity, rites of passage and patriarchal decision-making structures. Despite Kenya's strong legal framework, enforcement gaps, secrecy and cross-border movement into neighboring Tanzania continue to undermine eradication efforts.



"Kenya has made significant progress in reducing FGM/C prevalence, declining from 37.6% in 1998 to 14.8% in 2022, with further reductions projected by 2030."



"Despite national progress, FGM/C remains highly prevalent in some communities, highlighting the need for targeted interventions and community-led prevention efforts."

SITUATION ANALYSIS

Female Genital Mutilation (FGM) in the Kuria cross-border region between Kenya and Tanzania continues to be practiced in secrecy, making it difficult to detect and prevent. Families and practitioners often conduct the practice in hidden locations, away from the reach of law enforcement and child protection systems. This secrecy is reinforced by strong cultural beliefs and community pressure, which discourage reporting and enable the practice to persist despite ongoing interventions. Some of the identified hotspot boarder areas include; Ntimaru, Rewanke, Mutiniti, Nyansincha, Masangora, Motemorabu, Gokeharaka, Makararangwe, Mashangwa.

The situation is further complicated by the porous nature of the Kenya–Tanzania border, which allows families to move girls across countries to evade arrest or scrutiny. In response, governments and partners have intensified surveillance and rescue efforts, leading to the successful identification and rescue of hundreds of girls at risk. These rescues highlight both the scale of the problem and the critical importance of cross-border collaboration in protecting vulnerable children.

A notable pattern in the practice of FGM within the Kuria community is its timing. The cutting season typically coincides with the long December school holidays, when girls are out of school and therefore more vulnerable. During this period, the practice is often conducted simultaneously on both sides of the border, reflecting the shared cultural identity of the Kuria clan, which is also predominant in the Mara region of Tanzania. This synchronization makes it easier for families to coordinate and conceal the practice across borders.

Despite increased awareness and enforcement efforts, the continued occurrence of FGM during this peak season underscores the need for sustained, targeted interventions. Strengthening community engagement, enhancing early warning systems and intensifying cross-border coordination during the December period are essential to prevent new cases. Addressing the deeply rooted cultural drivers while ensuring consistent protection mechanisms on both sides of the border remains key to eliminating FGM in the region.



“Cross-border FGM remains one of the greatest challenges in protecting girls because perpetrators take advantage of porous borders and cultural ties between communities. Strengthening regional cooperation, law enforcement coordination, and community awareness is critical in ensuring that every girl is protected from this harmful practice.”

Inspector Claud Mtwewe
Taskforce coordinator

KEY ACTIVITIES

• Taskforce meetings

Taskforce meetings held quarterly and on need basis have strengthened coordination and collaboration among stakeholders working to end cross-border FGM. The Countering Cross-Border FGM Taskforce brings together government officials, law enforcement agencies, civil society organizations, community leaders, health workers and child protection actors from both Kenya and Tanzania. Through regular meetings, stakeholders share information, review emerging trends, coordinate interventions and plan joint activities aimed at preventing FGM and responding to cases effectively. These meetings have improved communication across the border and enhanced the ability of stakeholders to respond swiftly during high-risk periods. The task force is co chaired by the Migori county commissioner in Kenya and Regional commissioner from Tanzania. It also coordinated by two coordinators from the police service in Kenya and Tanzania. The taskforce is also supported by two focal persons from a CSO in Kenya and Tanzania.



"The Cross-Border Taskforce has played a pivotal role in strengthening collaboration between communities, government agencies, civil society organizations and law enforcement actors across the Kenya–Tanzania border in the fight against Female Genital Mutilation (FGM). Through coordinated surveillance, information sharing, joint rescue efforts, community dialogues, regular taskforce meetings and joint advocacy initiatives, the Taskforce has significantly reduced opportunities for cross-border cutting, enhanced protection of girls at risk and promoted a unified commitment to ending FGM. Its work has demonstrated that sustainable change is possible when stakeholders work together beyond borders to safeguard the rights and dignity of girls."

Michael Marwa

Executive Director C-Sema, Tanzania.

• Rescue interventions

Rescue interventions for girls at risk have been critical in providing immediate protection and safety to vulnerable children. During cutting seasons, particularly in December, rapid response mechanisms are activated to identify and rescue girls facing imminent risk of FGM or forced marriage. Community members, teachers, local administrators and child protection volunteers often work together to report cases and support rescue operations. Rescued girls are provided with temporary shelter, psychosocial support, counselling, medical assistance, and in some cases reintegration support to help them continue with education and rebuild their lives in a safe environment. This has been made possible through creation of temporary rescue centres in schools and churches in Kenya and at ATFGM Masanga safe house in Tarime Tanzania.

