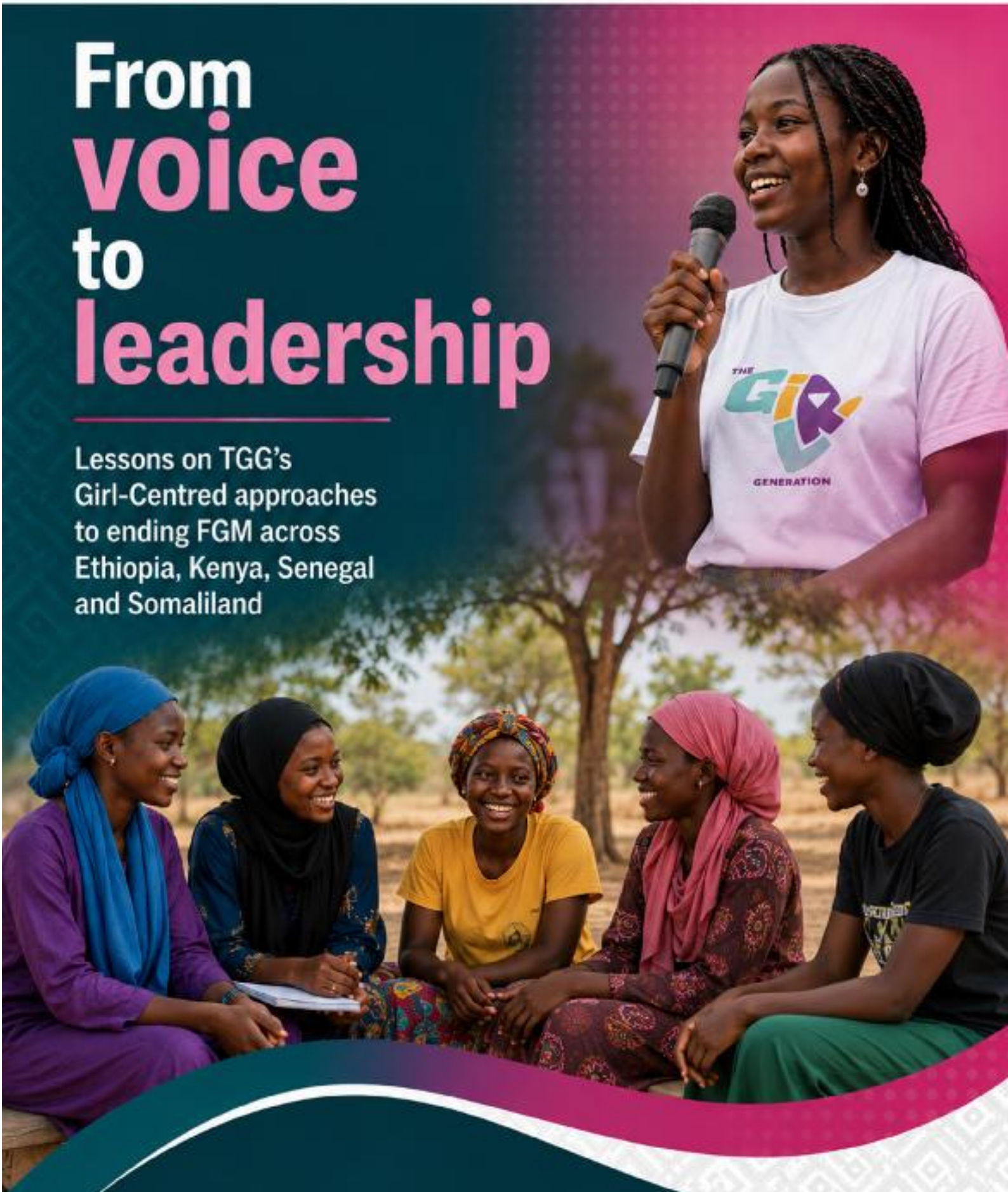
African Population and Health Research Center

Learning brief

June 2026

From voice to leadership

Lessons on TGG's Girl-Centred approaches to ending FGM across Ethiopia, Kenya, Senegal and Somaliland



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This brief has been funded by UK International Development from the UK government; however, the views expressed do not necessarily reflect the UK government's official policies

