

**TRANSNATIONAL
ADMINISTRATION
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The Global Governance of Harmful Practices

Actors, Networks, and Knowledge
Transfer in Transnational Gender
Programmes

Laura Rahm



THE GLOBAL GOVERNANCE OF HARMFUL PRACTICES

Transnational Administration and Global Policy

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Actors, Networks, and Knowledge Transfer
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Laura Rahm

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For Camelo, Davin, Calla, and Henro

In memory of Doris Rahm

Contents

List of Figures, Tables, and Boxes	ix
List of Abbreviations	xii
Acknowledgements	xiv
Preface	xvii
1 Changing Sticky Norms? A Delicate Terrain in International Development	1
From rites to rights (or rights to wrongs)	1
How do global gender programmes impact knowledge and policy production?	8
Science and Technology Studies (STS) meets global governance: an unconventional marriage and its methodological innovations	9
What this book is about and why it matters	17
2 Harmful Practices and Global Governance	22
Motives, methods, magnitudes of harmful practices	23
Harmful practices in the Global North and Global South: transcending the divide?	44
Brief historical review of the global mobilization against harmful practices	50
Legal architectures and lofty agreements to end harmful practices	65
3 Gender Justice by Design? Mapping Actors and Networks in Global Programmes	72
What are global (gender) programmes?	74
Actor–network (in) theory: a new lens for knowledge transfer in global programmes	81
Global gender programmes in practice: the case of child marriage, female genital mutilation and gender-biased sex selection	89
‘Redistributing the local’: mapping actors involved in global gender programmes	118

	Knowledge transfer hubs and hindrance: the three modes of transfer	132
	Global programme comparison: six ‘success’ factors	140
	Conclusion: a web of attachments	151
4	Measuring the Immeasurable? Global Efforts to Evaluate Harm	154
	Global M&E frameworks on child marriage, FGM, and gender-biased sex selection	156
	Attribution problem: the ‘Achilles’ heel’ of global programmes	162
	Is a difference-in-difference analysis a feasible option to overcome the attribution problem?	176
	The end of harmful practices in sight? Backlashes due to polycrisis	190
	Conclusion: reimagining systems change	200
5	Rethinking the Future: Knowledge, Power, and the Politics of Ending Harm	203
	Synthesis of knowledge in motion: summary of the book	204
	Scaling good: can innovations end harm?	215
	How can knowledge transfer (to tackle harmful gender norms) be improved?	218
	Final reflections: reclaiming the politics of knowledge and regrounding power	222
	Appendix 1: International Legal Frameworks, Consensus, and Policy Instruments to End Harmful Practices	225
	Appendix 2: Regional Legal Frameworks, Consensus, and Policy Instruments to End Harmful Practices	228
	Bibliography	230
	Index	279

List of Figures, Tables, and Boxes

Figures

2.1	Life-cycle approach to harmful practices	30
2.2	World map: Child marriage	35
2.3	World map: Female genital cutting	36
2.4	World map: Son preference and skewed sex ratios	37
2.5	Hansa Mehta and Eleanor Roosevelt, United Nations (1949)	53
2.6	Number of references to harmful practices as violence against women in the ICPD Programme of Action and Beijing Platform for Action	60
3.1	Orange Café, UNFPA HQ, New York, 15 March 2024	95
3.2	Danny Kaye Visitor Center, UNICEF House, New York, 14 March 2024	96
3.3	Booties of the Gendercide Awareness Project	115
3.4	Art installation on missing women	116
3.5	Global Programme to End Child Marriage at a glance	119
3.6	Global Programme to Address Gender-Biased Sex Selection at a glance	121
3.7	Global Programme to End Child Marriage plays a central role in knowledge diffusion	126
3.8	Global Programme to Eliminate FGM in a loosely integrated network during off-season	127
3.9	Global Programme to Eliminate FGM in ‘Action’: international day for zero tolerance of FGM	128
3.10	#EndChildMarriage: two programmes team up, but NGO GirlsNotBrides is the bigger hub	129
3.11	#EndFGM: two programmes team up, but NGO Orchid Project and The Girl Generation play a more central role	130
3.12	Three modes of governance of knowledge hubs	133
3.13	Global gender programme target countries and additional countries of influence	148
3.14	Funding across programmes and phases, in million USD	149
4.1	Conceptual model: impact evaluation and attribution problem	165

4.2	Child marriage prevalence in Ghana, Togo, Western Africa, 1997–2022	181
4.3	Child marriage prevalence in Zambia, Zimbabwe, Eastern Africa, 1993–2019	182
4.4	Child marriage prevalence in Sierra Leone, Liberia, Western Africa, 1994–2020	184
4.5	Ratio of improvement: comparing Ghana and Togo in pre- and post-intervention periods	186
4.6	Child marriage prevalence by region, in 2015, 2025, and 2030	192
4.7	Sex ratio at birth, 1950–2023, selected countries	193

Tables

1.1	Interviews by respondent gender, age, programme affiliation, region, sector, and level	15
2.1	Estimated number of women affected by child marriage, FGM, and GBSS by region and data source, as of 2025	41
2.2	Expressions of genital cuttings, child marriage, GBSS in the Global North and South	48
3.1	Three global gender programmes at a glance	93
3.2	Stakeholder mapping based on human rights-based approaches	122
3.3	Trade-offs across three modes of governance of knowledge hubs	138
4.1	Phase II output indicator performance, Global Programme to End Child Marriage (2020–22)	160
4.2	Percentage of women 20–24 married before age 18 in target countries of the Global Programme to End Child Marriage, by country, time, and source	179
4.3	Estimated vs target child marriage prevalence (% of women 20–24 married before 18)	180

Boxes

1.1	Defining gender-based violence	4
2.1	From low to high-tech: harmful practices and technological change	33
2.2	Child marriage in the US	46
2.3	Excerpts from Hillary Clinton’s speech at the 1995 Beijing conference, and references to harmful practices in the ICPD Programme of Action and Beijing Declaration and Platform for Action	60
3.1	What knowledge?	78
3.2	Definition and functions of knowledge hubs	87

3.3	Response to ‘Public Consultation on the Data Revolution for Sustainable Development’ launched by the Sustainable Development Solutions Network, 12 October 2014	100
3.4	WHO’s key facts about abortion	111
3.5	‘Missing Girls’ art exhibit that died before it came to life	114
3.6	Knowledge hubs as connecting sites	138
4.1	Theory of change of Phase IV of the Joint Programme to Eliminate FGM	157
4.2	Tapping in the dark: excerpts from global programme evaluation reports	168
4.3	UN Secretary-General António Guterres on the global gender backlash	196
5.1	Knowledge transfer around harmful gender norms	222