"Every girl rescued from the threat of FGM is a life protected and a future restored. Through our cross-border rescue initiative, we have provided vulnerable girls with safety, care, and hope at the Masanga Safe House, ensuring they are protected from harmful practices and given an opportunity to continue with their education and dreams. Our commitment is to stand with every girl at risk until communities fully abandon FGM."

Valerian Mgani

ATFGM Masanga



- **Community dialogues**

Community dialogues have been one of the most important activities in addressing cross-border Female Genital Mutilation (FGM) within the Kuria and Mara communities. These dialogues create safe spaces where elders, parents, religious leaders, women, youth and survivors openly discuss the harmful effects of FGM and the importance of protecting girls' rights. Through regular engagement sessions held in villages and border communities, harmful cultural beliefs and myths surrounding FGM are challenged while encouraging communities to embrace positive social norms. The dialogues also strengthen community ownership of the anti-FGM campaign by ensuring that local voices are involved in identifying solutions and promoting collective responsibility in safeguarding girls.

- **Case follow-up**

Case follow-up has been essential in ensuring accountability and providing continued support to survivors and at-risk girls. Stakeholders in this taskforce work closely with law enforcement agencies, children's departments, legal actors and community structures to monitor reported cases and ensure appropriate action is taken against perpetrators. Follow-up activities include monitoring court proceedings, tracing survivors, conducting home visits and linking affected girls with social support services. These efforts help reduce impunity, strengthen trust in reporting mechanisms, and reinforce the message that FGM is a violation of human rights and a punishable offense under the law.

- **Media outreach**

Media outreach has further amplified the anti-FGM campaign by increasing public awareness and promoting community dialogue on a wider scale. Radio programs, television discussions, social media campaigns, community theatre, and public awareness forums have been used to educate communities on the dangers and legal consequences of FGM. Local media platforms have also provided survivors, activists, religious leaders, and government officials with opportunities to share testimonies and advocate for the abandonment of the practice. Through consistent media engagement, the initiative has helped challenge harmful norms, encourage reporting of cases, and strengthen public support for ending cross-border FGM in the region. In this journey we have walked with media stations including Citizen Tv, Togotane Radio, Pure Africa radio in Kenya and cleo tv, sachita and radio free Africa in Tanzania.



- **Law Enforcement**

Law enforcement agencies on both sides of the Kenya–Tanzania border have made significant progress in improving coordination in the fight against cross-border Female Genital Mutilation (FGM). Through joint meetings, information sharing and collaboration with police officers, local administrators, children's officers, immigration personnel and civil society organizations, authorities have strengthened surveillance and response mechanisms during high-risk periods. Cross-border communication between security teams has enhanced the tracking of suspected perpetrators and improved the rescue of girls at risk. These coordinated efforts have also increased awareness among officers regarding child protection laws and the importance of handling FGM-related cases with urgency and sensitivity.

Despite these achievements, several challenges continue to hinder effective law enforcement interventions. The porous nature of the Kenya–Tanzania border allows families and perpetrators to move girls across unofficial crossing points, making detection and monitoring difficult. In addition, strong cultural support for FGM within some communities often discourages reporting, limits cooperation with authorities, and sometimes leads to concealment of planned cutting ceremonies. Fear of retaliation, stigma and community pressure also prevent some families and survivors from openly supporting legal action against perpetrators. These factors continue to undermine efforts to fully eliminate cross-border FGM.

Limited resources and logistical constraints further affect the effectiveness of law enforcement operations in remote border areas. Inadequate transport, insufficient personnel, language barriers, and limited funding for joint operations reduce the ability of officers to conduct timely patrols, rescues and follow-up investigations. Differences in legal processes and enforcement procedures between the two countries can also delay prosecution and weaken accountability. To address these gaps, there is continued need for stronger bilateral cooperation, increased investment in child protection systems, enhanced community trust in law enforcement agencies and sustained capacity building for officers handling cross-border FGM cases.





The Ending Cross-Border FGM intervention has contributed significantly to increased awareness and behavioural change within communities along the Kenya–Tanzania border. Through continuous community dialogues, school outreach programs, media campaigns and engagement with local leaders, many community members now have a better understanding of the harmful physical, psychological and social effects of Female Genital Mutilation (FGM). The intervention has helped challenge long-held cultural beliefs that normalized the practice, encouraging parents, elders, and youth to openly speak against FGM and support the protection of girls. This gradual shift in attitudes has strengthened community participation in prevention efforts and increased acceptance of alternative approaches that uphold the rights and dignity of girls.