Introduction

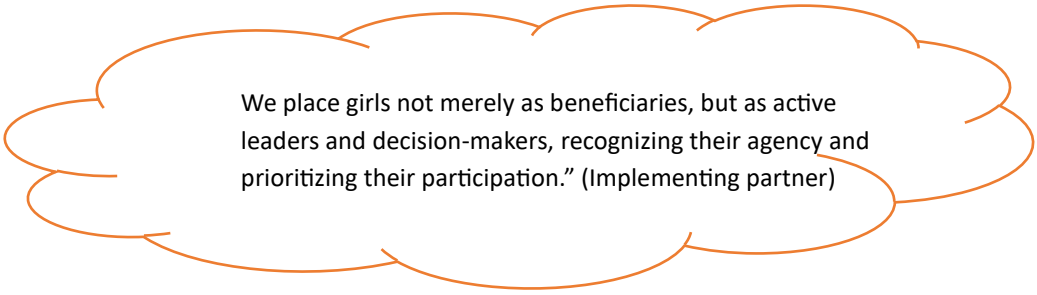
Overview of the programme and the girl-centred approach

The Girl Generation – Support to the Africa-Led Movement to End Female Genital Mutilation (FGM)[1] (TGG-ALM) programme is funded by UK International Development and supports locally led action to end FGM across Kenya, Ethiopia, Senegal, and Somaliland. Implemented by a consortium led by Options, including Amref Health Africa, ActionAid, Orchid Project, and the Africa Coordination Centre for the Abandonment of FGM, TGG-ALM works closely with Population Council's Data Hub, the programme's data and measurement arm.

TGG-ALM was established to contribute to global efforts to meet the vision of a world free from FGM by 2030. Its broader vision is a world where girls and women can exercise their power and rights, have expanded choice and agency, and be free from all forms of violence.

The girl-centred approach[2] is a foundational pillar of TGG-ALM. The girl-centred approach emphasizes the centrality of girls' voices, participation and implementation at every stage. It also recognises girls and young women with lived experience of FGM as partners in change, informing programme design and implementation and strengthening advocacy for sustained social norm change.

In practice, this approach combines empowerment activities with healing and referral where needed, alongside advocacy and community accountability processes, recognising girl champions as critical actors in sustaining norm change to end FGM.



From 2022 to 2025, TGG-ALM implemented girl-centred approaches in Ethiopia, Kenya, Senegal, and Somaliland through activities such as:

- School and girls' clubs
- Peer-to-peer sessions for girls, boys, and young people
- Girls' councils and leadership forums;
- Safe spaces designed using TGG's Safe Space Checklist
- Supporting girls to conduct (or contribute to) social change activities in their communities (e.g. awareness raising sessions, dialogues)

[1] A note on language: throughout this report, the term FGM is used by the authors. However, where direct quotations from respondents are included, the most direct translation of the term for FGM is used, which may be, for example, 'female circumcision, circumcision or cut'. Names and other identifying features of respondents (e.g. case studies, in quotations) have been changed.

[2] Read more on the girl-centred framework used by the programme here: https://thegirlgeneration.org/wp-content/uploads/2024/04/GCF_practical_guide_v4.0.pdf

- Intergenerational dialogue forums (e.g., daughter-to-mother and daughter-to-father).

This learning brief synthesises the outcomes observed on girls' agency and leadership, and practical lessons to strengthen future programming. It draws on quantitative and qualitative data collected in Ethiopia, Kenya, Senegal, and Somaliland with various stakeholders, including girl champions, programme implementers, and community leaders.

Key findings and learnings

The endline evaluation findings demonstrate that the approach has fostered the development of anti-FGM girl champions while catalysing individual and community-level transformations that are reshaping the FGM landscape in the intervention areas. The findings further provide insights into the pathways to these changes.

Building champions begins with reframing FGM as a rights violation

In contexts where FGM is normalized, TGG-ALM supported training enabled girls to critically reassess FGM by strengthening their understanding of rights and its health consequences. This was done through school clubsand peer-to-peer sessions in the community. This shifted perceptions of FGM from a cultural expectation to a violation, laying the foundation for individual and collective resistance.