List of Abbreviations

ANT	Actor–Network Theory
APRO	Asia Pacific Regional Office
ASEAN	Association of Southeast Asian Nations
CD	Capacity development
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
CEU	Central European University
CM	Child marriage
COP	Conference of the Parties
CRANK	Child Marriage Research to Action Network
CRC	Convention on the Rights of the Child
CSO	Civil society organization
CSW	Commission on the Status of Women
CUSP	Community for Understanding Scale Up
DHS	Demographic and Health Surveys
DiD	Difference-in-difference approach
ECLAC	Economic Commission for Latin America and the Caribbean
EECARO	Eastern Europe and Central Asia Regional Office
EU	European Union
EUI	European University Institute
FAO	Food and Agriculture Organization
FGM	Female genital mutilation
GBSS	Gender-biased sex selection
GIZ	Gesellschaft für Internationale Zusammenarbeit (German International Cooperation)
GOV	Government
HDI	Human Development Index
IACHR	Inter-American Commission on Human Rights
ICESCR	International Covenant on Economic, Social and Cultural Rights
ICPD	International Conference for Population and Development
ICT	Information and communication technology

LIST OF ABBREVIATIONS

IGO	Intergovernmental organization
ILO	International Labour Organization
IRM	Interregional Mechanism
K4D	Knowledge for development
KOSIS	Korean Statistical Information Service
MICS	Multiple Indicator Cluster Surveys
MSCA	Marie Skłodowska-Curie Actions
NGO	Non-governmental organization
NORAD	Norwegian Agency for Development Cooperation
ODA	Official development assistance
OECD	Organisation for Economic Co-operation and Development
OHCHR	Office of the United Nations High Commissioner for Human Rights
PoA	Programme of Action
ROSA	Regional Office for South Asia
SAARC	South Asian Association for Regional Cooperation
SDG	Sustainable Development Goal
SRHR	Sexual and Reproductive Health and Rights
STAR	Strategic Technical Assistance for Research
STS	Science and Technology Studies
ToC	Theory of Change
UDHR	Universal Declaration of Human Rights
UDISE	Unified District Information System for Education
UN	United Nations
UNCHR	United Nations High Commissioner for Refugees
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNGEI	United Nations Girls' Education Initiative
UNICEF	United Nations Children's Fund
UNODC	United Nations Office on Drugs and Crime
UNRISD	United Nations Research Institute for Social Development
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women
USSR	Union of Soviet Socialist Republics
WBI	World Bank Institute
WHO	World Health Organization
WPS	Women, Peace and Security

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Preface

Inspired by Nanette Svenson's exploration of the United Nations (UN) as a knowledge system, I present this book as a response to her call: 'There is much more to be told, and I hope this work will encourage others to share what they know' (Svenson, 2016, p 9). While Svenson provided a tour de force of the inner workings of UN knowledge management (for learning, norm-setting, and product/service creation), this book takes a different focus. My perspective offers a new lens into specifically underexplored UN-led multi-stakeholder initiatives: global gender programmes. Like Svenson, my professional journey has been embedded in the UN system. Over the past eight years, as an international trainer and consultant, I have gained first-hand experience in how knowledge is transferred across levels and actors within these complex programmes. This book dives into a specific and highly charged domain: the mobilization and diffusion of knowledge to end 'harmful practices'. These programmes involve far more than the formal UN apparatus; they rely on an intricate web of diverse stakeholders – from grassroots activists to religious leaders, from local influencers to national authorities, from regional organizations to international development agencies. Together, these actors transcend institutional boundaries to address some of the most intimate and contentious issues of our time.

As Svenson (2016, p 9) acknowledged, the UN's knowledge-related work spans 'so many different thematic areas, organizations, geographic regions, and purposeful agendas'. This is especially true for the eradication of harmful practices, an area where the UN and its partners constantly navigate cultural sensitivities, societal resistance, and the diverse priorities of those involved. In this book, I present a selection of ways in which UN agencies have facilitated knowledge transfer in these contexts, diffusing expertise and fostering collaboration to promote change. This work is not an exhaustive account but a step in a larger conversation – a step toward understanding how global gender programmes harness knowledge to address entrenched inequalities and advance human rights. The book shows how UN-led gender programmes mobilize knowledge not only to shape public policy and shift social norms, but also to create coherence, legitimacy, and impact

within a rapidly evolving socio-political landscape. In doing so, the book illuminates the often-invisible processes, negotiations, and knowledge politics that underpin global efforts to end harmful practices.

The publication comes at a critical moment. The global gender equality agenda is facing unprecedented headwinds: drastic funding cuts across the UN development system, a growing push toward regionalization and decentralization, and intensifying political pressures on multilateral institutions. The UN80 Initiative has ushered in sweeping reforms aimed at streamlining the system and enhancing effectiveness, accompanied by major structural and programmatic realignments, including the recently announced UNFPA–UN Women merger. These shifts are redefining how global gender programmes are governed, financed, and implemented. At the same time, many countries are backsliding on long-standing commitments to women’s rights, and political leaders around the world are deprioritizing – or actively contesting – gender equality. Against this backdrop of institutional transformation and global backlash, understanding *how* gender programmes operate, adapt, and sustain influence has never been more urgent. There is indeed much more to be said, and I hope this book will contribute to the growing body of scholarship encouraging others to continue sharing their insights on this critical subject.

Laura Rahm
10 December 2025

Changing Sticky Norms? A Delicate Terrain in International Development

From rites to rights (or rights to wrongs)

Hundreds of millions of women and girls worldwide are subject to practices that harm their physical and emotional integrity. Gender-based violence is not a novel phenomenon, but only recently has it become the centre stage of global policy efforts. With its 2020 State of the World Population Report titled *Against My Will: Defying the Practices that Harm Women and Girls and Undermine Equality*, the United Nations Population Fund (UNFPA) put a spotlight on the global scale of harmful cultural practices and called for renewed global action to eradicate harm and promote gender equality (UNFPA, 2020a). Who sets the global agenda over what is considered harmful or not? Which actors and networks are engaged in policy formulation, and what knowledges are being transferred and mobilized for policy legitimization? How are global gender programmes implemented, monitored, and evaluated? *The Global Governance of Harmful Practices* is the first comprehensive monograph that addresses these questions and provides an in-depth account of the newly emergent global policy networks seeking to end harmful gender norms and practices.

While this book adopts the terminology of ‘harmful practices’ used in United Nations (UN) circles, it is important to recognize that these terms are not neutral descriptions of social reality. They are conceptual categories produced within international policy spaces, shaped by legal frameworks, advocacy agendas, and donor priorities. In many communities, the specific behaviours that are now labelled ‘harmful practices’ were – and often still are – embedded in systems of kinship and identity. The category itself is therefore a form of knowledge production: a political, epistemic, and normative construct that translates a wide range of lived practices into a global policy problem. This translation process creates a significant distance between the

stylized facts and definitions circulating in UN documents and the complex, locally embedded realities on the ground. In some cases, communities first encountered these labels when an external actor informed them that a practice they had engaged in for generations was now internationally condemned and targeted for elimination. The book's primary focus is on the architecture of global programmes and the dynamics of policy networks, rather than the individuals subjected to harmful practices. Certainly, some of the most critical mobilizations against harmful practices come from within the communities where they are practiced. Yet, it is important to keep in view that there tends to be a significant epistemic and political gap between the designers and implementors of international interventions and the individuals and communities whose lives they seek to reshape.

