

**Alternative report submitted by GAMS
Belgium and End FGM European
Network**

**1st cycle of thematic evaluation: building
trust by providing support, protection
and justice**

Brussels, 28/01/2025

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Authors

GAMS BELGIQUE

GAMS stands for Groupe pour l'Abolition des Mutilations Sexuelles (Group for the Abolition of Sexual Mutilation). GAMS Belgium was founded in 1996 by a survivor of Female Genital Mutilation (FGM), Khadidiatou Diallo. The association works at national level (with branches in Brussels, Liège, Namur and Antwerp, as well as offices in Leuven, Verviers, Ghent, Hasselt, etc.): With its community-based, gender-sensitive approach, GAMS Belgium is made up of a multidisciplinary team whose work is organised around 6 areas of action:

1. Prevention: awareness-raising workshops and annual campaigns, with the help of Community Voices, to raise awareness in the affected communities.
2. Protection: legal support to ensure the protection of girls at risk.
3. Psycho-social support: personalised, ongoing support for women affected by FGM.
4. Training: training professionals in the health, education and social sectors to strengthen their skills in identifying risks and protecting girls.
5. Advocacy: take part in advocacy actions at national and international level to improve legislation in favour of the protection of girls at risk and support for those affected.
6. International cooperation: exchanging best practice and strengthening the movement against FGM by working with partners around the world.

GAMS Belgium is a founding member of the End FGM European network (END FGM EU) and coordinates the CoP FGM community of practice [Communauté de pratiques - CoP FGM-MGF](#) and the Belgian network of concerted strategies to combat FGM [Homepage - Stratégies concertées de lutte contre les mutilations génitales féminines](#)

END FGM EUROPEAN NETWORK (END FGM EU)

End FGM EU is a European network of 39 organisations working in 16 European states to ensure sustainable European action to end FGM in Europe and beyond. Its vision is 'a world free from all forms of FGM where women and girls are empowered and can fully enjoy their human rights'. Its mission is to be the driving force behind the European movement to end all forms of FGM, by joining forces with communities and civil society organisations, and by creating synergies and cooperation with all relevant actors in Europe and worldwide.

Introduction

This document is produced by GAMS Belgique in coordination with End FGM EU, in order to highlight the current situation and propose concrete recommendations as part of the first thematic evaluation of FGM in Belgium. Although this report focuses solely on this practice, its aim is not to isolate it, but rather to highlight it while placing it within the continuum of gender-based violence against women and girls. This report represents the Belgian chapter of a wider effort by End FGM EU to urge all its members to submit a report focusing on FGM to GREVIO in order to draw expert attention to this subject, which is too often neglected by national authorities. The recommendations in this report are based on the analysis made by GAMS Belgium and End FGM EU following our first alternative report presented in 2020.

Part I: Changes in comprehensive and coordinated policies, funding, and data collection in the area of violence against women and domestic violence

ARTICLE 7: COMPREHENSIVE AND COORDINATED POLICIES

There is an imbalance between the various federated entities in terms of policies to combat gender-based violence (GBV), and more specifically FGM.

- The Flemish government does not have a plan dedicated to GBV, but only a plan dedicated to sexual violence (which is less extensive than the other plans of the federated entities)¹. As part of this plan, the Flemish government invests more in centres of expertise or public structures (hospital services such as sexual violence treatment centres) rather than civil society organisations: these structures do not always have the flexibility and skills to respond to vulnerable and specific groups (migrants, people with disabilities, etc.). Prevention and referral of vulnerable target groups therefore depend on political choices and priorities rather than on identified needs. For instance, hospital services specialised in the medical approach and the 'acute' period, but not in long-term psycho-social follow-up, which falls to civil society associations that do not have the same resources as hospitals.

- In terms of federal policies, while it is positive to see the involvement of civil society valued, there is a clear imbalance between the financial investment and the commitment required to these organisations. The creation of the monitoring committee for the National Action Plan (NAP)² on Violence with the civil society is a very good thing, but it places an enormous burden on the associations, with funding of just 7,500 euros per year. For example, a GAMS employee has taken on the rotating chairmanship of the civil society committee, a role that includes, among other things, managing meetings, drafting minutes, summarising publications, evaluating the NAP and drafting recommendations, and managing meetings, thus adding up to a very heavy workload in addition to the organisation's internal work.
- There is a lack of coordination between Belgium's language communities on the same prevention and protection services: early childhood, youth support, etc. GAMS is often responsible for the coordination of these services. It is often up to GAMS to act as a link between these different services in order to harmonise risk detection tools (such as the détectomètre), thereby adding an additional responsibility to civil society organisations.

ARTICLE 8: FUNDING

- There are differences in investment between the federated entities and it is therefore necessary to provide financial resources in proportion to the number of girls and women concerned in each region. Flanders is the region with the highest number of girls and women affected (16,500 out of 35,000 nationally), while it is the region that provides the least amount of funding for prevention, support and grassroots associations.
- Allocating appropriate financial resources requires structural funding to meet the needs of associations working in the field. The Institute for Equality between Women and Men erroneously calls the 5-year subsidies dedicated to federal coalitions (network work) 'structural funds', whereas the amount is 90,000 euros/year for a minimum of 6 associations

¹ Other federal entities as Wallonia, COCOF, Brussels, Wallonia-Brussels Federation have plans specifically dedicated to gender-based violence. For instance Wallonia funds two support services dedicated to FGM in Liege and Namur. This type of structural funding does not exist in the Flanders.