> *"I used to believe that FGM was a normal practice… I now realize that FGM is a form of violence… I have made it my mission to educate my neighbours…" (Girl, Sool, Somaliland)*

Reframing experiences strengthens girls' self-worth and purpose

For girls who had undergone FGM, empowerment sessions shifted their self-perception, moving them from passive acceptance of FGM to a sense of agency and purpose towards ending FGM. By reinterpreting their lived experiences, many successfully channelled personal harm into a powerful motivation for change, significantly improving their self-esteem and overall psychosocial well-being.

> *"From my own suffering, I educate them about the harm it causes… to prevent others from going through the same." (Girl champion, Farta, Ethiopia)*

Confidence-building translates into leadership and peer influence

As confidence increased, girls moved from awareness to action, engaging peers, families, and community members in informal conversations and dialogues. They began to occupy public spaces, share their experiences, and advocate against FGM, demonstrating that building voice and leadership is critical for translating knowledge into norm change.

> *Whenever I'm given the opportunity… I speak with boldness… knowing that I'm speaking on behalf of other 10,000 voices… (Girl Champion, Narok)*

The quantitative data strongly support this transformation. There was a substantial increase in the agency to oppose FGM among those exposed to the intervention,

- In **Garissa**, they were about **5 times more likely** (4.79) to oppose FGM compared to those non-exposed.
- In **Ethiopia**, they were about **2½ times more likely** (2.56) to have agency to oppose FGM
- In **Senegal**, they were about **5 times more likely** (5.22)
- This variable (Agency to oppose FGM) was however not investigated in Somaliland, Narok and Isiolo.

This goes to show that girls and women who were the majority of the respondents became empowered to voice out their opposition, becoming champions and advocates towards ending FGM.

In many settings where FGM is prevalent, unequal gender norms restrict girls' participation in community decision-making. Quantitative measures show that holding gender-unequal beliefs was seen as the most challenging outcome in the efforts to end FGM with no significant difference in those exposed to TGG interventions vs non exposed in Garissa (Odds 0.9, p-value=0.8) and Senegal (Odds 1.06, P-value= 0.8), while the communities in Ethiopia reported better gender-equal outcomes for those exposed to the interventions vs non-exposed (Odds 0.23 p-value= 0.002). Odds close to 1 show likelihood of similar effects between intervention and control while p-value is considered significant if below 0.05.

Through the TGG-ALM activities the girls found platforms where they could speak, be heard and increasingly respected. This contributed to gradual shifts in how communities perceived girls' authority and contributions to discussions on FGM matters.

> *Initially, girls in my village were laughed at when we talked about FGM. Then we engaged them in the community dialogue, and they changed their attitude and beliefs gradually (Girl champion, Girl Council Member).*

Breaking the intergenerational cycle helps challenge long-standing cultural expectations

As girls spoke out against FGM – often challenging long-standing cultural expectations – communities reported increased openness to discussion. In several settings, girls moved beyond same-gender and same-generation spaces to speaking in mixed forums, expanding reach and normalising discussion and public dialogue on FGM. By engaging in formal (facilitated by adult champions) and informal (within households) intergenerational dialogues and conversations, girls were able to influence parents' and older siblings' decision-making, directly protecting younger sisters.

> *Thanks to that, none of my older siblings had their daughters circumcised [...] she said that these children would not go... because her little sister was involved in a programme and had explained all the consequences to her. (Girl Champion, Ethiopia)*

Further, the intergenerational dialogues (girls with mothers and/or fathers) created space to discuss the consequences of FGM, share lived experiences, and reduce the generational divide that often prevents open conversation. Girls described increased ability to raise concerns and negotiate for their safety within households.

> *It's made us better because before, it was difficult for us to talk about FGM. Now, when we've started talking to parents... we can go in front of them and express our needs, tell them what they should do and what they shouldn't do too." (IDI, Girl, Kolda, Senegal)*

These dialogues also helped girls engage their mothers as allies. In some settings, mothers supported girls' sensitisation efforts and participated in outreach to other women. The formation of women's networks including watch groups (Ethiopia) further strengthened collective opposition to FGM and, created a ripple effect by sensitizing their families and social circles.