The book centres around three pervasive forms of harmful practices prevalent across the Global South and the Global North, namely child marriage, female genital mutilation, and gender-biased sex selection. Reportedly, over 650 million women alive today were married under the age of 18 and 150 million additional girls will be at risk by 2030 according to estimates by the United Nations Children's Fund ([UNICEF, 2025](#)). Child marriage forces girls out of school and into domestic chores, exposing them to intimate partner violence, sexual coercion, early pregnancy, and a higher risk of maternal mortality. Meanwhile, over 230 million women have undergone female genital mutilation and approximately 68 million will be at risk by 2030 ([UNICEF, 2024](#)). The intentional removing or injuring of external female genitalia for non-medical reasons causes immediate and lifetime health complications for women and girls and is seen in some cultures as a prerequisite for (early) marriage and control over female sexuality. Furthermore, an estimated 147 million females are missing worldwide due to selective abortions, infanticide, or fatal neglect as of 2025, rising to 150 million by 2030 ([Bongaarts and Guilмото, 2015](#)). Gender-biased sex selection is practised in countries with strong son preference leading to sex imbalances and demographic masculinization. These figures are based on the operational definitions and survey measures adopted by the UN and other international agencies. They necessarily simplify complex realities, translating diverse experiences and cultural contexts into standardized indicators for monitoring and advocacy purposes.

Numerous international human rights treaties and declarations condemn these practices and urge UN Member States to act. Considering the demographic snapshot mentioned previously, more is needed to meet the global target of 'eliminating all harmful practices' by 2030 as enshrined in the Sustainable Development Goal (SDG) 5.3 ([United Nations, 2015](#), p 18). To accelerate change set out in the Sustainable Development Agenda, numerous global programmes have emerged over the past decade, including the *Global Programme to End Child Marriage*, the *Joint Programme to Eliminate*

Female Genital Mutilation, and the *Global Programme to Address Gender-biased Sex Selection*. These are multi-donor UN-led initiatives that operate at different levels (global to local) and bring together diverse stakeholders (governments, civil society, academia, private sector) to promote social behaviour change, services and opportunities, as well as governance and justice for women and girls. These programmes emphasize evidence-driven approaches, conducting surveys and evaluations to inform and enhance the effectiveness of interventions. Over the past decades, prevalence rates in harmful practices have declined, yet progress is highly uneven between and across countries. Despite a push for knowledge transfer of ‘what works’, (global) policy and programmatic impacts remain poorly understood and given the overall population growth, more girls remain at risk.

This interdisciplinary book draws on global governance, political sociology, demography, cultural anthropology, gender studies, as well as science and technology studies to analyse and interpret these global policy and population trends. It employs the Actor–Network Theory (ANT) to map novel constellations of actors and networks engaged in knowledge transfer. The book provides a state-of-the-art account of three harmful practices, using health surveys and demographic data, before shifting focus to the global governance of these practices drawing from international laws, policies and programmes, participant observation during international conferences on harmful practices, and in-depth expert interviews with key informants.

While child marriage, female genital mutilation, and gender-biased sex selection do not seem to have much in common, they are all driven by powerful social norms, embedded in kinship and marriage (Coomaraswamy, 2002; Merry, 2006). They adversely affect women’s (reproductive) health and violate their fundamental rights. However, there are noticeable differences in how these practices are governed, politicized, and prioritized globally. The book explores the similarities and differences, concluding that variations can be explained by path dependency, policy framing, donor priorities, and epistemic communities engaged in knowledge transfer. Using global monitoring and evaluation tools and a difference-in-difference (DiD) approach, this book measures policy progress made by select global programmes towards the eradication of harmful practices and offers practical guidance to accelerate change. As such, the book is relevant for public health specialists, global policy scholars, demographers, gender experts, development professionals, and the general interested public.

Harmful practices: definitions and contestations

Harmful practices are generally viewed as manifestations of gender-based violence (Merry, 2009, see Box 1.1). They encompass a wide array of culturally entrenched behaviours that violate human rights and perpetuate

gender discrimination. These include, but are not limited to: female genital mutilation, cutting, and any alteration of female genital organs for non-medical reasons; child, early, and forced marriage; sex-selective abortions, infanticide, fatal neglect of girls linked to son preference – also known as gender-biased sex selection; ‘honour’-based violence against women; dowry-related abuse; caste-based discrimination; virginity testing; breast ironing; bride-kidnapping; widow immolation such as the Indian practice of sati (the burning of widows in their husband’s funeral pyre); widowhood rituals that involve humiliations or forced sexual intercourse with a relative or village head; foot binding as formerly practised in China; incest; extreme dietary restrictions; and bodily modifications performed for beauty purposes or marriageability of girls and women. Despite their varied forms, these practices share common roots in gender inequality and entrenched social norms, which are often sustained by patriarchal family structures, marriage customs, and societal constructs of femininity. Perpetuated by family, community, or broader societal expectations, they serve as mechanisms of control over women’s bodies and autonomy. The pervasive nature of these practices inflicts profound harm on women’s physical and mental well-being and their sexual and reproductive health, while simultaneously undermining progress toward gender equality and women’s empowerment.

Box 1.1: Defining gender-based violence

Gender-based violence (GBV) is rooted in gender inequality and disproportionately affects women and girls due to entrenched patriarchal norms, though men and boys can also experience it (Shepherd, 2019). The UN defines GBV in Article 1 of the Declaration on the Elimination of Violence against Women as, ‘any act of gender-based violence that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion, or arbitrary deprivation of liberty, whether occurring in public or private life’ (UN General Assembly, 1993, p 3). GBV includes sexual violence, exploitation, domestic abuse, trafficking, honour killings, and harmful practices, which both constitute and lead to further violence. While its prevalence varies across cultures and regions, no society is immune to gender violence (Desai and Mandal, 2022). Crises such as conflict, post-conflict instability, and natural disasters exacerbate GBV, with far-reaching consequences for individuals, families, communities, and economies. Recognized as a ‘global health crisis’ (UNFPA, 2019, p 19), GBV persists due to cultures of impunity, weak law enforcement, and deeply ingrained social norms.

Before turning to formal definitions, it is important to acknowledge that the act of defining ‘harmful practices’ is itself an exercise of power and

agenda-setting. The labels used in global governance – whether ‘child marriage’ or ‘female genital mutilation’ – are often the result of negotiation between states, UN agencies, activists, and donors, and may diverge significantly from local terms and framings. These conceptual constructs are not only descriptive; they are prescriptive, seeking to change behaviours and reframe social norms according to particular human rights visions.

