

Q&A-Session:

UN CSW: Combining Forces to Combat Harmful Practices: Training on SRHR and SGBV as Catalysts for Change, 11th of March.2024

Question:

How long is it going to take until the free material, that you talked about will be available? If some of us want to book a training with you (Zinduka or THE RAIN WORKERS), how would we have to do that?

Answer: Ines Kohl, THE RAIN WORKERS

We have applied for a fund from a foundation. We have not yet received the final okay, so it will depend on the funding. But from our initial plan it was by spring next year at the latest. Maybe already end of the year.

Question:

Could you share how you are supporting FGM survivors especially those in need of reconstructive surgery?

Answer: Cess Wangui, Zinduka

I think for us that's still work in progress. But we will build a partnership with one organization, that is a hospital foundation, that has approached us and wants to provide that kind of service to the women. We are in the phase of identifying the women and explaining the consequences and resource mobilization. Once we complete the phase, we will be able to open up our service for survivors. Currently we offer safe spaces, where they can talk about issues that are affecting them and the stigma they live with.

Question:

How do you cope with religious leaders, that are against condoms for example? What's your strategy?

Answer: Gabriel Maina, THE RAIN WORKERS

For example, in Mathare Slums (Nairobi) you have the German doctors working there. And we have so many cases of the beneficiaries, who come to the German doctor's hospital and a big percentage of the clans that are victims of HIV/AIDS. And the only way to run down or take care of the high numbers is to actually allow the victims to use condoms. So you find the SRHR component that RAIN WORKERS do important to bring down the number of

people affected by the sickness (AIDS). Like the HIV knowledge and other STD's can be avoided, cause a condom use is almost 100% sure.

Answer Ines Kohl, THE RAIN WORKERS

I just can add: For example, in Niger we have a Muslim society, where the use of contraceptives is not an issue. If you read the Koran, it is allowed, and our trainers there are really into religion there. As well as our East-African Trainers, they always refer to religion. You can wrap the religious leaders by making them aware of the current situation: you have a lot of kids here, they are not educated, they have no house care, ... Is that what god allows or wants? No. So you can get them on board. With condom it's more difficult on East-African communities not with the Muslim one in Niger for example.

Question:

You are saying, just 1% of the funds go to grassroots... where does the rest go?

Answer: Antonia Waskowiak, Zinduka

I think, internationally there is – also on topics about FGM – there are many institutions on FGM. We have a lot of research programs, we have a lot of conferences, international events, and so on. So, all of that has to be funded and paid for. So, the money is in bigger institutions, for example United Nations. And then we have very strict systems – also from the big institutions – towards funding local grassroots. For example, that they are only locally placed, or they don't have a strong monitoring and evaluation system, they don't have good financial audits. So, it's difficult for small grassroots organization to apply for funding of such big organizations for bigger funds for example from the EU. We tried to apply there, and it was not very successful, because we just don't have the systems of being able to get a grant there. And I think that's where all the money goes.

Question:

Only one question regarding increased self-esteem & confidence. How did you measure that?

Answer: Cess Wangui, Zinduka

In our program, during the monitoring phase and home visits, we do questionize exactly that. We do personal interviews with the parents of the girls, the girls themselves and the teachers of the girls. Just to establish what has changed. And sometimes we don't even have to do the interviews, we call the parents and the girls come to us with their personal testimonials.

Question:

How do you address the issue of FGM being performed by healthcare professionals, and what steps do you take to advocate for the enforcement of laws and regulations that prohibit medicalization of FGM?

Answer: Cess Wangui, Zinduka

We don't have a lot of medicalizations in the areas we work in (Kuria and West Pokot), so we don't face these challenges a lot. But our neighboring communities they have that quite a lot so it takes a lot of sensitization by health care professionals. Ensuring that they understand what the practice means on girls and that you are sure the legal free marks can be held accountable for any medicalization. In the FGM law it is very clear that is a penalty mark.

Question:

Since we started the Beginners training for RAIN WORKERS, we are receiving more request for expansion coverage to more regions in Tanzania. From the government their requesting additional RAIN WORKERS to cover the other regions.

Answer: Ines Kohl, THE RAIN WORKERS

That's an issue we realize in many countries, especially when governmental institutions understand, that this holistic training rally makes sense, they want more. But it's -like we discussed before- it's an issue of funding. We are a small organization, we can offer our training, but we are not able of course to fund every single organization. Funds must come from bigger organizations, from governmental institutions or other sources. But of course we are here, we try what we can, but we need support.

Question:

Ines, you talked about different stages of change in your presentation. Are there also time frames for how long the different terms take?

Answer: Ines Kohl, THE RAIN WORKERS

No there are not. I am also looking because I want to have a scientific background on that. But I know just that if its specifically health issues we talk about ten to twenty years to make a change. But it's hard. I would be happy to receive literature or data but as far as I know, there is nothing to find. But what I can say is, that for example in Ethiopia we work with one partner, KMG in Kembatta region, since 2011, we trained all in all more than 68 RAIN WORKERS. And there people go out and make classical TREEtings under the tree and there are more than 60% of the women started using contraceptives in a quite short period of time because our partner meets them regularly under the tree. After six months they change their attitude towards contraceptive methods. So it depends on the topic but in that case, it went quite well- and quick.

Question:

Is Zinduka planning to collaborate with organizations in other countries especially on girl's empowerment projects?

Answer: Antonia Waskowiak, Zinduka

Yes, definitely we are. Especially with THE RAIN WORKERS we are planning to implement our program also outside of Kenya. So, Kenya is basically the Pilot and we are happy to take it to other countries. If you come from another country, where they practice FGM please reach out and introduce yourself and we can get in touch.

Answer Ines Kohl, THE RAIN WORKERS

And I might add to that. What we realized is, that the empowerment camp does not only suit regions where FGM is practiced, because FGM is one part of SGBV. And SGBV is much broader, I think we need it everywhere in every country in the world. So that empowerment camps can be implemented in any region of the world. And that's what makes it so strong.

Question:

How has the introduction of education and awareness programs impacted the attitudes towards FGM in the Masai community for those implementing in Masai community?

Answer: Antonia Waskowiak, Zinduka

We are not yet implementing in the Masai community, but it is planned. We will probably start implementing next year.

Question:

In a community where the practice of FGM is widespread. What are the signs that the various initiatives in combating FGM is working?

Answer: Cess Wangui, Zinduka

Apart from the girl's empowerment program we have seen also campaigns on social media, working very effectively. Also, radio broadcast is also working very effectively and also the continued sensitization on community level to ALL community members. Education on FGM. You need to make sure, that you sensitize on all the issues not just FGM alone, make sure you are covering SRHR, you're covering economic empowerment, ...

Question:

How is FGM linked to concepts of femininity and womanhood in Masai culture?

Answer: Ines Kohl, THE RAIN WORKERS

I think that question goes far beyond of what we can talk about now. Paul, we can have a single meeting afterwards, but just to have it in one sentence: It is always linked to: what is a woman? What is the role of a woman? When is a woman a woman? And that goes for all cultures. Because we have to look differently. It's a part of the patriarchic system which demands women to be cut and I think it's the same among Massai community. Only a cut woman is a good woman, is a clean woman in many issues. So, we need to work on the role of women We are whole. We are good as we are. We are born like this, and nobody has the right to cut any part: neither of man nor of women.

THANK YOU!

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