Another major impact of the intervention has been the increased protection and support provided to girls at risk of FGM and child marriage. Rescue mechanisms and referral pathways have been strengthened, allowing vulnerable girls to access safe shelters, counselling services, education support, healthcare and legal assistance. Community members, teachers and local leaders are now more willing to report suspected cases and support rescue efforts. As a result, many girls who might otherwise have undergone FGM have been protected and empowered to continue their education and pursue their future aspirations in safer environments.

The initiative has also amplified the voices of survivors, women leaders, youth champions, and anti-FGM advocates within affected communities. Survivors who were once silenced by fear and stigma are increasingly sharing their experiences to educate others and inspire change. Young people have emerged as influential advocates through peer education, school clubs, and community campaigns, helping to promote positive social norms among their peers. Religious and cultural leaders who support the abandonment of FGM have also become key champions in influencing community attitudes and encouraging families to protect girls from harmful practices.

The establishment of the Countering Cross-Border FGM Taskforce stands out as one of the most significant achievements of the intervention. The taskforce brought together key stakeholders from both Kenya and Tanzania, including government officials, law enforcement agencies, civil society organizations, child protection actors, health workers, religious leaders, community elders, women representatives, and youth champions. By creating a structured platform for collaboration, the taskforce strengthened coordination and ensured that stakeholders could collectively address the complex and transnational nature of cross-border FGM. This unified approach has helped bridge gaps that previously existed between institutions and across borders.

The taskforce has played a critical role in improving information sharing, joint planning, and rapid response to emerging FGM cases within border communities. Regular meetings and coordinated activities have enabled stakeholders to identify high-risk areas, monitor cutting seasons, organize rescue operations, and conduct joint awareness campaigns more effectively. The platform has also enhanced trust and cooperation between communities and authorities, making it easier to report suspected cases and mobilize timely interventions. Through these collaborative efforts, the taskforce has strengthened the overall effectiveness and sustainability of anti-FGM interventions in the region.

The intervention has further contributed to improved law enforcement and accountability in addressing FGM-related cases. Increased collaboration between police officers, local administrators, immigration officials, and children's departments has enhanced surveillance and monitoring along border areas. Authorities are now better equipped to identify high-risk situations, investigate cases, and take action against perpetrators. Although challenges remain, the strengthened legal response has sent a strong message that FGM is a violation of human rights and a punishable offense, helping to deter some families and practitioners from openly conducting the practice.

Beyond coordination, the taskforce has become an important advocacy and accountability mechanism in the fight against cross-border FGM. It has provided a collective voice for stakeholders to engage policymakers, mobilize resources, and advocate for stronger protection systems for girls at risk. The taskforce has also contributed to strengthening bilateral relationships between Kenya and Tanzania by promoting shared responsibility and commitment toward ending FGM. Its existence demonstrates the value of multi-sectoral partnerships in addressing harmful cultural practices and has created a strong foundation for continued regional cooperation and long-term social transformation.

Overall, the Ending Cross-Border FGM intervention has laid a strong foundation for long-term social norms transformation and regional cooperation in the fight against FGM. While the practice has not been fully eliminated, the intervention has created stronger systems for prevention, protection, response and advocacy within border communities. The increased collaboration between communities and institutions has demonstrated that collective action can significantly reduce vulnerabilities and strengthen the protection of girls. Continued investment, sustained partnerships, and community ownership will remain essential in ensuring that future generations grow up free from FGM and other forms of gender-based violence.



CHALLENGES

- **Porous Cross-Border Movement**



The porous Kenya–Tanzania border remains one of the biggest challenges in ending cross-border FGM. Families and perpetrators often move girls across unofficial border points to evade arrest and prosecution. The shared cultural identity of the Kuria community on both sides of the border makes it easier to organize and conduct FGM ceremonies secretly, especially during the December holiday season.

- **Deeply Rooted Cultural Beliefs and Social Pressure**



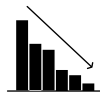
FGM continues to be sustained by strong cultural traditions and social expectations within affected communities. Many families still consider the practice a rite of passage, a symbol of honour, and a requirement for marriage. Community pressure from elders and relatives discourages families from abandoning the practice and often forces the procedure to be conducted in secrecy.

- **Limited Resources and Logistical Constraints**



Stakeholders involved in prevention, rescue, and response efforts face challenges related to inadequate funding, limited transport, insufficient safe shelters, and lack of personnel. The remote nature of many border areas and poor infrastructure make it difficult to conduct regular patrols, rescue operations, and follow-up activities effectively.