Harmful practices, as defined by the Committee on the Elimination of Discrimination against Women and the Committee on the Rights of the Child:

are persistent practices and behaviours that are grounded on discrimination on the basis of sex, gender, age and other grounds as well as multiple and/or intersecting forms of discrimination that often involve violence and cause physical and/or psychological harm or suffering. The harm that these practices cause to the victims surpass the immediate physical and mental consequences and often has the purpose or effect of impairing the recognition, enjoyment and exercise of the human rights and fundamental freedoms of women and children. There is also a negative impact on their dignity, physical, psychosocial and moral integrity and development, participation, health, educational, economic and social status. (CEDAW and CRC, 2014, p 6)

This definition explicitly captures the intersections of gender-based discrimination, violence, and harmful practices as severe human rights violations in and of themselves, which negatively impact various other civil, political, economic and social rights, including the right to health and the right to education. In a similar vein, the Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa, better known as the Maputo Protocol, defines harmful practices as ‘all behaviour, attitudes, and practices which negatively affect the fundamental rights of women and girls, such as their right to life, health, dignity, education, and physical integrity’ (African Union, 2003, p 4).

The terminology surrounding harmful practices has evolved significantly over time. Originally, they were referred to as *harmful traditional practices* or *harmful cultural practices*. However, these terms often carried colonial and culturally biased undertones, as they disproportionately focused on a limited range of practices mainly in the Global South (OHCHR, 1995; Winter, Thompson and Jeffreys, 2002). Postcolonial critiques (Narayan, 1997; Mohanty, 2003) prompted a re-evaluation of this terminology, highlighting the need to acknowledge similar practices in the Global North, such as plastic surgery aimed at conforming to socially constructed beauty standards (Jeffreys, 2005). As a result, direct references to *tradition* and *culture* have been omitted from the term *harmful practices* in international discourses. Moreover,

recent developments of international cultural heritage law attest that such harmful practices are outside the ‘cultural scope’ of protection. In other words, UNESCO conventions protecting cultural diversity and intangible cultural heritage protect only cultural practices and manifestations that fully conform with the human rights pantheon. This excludes harmful practices from their purview (UNESCO, 2005; Vadi, 2023).

As Meyer and Prügel (1999, p 4) argue, the term ‘harmful practices’ ‘emerge[s] from specific political debates that have characterized the latter part of the twentieth century; namely, the debates about the role of women in society and about political authority in a world that increasingly connects agents from different continents, states, regions, cities, and neighborhoods’. As the vocabulary choice is inherently ‘politically loaded’ (Meyer and Prügel, 1999, p 5) and various values attach to distinct terms, researchers tend to explain their choice of terminology (Sundby, Essén and Johansen, 2013; Johnsdotter and Johansen, 2020). Admittedly, even the choice of writing in English is politically loaded. Nonetheless, for the sake of accessibility and transferability of knowledge, this is the common language used in academia. To counter any hegemonic bias, efforts were made to reference scholars and practitioners coming from different geographical areas and linguistic backgrounds.

This book adopts terminology aligned with the current global governance agenda, acknowledging the evolution of language in this field. For example, as the term *mutilation* has been a source of polarization, the existing literature has used various other terms, including *female circumcision*, *genital cutting*, *genital alteration*, or *modification*. For over a decade, UNFPA and UNICEF used the dual term *female genital mutilation/cutting (FGM/C)* but reverted to *female genital mutilation (FGM)* in 2016. The choice of terminology remains contested, with both advantages and drawbacks. Proponents argue that the term FGM unequivocally establishes these practices as a form of violence against women and a violation of their rights to bodily integrity and health (WHO, 2008). It has also been ‘instrumental in generating political will’ to end the practice (Brady et al, 2019, p 1914). Opponents contend that the term can be perceived as ethnocentric, judgmental, demeaning, offensive, and alienating (Shell-Duncan, 2001; Andro and Lesclingand, 2016; Johnsdotter and Essén, 2016; Earp and Johnsdotter, 2021; Johnson-Agbakwu and Manin, 2021). A summary of key justifications and criticisms is provided by Johnsdotter and Johansen (2020, p 10).

This book focuses on three specific forms of harmful practices that adversely affect women’s sexual and reproductive health and rights (SRHR) and bodily integrity: female genital mutilation, child marriage, and gender-biased sex selection. FGM involves all procedures related to the partial or total removal of external female genitalia or other injury to the female genital organs for non-medical reasons such as clitoridectomy, excision, or infibulation

(WHO, 2025). Child marriage is defined as any formal marriage or informal union between a child under the age of 18 and an adult or another child (CEDAW and CRC, 2014). It is considered a form of forced marriage, as one or both parties have not expressed their full, free, and informed consent to the marriage (OHCHR, 2025). For this reason, it is often referred to as ‘child and early forced marriage’ (Campbell, Roberts, and Sarkaria, 2020, p 79). Gender-biased sex selection is choosing the sex of one’s offspring, often in favour of sons (Rahm, 2019a). Sex selection can take place at a preconception stage, during pregnancy through prenatal sex detection and sex-selective abortion, or following birth through infanticide or child neglect (WHO, 2011). The three practices occur at different phases of women’s lives thus covering their entire lifespan – before birth with prenatal sex selection, after birth with infanticide or fatal neglect, in early childhood through FGM, and into adolescence with child and forced marriage. In adulthood, women face pressures to perpetuate these practices by subjecting their daughters or granddaughters to them. The three practices are not limited to a few countries but cover a broad geographical scope both in the southern and northern hemisphere. Finally, they are not of mere historical interest (like foot binding or sati) but are of dramatic actuality with severe consequences, infringing on women’s rights and human dignity. As such, they have received increased recognition in global governance (UNFPA, 2020a).

In line with the book’s focus, this investigation uses a case study approach and puts a spotlight on three initiatives, which address harmful practices transnationally in contribution to SDG 5.3: the UNFPA–UNICEF Joint Programme to Eliminate Female Genital Mutilation (2007–2030), the UNFPA–UNICEF Global Programme to End Child Marriage (2016–2030), the UNFPA Global Programme to Address Gender-Biased Sex Selection (2016–2023). These programmes were selected as representative cases based on the following criteria:

1. Alignment: They are gender programmes funded by the EU, operated by the UN, and carried out by international agencies, aligning with the broader themes of this book.
2. Comparability: They are independently administered but comparable programmes. They share similar objectives and operational frameworks, facilitating meaningful comparison.
3. Access and familiarity: I am familiar with the subjects and have access to key stakeholders and programme information for in-depth analysis.

Having researched existing initiatives, I chose the programmes on gender-biased sex selection (GBSS), FGM, and child marriage as critical cases for global mobilization against harmful practices. Other global programmes, such as the Spotlight Initiative, one of the largest global efforts to end violence

against women supported by the EU with €500 million in funding, were excluded due to their broader focus on multiple forms of violence, including domestic and gender-based violence, trafficking, femicide, and sexual and economic exploitation. While recognizing the fluid boundaries and spillover effects between diverse forms of (and global governance against) gender-based violence, this analysis focuses on programmes targeting specific harmful practices to enable a more detailed examination of governance structures and interventions.