² <https://iqvm-iefh.belgium.be/fr/documentation/plan-daction-national-de-lutte-contre-les-violences-basees-sur-le-genre-2021-2025>

for 5 years, corresponding to multi-annual funding and not structural funding as its name suggests -- structural funding implies the provision of an amount to cover operating costs such as salaries.

- There is an urgent need to make long-term financial resources available to support the activities of non-governmental organisations. Most of the grants mentioned in the report end in 2025 with no promise of renewal: funding from the FPS Public Health, Welzijn (Flemish Community), BPS Brussels. GAMS Belgique, for instance, found itself in a gap period that forced it to launch a major fundraising campaign in 2024 and to turn to private funding to avoid redundancies and continue its vital activities on a long-term basis. The report quotes the figure of €200,000 from the Flemish government several times, but this is a one-shot funding that ends on 31 January 2025 and cannot be extended beyond that date.
- While it is positive to see the involvement of civil society organisations such as GAMS in delivering appropriate and necessary services for survivors, it is crucial that the state aligns the funding allocated to these organisations with the needs they address. In fact, the Belgian State is not fulfilling its obligation to put in place appropriate financial resources to implement its obligations. As a result, civil society organisations have no choice but to seek private funding or carry out work on a voluntary basis.

ARTICLE 11: DATA COLLECTION AND RESEARCH

- In accordance with the Istanbul Convention's obligation to collect data on a regular basis, it is necessary to carry out a new study in Belgium on the prevalence of FGM (the latest study covers figures as at 31/12/2020).

Part II: Information on the implementation of selected provisions in priority areas in the field of prevention, protection and prosecution

ARTICLE 15: TRAINING OF PROFESSIONALS

- In the context of initial training, the recommendations made by the Higher Education and Research Academy in 2020³ to include the issue of FGM, forced marriage, sexual violence and

³ <https://www.ares-ac.be/fr/actualites/732-violences-faites-aux-femmes-resultats-du-processus-participatif-visant-a-l-integration-de-contenus-sur-les-violences-faites-aux-femmes-dans-l-enseignement-superieur>

violence between partners in the basic curriculum of future professionals have never been applied. Several universities claim academic independence as a reason for not including this subject. It is therefore extremely complicated to reach all professionals via continuing education once they have left school.

ARTICLE 22: SPECIALIST SUPPORT SERVICES

- Belgium has two hospital-based multidisciplinary care centres (Hôpital saint-Pierre and UZ Ghent). The centres have never been evaluated. There are major imbalances between the two: the CEMAVIE centre at Hôpital St-Pierre (Brussels) is very busy (with waiting times of several months), while the centre in Ghent is much less busy. An independent evaluation of the two centres would be necessary to measure the quality of care, the proper use of intercultural communication and also the number of women treated. A needs assessment in the provinces most affected, such as Liège and Antwerp, would also be relevant.
- One good practice observed is that of the Walloon Region, which has funded two accredited gender-based violence support services dedicated to FGM in Namur and Liège (services managed by GAMS Belgium) since 2020. However, similar structural funding is not available in Brussels or Flanders. There are still major needs in many areas that are not covered, and this type of funding would enable a new support service to be opened, for example in Courtrai (no service currently available in West Flanders).

ARTICLE 56: MEASURES OF PROTECTION

- It is imperative to establish a protection protocol for minors sent to their parents' country of origin to undergo FGM or be forced into marriage. We have had several cases of under-age girls with Belgian citizenship or resident status in Belgium whose parents had decided to take them to a high prevalence country to undergo FGM and/or be forcibly married. It was extremely difficult to mobilise the Belgian authorities (foreign affairs or youth aid) because of parental authority. This was particularly the case in Guinea and Somalia, and the absence of a Belgian embassy in these two countries does not make the process any easier either. The evaluation of the implementation of COL 06/2017⁴ carried out by Voix des femmes and GAMS for the IEFH shows that it is still too little known and used.

⁴ https://igvm-iefh.belgium.be/sites/default/files/downloads/col06_2017_col_fr.pdf

Part IV: administrative data and statistics

- In Belgium, there have been no convictions under Article 409 of the Criminal Code, which criminalises female genital mutilation. This does not mean that there are no risks or cases of female genital mutilation, but rather that these situations are very difficult to detect. In addition, it is important to consider the protection measures put in place, such as the ban on leaving the territory, particularly thanks to the intervention of the authorities on the basis of circular COL 6/2017. It would therefore be relevant to obtain statistics on the measures taken by the judicial authorities and youth protection services to prevent children from going abroad.

Recommendations

In conclusion, GAMS Belgium and End FGM EU call on the Belgian authorities to continue to work actively to put an end to FGM by taking the following measures:

- Deepen the collaboration between the State and civil society organisations in the implementation of support services for survivors and people at risk but also in their preventive actions by urgently allocating adequate and long-term core funding to enable them to carry out their mission.
- Harmonise the funding, policies and services available at all levels of Belgian politics in close coordination with civil society organisations, including grassroots organisations.
- Ensure that the coordination put in place within the French-speaking community is guaranteed in the Flemish region - the region most affected by FGM. This should include the provision of adequate funds, including basic and operating funds.
- Systematically and regularly collect data on the prevalence of FGM to adopt measures to best respond to identified needs.
- Provide initial and ongoing training for all professionals likely to come into contact with people affected by FGM. This training must be given in an inclusive manner, with a gender- and culture-sensitive approach.
- A protection protocol must be established for minors travelling to their country of origin – when it is a country with a high prevalence rate - to undergo FGM or be forced into marriage.

We would like to thank GREVIO for giving civil society organisations the opportunity to share our expertise in the form of concrete recommendations to improve the actions of the Belgian authorities so that, together, we can put an end to FGM.