> *So these girls, who have become champions, even work with these mothers who accompany them in awareness-raising activities. They carried out activities until the mothers understood and agreed to form an association..." (Man, Kolda, Senegal)*

Together, these shifts demonstrate that sustainable norm change requires moving beyond awareness-raising to deliberately building girls' identity, agency, and leadership. This progression enabled a transition from silence and secrecy to collective accountability, where peer engagement, school platforms, and intergenerational dialogue strengthened girls' influence within households and supported families to openly reject FGM.

Girl-led collective action strengthens protection and prevention

The programme strengthened both informal and formal protection mechanisms, an essential part of TGG-ALM's prevention agenda. When girls have safe spaces, trusted adults, and practical information (including to whom and where to report suspected incidents of girls at risk of FGM) s), they act early to prevent harm. The evaluation findings show that across settings, girls and boys increasingly worked together to prevent FGM, report risks, and support peers who were at risk. Examples of collective action included:

- Girls challenging parents/guardians to stop planned cutting;
- Peer-led reporting to local authorities, child protection actors, and/or village elders;
- Boys supporting sisters and peers by alerting trusted adults and community leaders;
- Mothers and women's networks accompanying girls during awareness and prevention activities.

These actions did more than raise awareness, they activated local systems. As girls, families, community leaders, and duty-bearers coordinated around real-time risks, new relationships and referral pathways arose, accelerating both prevention and immediate protection for girls.

Girls' councils and peer-to-peer networks played a direct protective role. They helped identify girls at risk and link them to trusted adults and community leaders who could intervene so that girls at imminent risk could be safeguarded.

> *We have a movement of around 60 young girls who are in high school. They have been speaking on behalf of the rest. Over the course of December, we had around seven girls who came in and rescued another. They stood firm and said no; this is not the right way. (Programme implementing partner, Kenya)*

To prevent FGM, girl champions used both informal and formal reporting routes to flag suspected cases—especially where families continued planning FGM despite sensitisation. Some girls also described using the possibility of reporting as a deterrent when they felt at risk.

> *...the girls are sensitised on FGM in schools, and they have helpline numbers. During the holidays if you tell the girls about circumcision, they say we have helpline numbers, and we will report you to the authorities" (Woman Champion, Garissa).*

Ethical storytelling builds credibility and strengthens advocacy

TGG-ALM's advocacy approach emphasised dignified, ethical storytelling as a movement-building tool. With safeguarding in place, girls and survivors who chose to share their experiences were supported to speak for themselves, including in high-level spaces such as the African Union forums, the Commission on the Status of Women (CSW), and national and regional policy platforms.

> *I used to be so tense in front of people, but after the platform that they gave me, I started growing and learning that these are just people like me...People started knowing me more, like, they started knowing who I am and what I can do (Survivor, Girl Council member, Kenya)*

Supporting girl champions to speak directly, rather than through intermediaries, strengthened authenticity and influence. Preparation and mentoring helped ensure stories highlighted agency, leadership, and solutions, consistent with TGG's framing.

In addition, including girls' voices in national, regional, and global spaces helped sustain attention on prevention and accountability, and enabled decision-makers to hear directly how FGM affects girls' lives. This shows that when participation is voluntary and safeguarded, it can also build girls' confidence and strengthen their influence as advocates for change.

Unlocking the full potential of the Girl-centred approach

i) **Centring girls is powerful but must be balanced with safeguarding and legitimacy:** The girl-centred approach strengthened agency, but in some contexts, such as Senegal, positioning girls as primary leads for community dialogues created safeguarding and legitimacy risks (pushback, fatigue among the girls involved, and reduced influence in elder-led spaces).

Implication for programming: Keep girls as catalysts (peer and household influence) and pair them with trained adult champions (e.g., religious leaders, grandmothers, men) for community-wide dialogue, with safeguarding and mentoring embedded by design.

ii) Fear of social sanctions, especially linked to marriageability and social belonging, continues to limit open opposition to FGM by girls. In some contexts (Garissa and Somaliland), 'Sunna'[3] is perceived as more acceptable, creating pressure on girls and families and complicating zero-tolerance messaging. This limitation, however, does not negate that approximately 80% of participants exposed to the programme indicate their opposition to social sanctions against FGM abandonment.