How do global gender programmes impact knowledge and policy production?

The book is based on the Marie Skłodowska-Curie Actions (MSCA) Global Fellowship project, ‘Knowledge Transfer in Global Gender Programmes’ (GlobalKnoT), an interdisciplinary investigation on global governance of harmful practices conducted over three years in collaboration with the Central European University, the European University Institute, and the University of Toronto. Presenting the key results of the GlobalKnoT project, this book offers insights into the functioning and efficacy of global gender programmes, while advancing conceptual frameworks on global governance, knowledge transfer, and translation.

The book pursues three interconnected research goals. First, it seeks to expand our *theoretical* understanding of global governance by examining the actors, networks, and mechanisms that enable transnational knowledge transfer in the context of global gender programmes. By applying ANT to the study of these programmes, it provides a novel lens for identifying and assessing the diffusion processes, power dynamics, and relationships shaping global governance. Second, through detailed *empirical* case studies, the book investigates the functioning and efficacy of UN-led global programmes addressing female genital mutilation, gender-biased sex selection, and child marriage. These programmes serve as a case in point for exploring how knowledge is produced, diffused, and translated into policies at global, national, and local levels. The analysis sheds light on the workings of transnational initiatives and their effects on policy and social norms. Third, the book aims to offer actionable, *practical* recommendations for decision-makers, policy makers, and international organizations. From an ANT perspective, this third aim is presumptuous: ‘If you were studying ants, instead of ANT, would you expect ants to *learn* something from your study? Of course not. ... What makes you think that a study was supposed to teach things to the people being studied?’ (Latour, 2004, p 71). In defence, knowing the great emphasis placed on evidence generation and learning in international organizations and global programmes, the aim is to identify what facilitates or hinders the translation of knowledge into policy. In that,

the work hopes to inform future design and implementation strategies of global programmes aimed at eradicating harmful practices, with possible relevance for other programmes.

The overarching research question of this investigation is: *How do global gender programmes impact knowledge and policy production?* To address this, the book explores the following sub-questions:

- How is knowledge generated, processed, and transferred through global programmes and across governance levels?
- Who are the key actors and networks involved in knowledge transfer, and how do they influence policy production?
- What role do knowledge hubs play in mediating and facilitating the transfer of policy-relevant knowledge?
- What factors support or hinder the translation of knowledge into policies at the global, national, and local levels?

The research builds on two working hypotheses. Global programmes emphasize knowledge generation and mobilization as a strategic component of their efforts to eradicate harmful practices (H1). Effective knowledge transfer is hindered by these programmes' inability to robustly measure and evaluate the impact of their interventions (H2). By testing these hypotheses, the book uncovers critical insights into the opportunities and challenges inherent in transnational knowledge transfer, contributing to ongoing debates on the functioning and efficacy of global governance mechanisms. It also identifies practical pathways for strengthening knowledge-to-policy processes, ultimately accelerating progress toward the eradication of harmful practices and advancing gender equality globally.

Science and Technology Studies meets global governance: an unconventional marriage and its methodological innovations

To address these research questions and test the working hypotheses, this work adopts an interdisciplinary approach by bridging Science and Technology Studies (STS) and global governance, two fields rarely combined in research on contemporary transnational policy making and global programming. STS offers a lens to examine how material artifacts, technologies, and knowledge production shape governance structures 'in an age deeply affected by transnational socio-technical processes' (Mayer and Acuto, 2015, p 663), yet has been critiqued for neglecting power dynamics (Jepsen, 2017). Meanwhile, global governance scholarship critically explores institutional frameworks, power asymmetries, and regulatory mechanisms, providing analytical depth on accountability, legitimacy, and authority in international

institutions (Zürn, 2018). By integrating these perspectives, this study aims for a more holistic analysis: STS foregrounds the material and technological dimensions of transnational policy making, and global governance contributes a power-analytical framework. Together, this unconventional ‘marriage’ provides a nuanced understanding of how policies are shaped, implemented, and contested.

Within STS, ANT emerged in the 1980s as a response to dominant theories of knowledge production and governance. Developed primarily by Bruno Latour, Michel Callon, and John Law, ANT sought to challenge the social determinism of traditional sociology and the technological determinism of classical science studies (Latour, 2005; Cochoy et al, 2014; Lezaun, 2017). Latour, in particular, was influential in shifting STS from constructivist explanations of science (which emphasized social factors in shaping knowledge) to a more relational and materialist perspective, arguing that scientific knowledge and technological development cannot be understood separately from the networks of human and non-human actors that sustain them. Latour’s seminal works, such as *Science in Action* (1987), *We Have Never Been Modern* (1993), and *Reassembling the Social* (2005), critique traditional divisions between society and nature, subject and object, human and non-human. He rejected the idea that social forces alone explain the development of science and technology, instead arguing that scientific facts and governance structures are co-produced through networks of heterogeneous actors, including scientists, policy makers, instruments, and technical standards. For ANT, knowledge production and governance are mediated by complex assemblages of human and non-human actors (Latour, 2005). This insight is crucial for understanding contemporary global governance, where inter alia, digital infrastructures, policy documents, funding mechanisms, and data streams play an active role in shaping decision-making.

ANT operates within a relational ontology (Thór Jóhannesson and Bærenholdt, 2020) and relational sociology (Papilloud, 2018), emphasizing that entities – whether humans, institutions, technologies, or policies – gain meaning and existence through their relationships with other entities. ANT rejects dualisms such as macro/micro, subject/object, and nature/society (Blok, Farías and Roberts, 2019), instead advocating for an empirical tracing of networks to understand governance as a dynamic and evolving process. As stated by Bueger (2013, p 340), ‘in the study of international organizations, ANT provides a toolbox for studying informal politics, analyzing situations in which actors refuse to comply with the identities that conventional models prescribe for them or where organizations experiment with new forms of governance that escape categories such as public/private, state/nonstate, or science/politics’. This approach challenges the anthropocentric understanding of agency by recognizing the role of non-human entities

(actants) in shaping governance (Braun, Schindler, and Wille, 2019). By following how these entities interact, ANT reveals how authority is stabilized, contested, and transformed over time.

Applying ANT to global governance and transnational programmes has several advantages. It allows us to see global governance not as static but as inherently fluid, with policies, standards, and institutional arrangements under constant negotiation. ANT's emphasis on tracing relations and interactions provides an analytical tool to examine:

- How global norms and policies emerge, stabilize, evolve, or cease to exist.
- How human and non-human entities (for example, numbers, legal frameworks, technology) jointly shape policy outcomes.
- How power and influence operate across multi-stakeholder partnerships, technical tools, and institutional settings.

This methodological approach uncovers the often-hidden mechanisms of authority in global decision-making, emphasizing that governance is not just a product of formal institutions but of distributed agency among diverse actors and actants.