- **Low Reporting and constrained Law Enforcement Support**



Fear of retaliation, stigma, and mistrust of authorities discourage many community members from reporting FGM cases. Survivors and witnesses are often reluctant to testify against perpetrators, resulting in low prosecution and conviction rates. Differences in legal and enforcement systems between Kenya and Tanzania also weaken coordinated action and create gaps that perpetrators exploit.

“One of the greatest challenges facing the Ending Cross-Border FGM Campaign is the deep-rooted cultural acceptance of the practice within some communities, which often leads to secrecy and movement of girls across borders to evade the law. Limited resources, porous borders, and fear of reporting cases also continue to hinder timely interventions. Sustained community engagement and stronger regional collaboration remain critical in overcoming these challenges.”

Moses Gikaro

Founder Crossborder Mutiniti CBO.



LESSONS LEARNED

- **Cross-Border Collaboration is Essential**

One of the key lessons from the intervention is that cross-border FGM cannot be effectively addressed through isolated efforts by one country or institution. Strong collaboration between Kenya and Tanzania, involving government agencies, law enforcement, civil society organizations, and community leaders, has proven critical in improving coordination, information sharing, rescue operations, and joint prevention efforts. The intervention demonstrated that regional partnerships are necessary to address the transnational nature of FGM and close gaps exploited by perpetrators.

- **Community Engagement Drives Sustainable Change**

The intervention showed that meaningful and lasting change can only be achieved when communities themselves are actively involved in the fight against FGM. Engaging elders, religious leaders, women groups, youth champions, teachers, and survivors through dialogues and awareness programs helped challenge harmful cultural beliefs and encouraged collective responsibility in protecting girls. Community ownership of anti-FGM initiatives increased acceptance of alternative norms and strengthened local support for abandoning the practice.

- **Multi-Sectoral Approaches Strengthen Protection Systems**

Another major lesson is that ending FGM requires coordinated action across multiple sectors, including education, child protection, health, law enforcement, and media. School programs, rescue services, psychosocial support, legal follow-up, and media advocacy worked together to provide comprehensive prevention and protection mechanisms for girls at risk. The intervention demonstrated that combining prevention, response, advocacy, and survivor support creates stronger and more sustainable systems for combating cross-border FGM.

- **Multi-Sectoral Approaches Strengthen Protection Systems**

The establishment of a regional law to curb cross-border FGM among East African countries would provide a stronger and more coordinated framework for preventing the practice across national boundaries. Such a law would harmonize existing anti-FGM policies and legal penalties among countries including Kenya, Tanzania, Uganda, Ethiopia and Somalia, making it difficult for perpetrators to exploit legal loopholes by moving girls across borders during cutting seasons. The regional law would strengthen cross-border surveillance, information sharing, extradition of offenders, joint rescue operations and protection mechanisms for girls at risk. It would also promote collaboration among law enforcement agencies, immigration officers, child protection actors, community leaders and civil society organizations to ensure a unified response against FGM. Through regional cooperation under bodies such as the East African Community, member states would be better positioned to uphold the rights, dignity, health and safety of women and girls while accelerating efforts toward the elimination of FGM across the region.



"The sustainability of the Ending Cross-Border FGM Campaign lies in building strong community ownership, empowering local champions, strengthening cross-border partnerships, and investing in continuous awareness creation among young people and cultural leaders. When communities themselves become protectors of girls' rights, the movement against FGM becomes lasting and transformative beyond project timelines."

Vincent Mwita

Head of programmes
Tunaweza Empowerment Organization

CONCLUSION

The Ending Cross-Border FGM intervention has demonstrated the importance of regional cooperation, community engagement, and multi-sectoral partnerships in addressing harmful cultural practices that transcend national boundaries. Through coordinated efforts involving government institutions, civil society organizations, law enforcement agencies, community leaders, schools, and the media, significant progress has been made in raising awareness, strengthening protection systems, rescuing girls at risk, and improving accountability for perpetrators. The establishment of the Countering Cross-Border FGM Taskforce further strengthened collaboration and created a platform for sustained joint action between Kenya and Tanzania in the fight against FGM.

Despite the progress achieved, challenges such as porous borders, deeply rooted cultural norms, limited resources, and low reporting of cases continue to hinder the complete elimination of FGM in the region. Sustained commitment from all stakeholders will therefore remain essential in ensuring long-term change and protecting future generations of girls. Continued investment in community education, survivor support, law enforcement coordination, and economic empowerment initiatives will be critical in addressing the root causes of the practice. With strengthened partnerships and continued community ownership, there is hope for a future where all girls can grow up safe, empowered, and free from Female Genital Mutilation.





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