Implication for programming: Programmes should pair girl-centred approaches with coordinated community norm-shifting strategies that engage families, men, elders, and religious leaders to redefine social acceptance and marriageability. This includes explicitly addressing the perceived acceptability of "Sunna" through clear, context-specific messaging that reinforces zero tolerance, while creating safe, collective spaces for families and girls to publicly commit to abandoning FGM. While the majority of the community members are against the sanctions, this should be interpreted carefully, as in the case of Garissa and Somaliland, FGM referred to type 3 (Pharaonic FGM) rather than "Sunna".

Exclusion risks:

- *Underrepresentation of adolescents (under 18)*: often, this age group most at risk, remains underrepresented in higher-level advocacy and decision-making spaces.
- *Over-emphasis on "survivor-centred*" framing can unintentionally marginalise and exclude girls who are at risk, or who live in areas where FGM is prevalent, but have not experienced FGM.
- *Excluding boys and men* entirely can miss opportunities to shift harmful gender norms.

Implication for programming:

1) Create age-appropriate leadership pathways by ensuring that adolescents under 18 can participate meaningfully (with safeguarding) in programme design, implementation, and learning;

2) Consider girls who have not undergone FGM as they can be powerful champions, including using their lived experiences to debunk myths around girls who have not undergone FGM;

3) Include boys and men as active allies through gender-transformative programming that challenges harmful norms, while safeguarding women's leadership and spaces to ensure equality outcomes remain central;

4) Link empowerment to enabling conditions: where appropriate, connect girls and women to livelihoods and education support that can reduce dependency and strengthen negotiating power in households.

[3] Sunna term is used to refer to type 1 FGM, which is referred as "less harmful" and acceptable in religion

Conclusion

TGG's experience suggests that ending FGM requires prevention, protection, and response, grounded in dignity, safety, and African leadership. A girl-centred approach makes girls at risk and survivors visible, strengthens agency and protective networks, and supports early norm change within households and communities.

Balanced with survivor leadership and strengthened accountability systems, girl-centred programming contributed across TGG programme pathways, supporting girls to claim their rights, enabling communities to increase their awareness and shift attitudes, and reinforcing institutional responsibility toward a future where girls grow up free from FGM.

Acknowledgements

We express our sincere gratitude to the UK International Development through Options Consultancy for the funding to conduct this evaluation. We are grateful to Options for their unwavering institutional support throughout this evaluation.

We are deeply indebted to the TGG-ALM programme implementation partners for your seamless coordination across the target regions in the four countries that was vital to our successful engagement with key stakeholders and data collection.

Special recognition also goes to our dedicated field research team, who worked tirelessly with the utmost professionalism and empathy to ensure the highest ethical standards were maintained during data collection.

Finally, we extend our most profound thanks to the girl champions, survivors, boys, and other community members across the regions. Thank you for your warmth, your willingness to participate in this research, and your collective commitment to driving meaningful change.

Further resources/reading:

1. https://thegirlgeneration.org/wp-content/uploads/2026/01/A-guide-on-Setting-up-Girls-Club-12th-Jan-2026_FINAL.pdf
2. https://thegirlgeneration.org/wp-content/uploads/2026/01/A-guide-on-Setting-up-Girls-Club-FRENCH-12th-Jan-2026_FINAL.pdf
3. https://thegirlgeneration.org/wp-content/uploads/2025/12/FACILITATOR-GUIDE-FOR-GIRLS-CLUBS-IN-SENEGAL-FINAL.pdf
4. https://thegirlgeneration.org/wp-content/uploads/2026/01/FGM-Manual-for-School-based-interventions-Somaliland-Somali-version_FINAL.pdf
5. https://thegirlgeneration.org/wp-content/uploads/2024/04/Practical_guide_tools_resources14.pdf
6. https://thegirlgeneration.org/wp-content/uploads/2025/04/Global-Good_Youth-Advocacy-Toolkit_130225.pdf
7. https://thegirlgeneration.org/wp-content/uploads/2024/04/Girls-Only.pdf
8. https://thegirlgeneration.org/wp-content/uploads/2026/01/AMREF-GCM-Childrens-Manual-2025_6th-September.pdf