ANT is not merely an 'empirical theory' (Bueger and Stockbruegger, 2018, p 43) but a methodological approach, a way of studying governance by allowing actors to express themselves without imposing predefined categories. According to Latour (2005, p 142): 'It's a theory, and a strong one I think, but about how to study things, or rather how not to study them – or rather, how to let the actors have some room to express themselves'. Rather than assuming predefined structures, ANT instructs researchers to 'follow the links [actors] make among those (diverse) elements that would have looked completely incommensurable if you had followed normal procedures' (Latour, 2005, pp 141–2). By tracing these linkages, ANT enables researchers to analyse not just networks but the actions, flows, and negotiations within them. Latour (2005, p 143) contends that mere connectivity or interconnection is insufficient; what matters is the nature of the actions that flow within these networks. He suggests that instead of thinking in terms of 'networks', we should emphasize 'work-nets' to highlight the dynamic processes at play. This focus on movement, transformation, and ongoing interactions makes ANT useful for examining knowledge transfer in global gender governance. This approach fits well into the larger debate on knowledge networks in global governance: global programmes are recognized for not only enabling the circulation of knowledge across time and space, but also functioning as 'mobile technologies' of governance by actively shaping development agendas, prescribing normative behaviours, and fostering civic engagement through participatory development initiatives (Ilcan and Phillips, 2008, p 711). Applying ANT to global gender programming allows us to

rethink ‘the social technology of networks as both agencies for transnational feminist networking and also as structures of often invisible, embedded codes of knowledge orders’ (Stone, 2010, p 36).

As a justification over other frameworks, ANT offers a dynamic and relational approach that contrasts with more static or normative frameworks in policy analysis (Meier, 2014). Traditional liberal feminist approaches tend to assume universal oppression of women and linear fixes, where best practices can be identified and applied across contexts. However, postcolonial and intersectional feminist critiques (Spivak, 1994; Narayan, 1997; Mohanty, 2003) highlight the power asymmetries embedded in knowledge production and transfer. Whereas global policy diffusion has been traditionally understood as top-down processes (Smith, 2013), ANT traces how knowledge is assembled, circulated, resisted, and reinterpreted across actor-networks. It does not assume that governance is controlled by a given actor (for example, states or international organizations) but rather investigates how diverse actors – human and non-human – co-produce policy outcomes. By integrating global governance and STS/ANT, this study moves beyond rigid categories (for example, ‘Global North vs Global South’ or ‘top-down vs bottom-up’) to explore how gender knowledge circulates through heterogeneous networks. It highlights the material, technological, and institutional forces shaping transnational policy making and reveals the often-unseen dynamics of power and oppression, authority and resistance in global governance. By foregrounding relations, agency, and transformation, ANT provides an innovative analytical perspective for understanding governance in motion.

Positionality: turning global gender programmes ‘inside out’

Reflecting on positionality, Sun Yee Yip (2024, p 230) invites qualitative researchers ‘to pay attention to the different facets and fluidity of their insider/outsider positions’ vis-à-vis their research subjects. Responding to such a call, I write this book as both an insider and an outsider (with shades in between).

As an *insider*, I worked as an international consultant and trainer within the Global Programme to Address Gender-Biased Sex Selection (GBSS) between 2018 and 2023, collaborating with UNFPA headquarters, regional offices, and country teams. My role involved developing global monitoring and evaluation (M&E) guidelines, conducting training, and engaging with policy makers across governance levels. This experience provided a rare inside view of international organizations – how knowledge is adapted and translated across global, regional, and national levels. However, insider status also comes with limitations. As a consultant, I did not have full access to all decision-making processes, and my observations were shaped by

my specific role working for the GBSS Programme. To mitigate any bias, I actively participated in international conferences and workshops on FGM and child marriage and engaged with parallel UNFPA–UNICEF operated programmes. The research is inspired by the work by Riles (2000), who proposes a method for studying transnational knowledge transfer. As an anthropologist and insider, Riles closely followed Fijian delegates preparing for and participating in the 1995 Beijing Conference. In doing so, she shifted the focus from external policy outcomes to the internal mechanisms through which knowledge is constructed, circulated, and legitimized within global governance networks. I adopt a similar lens by turning global gender programmes ‘inside out’.

As an *outsider*, my first personal encounter with ‘harmful’ practices occurred at age 14 in a village in the *Eifel* region of Germany, where I spent most of my weekends growing up. As part of a longstanding May tradition – one that continues to this day – my name was placed, without my consent, on a list of all unmarried girls aged 14 and above who reside in the community, each to be auctioned to the highest male bidder for the annual celebrations. This event, known as *Jungfernversteigerung* or the ‘virgin auction’, typically takes place in the local pub, where only men can participate. The highest bidder and his ‘chosen’ girl are crowned May King and Queen, a source of local pride. Meanwhile, those auctioned for lower sums often face public humiliation. At the time, my boyfriend could remove my name from the list by buying me out with 50 Deutsche Mark and a case of Bitburger beer. I recall feelings of anger and frustration – over a process I had neither consented to nor wished to partake in. Yet, many of my female friends, who unlike me had grown up exclusively in this part of Germany, embraced it with pride. They eagerly anticipated the auction results, viewing them as a measure of their ‘worth’ and a path to local prestige. The May Day custom from my village cannot be equated with the much more severe practices examined in this book. However, this personal anecdote illustrates how communities around the world hold on to patriarchal practices in the name of tradition, using communal transactions to control access to females. While the tradition has since evolved to allow women to auction men in leap years, its origins and underlying gender dynamics remain significant. This experience heightened my awareness of gendered social norms, though it is not the primary reason I study them.

Over nearly two decades, I have researched violence against women and harmful practices. This research has shown that far from being limited to given regions or areas of the world, such practices are entrenched across continents. In conducting a study like this of a truly global nature, it is evident that some phenomena under investigation are not directly part of my own upbringing. I have investigated them through academic inquiry, extensive field research, policy engagement, and collaborations with international

organizations, civil society, practitioners, activists, and survivors. Work on harmful practices has been critiqued when conducted by ‘outsiders’ unfamiliar with the lived experiences of those affected. For example, [Ahmadu \(2000\)](#) argues that dominant global discourses on female circumcision fail to reflect the perspectives of those within practising communities. While I acknowledge this critique, I also challenge the notion that personal experience is a prerequisite for rigorous scholarship. Scholars routinely research topics they have not lived – from breast cancer to space travel. What matters is an ethical, reflexive, and rigorous approach that amplifies diverse voices and ensures recognition of multiple knowledge sources. In recognizing my dual position as an insider/outsider, I hope to enhance the rigour of this analysis.

Mixing methods: mapping actors in action

This book seeks to map the shifting actor–network constellations of global gender programmes by combining qualitative and quantitative research methods, and integrating diverse data sources and analytical techniques.

The *qualitative* component involves content-based analysis derived from multiple sources: participant observation at international conferences on harmful practices, global policy and programme files, key informant interviews, and insider knowledge. Participant observation took place during the Commission on the Status of Women (CSW66 and CSW67), and international conferences and workshops on gender-biased sex selection, female genital mutilation, and child marriage, including inter-ministerial dialogues and high-level forums on harmful practices. The COVID-19 pandemic shifted many of these events online, emphasizing the increasing role of digital platforms in knowledge transfer. Actors and networks were identified through various other channels, including: global programme publications (authorship, acknowledgments, work cited); official programme websites and social media accounts; collaborating research centres and consortiums; academic journals; and research digests produced by the global programmes. Particular attention was placed on policy and programme files, including official documents released by the global programmes such as planning frameworks, technical reports, policy briefs, factsheets, and evaluations. This data is publicly available and accessible online through UNFPA and UNICEF websites, country offices, and donor webpages. The different knowledge platforms of the global programmes were identified and classified. Close attention was paid to the interlinkages, where the same actors and networks are engaged in more than one programme. These stakeholders were then contacted and invited for interviews. In total, 35 key informants were selected via snowball sampling and interviewed after providing informed consent. Informants represented, and/or were associated with, one or

more of the three global programmes. Respondents were recruited from various levels – global, regional, national, local – and sectors, in particular international governmental organizations, non-governmental organizations (NGOs), and academia. Participants included UN officials, programme managers, representatives from implementing agencies and partner NGOs, as well as scholars. The study did not directly target vulnerable groups (for example, survivors of harmful practices) but rather key informants engaged in global governance efforts to eliminate such practices. While some interviewees may have been survivors, they were interviewed in their capacity as advocates and actors within governance networks, rather than for their personal experiences. Prior research has documented the voices and lived experiences of affected populations (Medie, 2020; McCabe and Eglen, 2022; Ridley et al, 2023). This study instead focuses on knowledge transfer within global programmes and the role of key stakeholders in shaping policies and interventions to end harmful practices. Table 1.1 provides an overview of the conducted interviews by respondents' gender, age, programme affiliation, region, sector, and level. The data reveal an overrepresentation of female respondents and individuals operating at the global level. The former is likely due to the gendered nature of the programmes, which tend to attract more female staff, while the latter was intentional and aligned with the research design's focus on global programmes (see Table 1.1).

A semi-structured interview guide was developed and pre-tested before roll-out. The questions focused on seven predefined themes related to knowledge transfer in global programmes: types, facilitators, and barriers of knowledge transfer; actors/networks involved in transfer; sources of power/authority in global programmes; knowledge gaps in ending harmful practices; monitoring and evaluation mechanisms; short- and long-term goals of knowledge mobilization; transfer across country contexts. The interviews were conducted via Zoom between June 2022 and February 2023. Informed consent was obtained both orally and in writing. The average duration of the interviews was 60

Table 1.1: Interviews by respondent gender, age, programme affiliation, region, sector, and level

Gender	Age	Programme*	Region**	Sector	Level
Female: 27	25–40: 13	GBSS: 17	Africa: 9	IGO: 20	Global: 21
Male: 8	40–55: 15	FGM: 17	America: 7	NGO: 8	Regional: 5
	55–70: 7	CM: 12	Asia: 8	Academia: 5	National: 7
			Australia: 1	Other: 2	Local: 2
			Europe: 10		

Notes: * Exceeds n=35, due to association with more than one programme

** Refers to respondent's current work location

minutes. The interviews were transcribed, anonymized, and thematically analysed using [Clarke and Braun's \(2022\)](#) approach. A detailed codebook guided the analysis, which was performed collaboratively using NVivo software, with a consensus coding approach and cross-check validation for reliability. The coding process involved both predefined and emerging codes. Knowledge hubs and global programme evaluation were among the recurring emerging themes in the collected data, which form the basis of [Chapters 3](#) and [4](#), respectively. Considering the global scale of the programmes, it was necessary to complement the qualitative data with quantitative insights.

The *quantitative* component involved two parts: a social network analysis and a secondary demographic data analysis. First, in line with recent scholarship ([Hellsten, Jacobs and Wonneberger, 2019](#); [Hellsten and Leydesdorff, 2020](#)), I combined ANT and SNA to map the complex interactions of actors and networks in online knowledge transfer. Two of the three global programmes under investigation actively engage on Twitter. Following prominent #Hashtags (for example, #EndChildMarriage, #EndFGM) and the global programmes themselves (users: @gpchildmarriage, @gptoendfgm) allowed me to map and visualize key actors and their network configurations during peak times, when the networks are in 'high performance' mode (for example, International Day of Zero Tolerance of FGM or International Women's Day). Knowledge transfer via Twitter – with its 280-character limits – is by no means a perfect reflection of the real world. Not every key player is online. Especially the main target groups, marginalized women and girls are most affected by the digital gender divide, a topic of ample debate during the 67th Commission on the Status of Women. Nevertheless, Twitter at the time represented a significant platform for global advocacy and stakeholder interaction. The Twitter data were collected in 2022 and early 2023 before restrictions on data scraping were introduced for researchers. Data extraction and network visualizations were generated using the SocioViz software, which allowed the mapping of the complex configurations of global actors (international organizations, donors, governments, NGOs, activists, influencers) and their relationships.

Second, the work drew from demographic datasets, including Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS), national census, and data derived from international agencies including the United Nations and the World Bank. A DiD approach was applied in its simplest form to the available demographic data. The analysis assesses whether the global programmes have met their targets in reducing harmful practices and compares intervention and non-intervention countries with similar socio-cultural, demographic, and political traits before and after the interventions. Although spillover effects limit absolute comparisons, a

DiD approach can provide valuable insights into the relative effectiveness of these programmes.

This study received ethical approval from the Central European University and the University of Toronto. To ensure confidentiality, all data were anonymized, and interview materials were securely stored. The research also considered WHO's (2021) ethical guidelines for the design, implementation, and dissemination of studies related to harmful practices.

What this book is about and why it matters

The book is divided into five chapters. This introductory chapter presents the rationale and research questions of the investigation. Despite growing international attention and several decades of interventions to shape policies and shift harmful norms, there is a surprising gap in global policy research linked to social norms and behaviour change interventions, creating a need to better understand the actors and networks that are shaping global governance and knowledge diffusion to address harmful practices. [Chapter 1](#) presents the mixed-methods research approach and provides insights into the motivation and positioning of the author, who has both observed and participated in transnational knowledge transfer as an international (policy) consultant for global gender programmes. The introduction closes with the outline and major contributions of the book.

[Chapter 2](#) critically examines harmful practices and international efforts aimed at eradicating them. It begins by analysing child marriage, female genital mutilation and gender-biased sex selection, drawing from anthropology, sociology, public health, and demography to explore the motives, methods, and magnitudes of these practices. These practices share common motives, rooted in socio-cultural norms, family systems and marriageability concerns, among others. While these practices have distinct methods, they have all been influenced by technological changes. Their magnitudes are significant, negatively impacting the well-being of millions of women and girls worldwide and carrying long-term social consequences. The chapter also discusses the commonalities and differences in the manifestation of harmful practices across the globe. Focus then shifts to the historical foundations of global governance against harmful practices. Child marriage and female genital mutilation were recognized earlier, dating back to the mid-20th century, with the Universal Declaration of Human Rights and WHO involvement. In contrast, gender-biased sex selection gained attention only in the 1990s when Nobel laureate Amartya Sen highlighted the issue. Numerous international conventions and declarations have condemned harmful practices as human rights violations. Commitments to end harmful practices were also enshrined in the Sustainable Development Goals. Yet, the practices are prioritized distinctly on the global agenda, where female

genital mutilation and child marriage are recognized as forms of ‘violence’ to be ‘eliminated’, and sex selection is portrayed as an ‘unethical’ practice to be ‘prevented’. Drawing from these differences, the chapter explores the theoretical and conceptual underpinnings of what is considered global ‘health’ and ‘harm’.

Chapter 3 lies at the heart of the investigation. It focuses on global gender programmes, their actors and networks. Actor–Network Theory is used to conceptualize the novel configurations of entities (for example, people, research evidence, technologies, financial resources, institutions, and regulation) that jointly shape global governance. With the post-2015 development agenda, there has been a rapid rise in global programmes that pool resources and expertise to address common (policy) problems at global, regional, national, and local levels. These multistakeholder partnerships generate and mobilize knowledge for (policy) change across diverse socio-cultural and political systems. The programmes on female genital mutilation, child marriage, and gender-biased sex selection are representative of this trend and serve as case studies. How is knowledge generated, processed, and transferred within and across these global programmes? Which knowledge(s) become dominant, political, and competitive over time and across programmes? Who are the actors and networks engaged in transnational knowledge transfer? What are their power dynamics? What helps or hinders knowledge transfer? Exploring similarities and differences across the three global gender programmes, particular attention is placed on the so-called ‘knowledge hubs’ that the programmes have created to scale up transnational lessons sharing and the associated obstacles that hinder effective transfer of knowledge into policy.

Chapter 4 covers global programme monitoring and evaluation (M&E). The chapter investigates the main M&E variables used for assessing interventions against harmful practices. Each of the variables comes with a set of indicators, definitions and computations. The analysis shows a continuous decline in the prevalence of harmful practices throughout large parts of the world. Genital mutilation among girls aged 15–19 has declined in 10 of the 17 programme countries. Child marriage has been on the decline by 15 per cent globally over the past decade. Gender-biased sex selection – measured in the sex ratio at birth – has plateaued or declined in four of the six target countries. The chapter asks to what extent these changes can be attributed to the global programmes by drawing from programme evaluations, demographic data, and employing a DiD approach (pre- and post-test in global programme countries versus control countries that share similar characteristics). It closes with political tensions, economic hardship, and the COVID-19 pandemic hindering progress in eradicating harmful practices.

Chapter 5 concludes the analysis with impulses on how knowledge transfer of global programmes can be improved. It places global governance against

harmful practices in its larger context of global social norm change and efforts to alter knowledge, attitudes and practices. Harmful practices are deeply rooted in the socio-cultural norms and traditions of people who practice them. Despite growing international attention, legal prohibition and strong evidence that these practices infringe the health and rights of women and girls, communities often resist abandoning them for a variety of socio-cultural reasons. Recognizing the limitation of legal reform in challenging customary law, international organizations actively promote the use of technologies and innovative approaches to reach their key audiences locally, for example, by working with influencers to create a tipping point for the abandonment of harmful practices. While socio-technological innovations show promise in altering gender norms, they bypass the nation-state and pose questions for accountability and oversight. The book ends with a summary and an outlook of future global governance promoting gender equality and the elimination of harmful practices.

This book makes important contributions to an underexplored area: the governance and knowledge transfer surrounding sticky norms of harmful practices. It provides novel insights into the functioning of global programmes and their efforts to diffuse knowledge, contributing the rich literature on transnational governance and policy transfer (Stone and Maxwell, 2005; Stone, 2013; Hadjiisky, Pal, and Walker, 2017; Stone and Moloney, 2019; Oliveira, 2021). The book goes beyond the state-of-the-art to contribute to our understanding of global programming in four main ways: (1) theoretical innovation, (2) empirical insights, (3) interdisciplinary methodologies, and (4) practical guidance to offer a comprehensive understanding of harmful practices and global efforts to combat them.

First, policy scholars have struggled with conceptualizing the multiple actors and their complex networks involved in global policy (Stone, 2013). Theoretically, different approaches are at hand, derived from systems thinking, (social) diffusion theories, knowledge management theories, and complexity theory. Yet, they only review part of the innovation stages involved in global programming (Young, Borland, and Coghill, 2010). Unlike other approaches, ANT offers a broader umbrella theory and a powerful tool for opening up the black box of global policy interventions (Bilodeau and Potvin, 2018). Actor networks are heterogeneous (Latour, 1999). They connect various entities such as people, research evidence, technologies, financial resources, institutions, and regulation, all acting together to produce innovation. Although ANT has gained popularity and promises to be a useful analytical tool to assess complex systems and change (Nexon and Pouliot, 2013), it has been underexploited in global policy studies so far (Gingrich and Köngeter, 2017). The book systematically applies ANT, popular in Sociology and STS, to the field of global policy to expand our *theoretical* understanding of the actors in newly emerging networks of global programmes.

Second, based on these theoretical foundations, this book investigates knowledge transfer through global programmes. While transfer and diffusion studies have focused predominantly on *policy* transfer, *knowledge* transfer appears to be more frequent transnationally (Hadjiisky, Pal, and Walker, 2017). The problem with global knowledge transfer is that it has created an industry of showcasing ‘what works’, whereas ‘best practices’ are often context specific, not transferable, of marginal importance in the policy-making process, or even based on popular policy myths, rather than empirical evidence (Stead, 2012). The transfer can occur horizontally (state-to-state) and vertically (from one governance level to another) (Evans, 2017a). Yet, a new dimension not properly captured in current literature is knowledge diffusion through so-called ‘knowledge hubs’. The global programmes studied here have created different global knowledge hubs to promote knowledge transfer, policy coherence and learning across levels and scales. By critically assessing the information distributed through these hubs, the book expands our *empirical* understanding of knowledge diffusion, function, and efficiency in global programmes.

Third, the book makes important methodological contributions through its mixed methods approach. It combines expert interviews, participant observations, policy and programme files analysis, and social network analysis using Twitter data (now X). I had the opportunity to participate in numerous official, ‘invite only’ conferences on FGM and GBSS and child marriage due to my role as an international consultant and trainer. This insider perspective allowed me to observe how knowledge is circulated, establish contact with key interviewees, and gain insights into the inner workings of gender programmes. In an attempt to map the dynamic and shifting actor network constellations, the book seeks to make *methodological* contributions of turning global policy networks ‘inside out’ (Riles, 2000).

Fourth, and most importantly, the book seeks to put a spotlight on social norm change interventions, a delicate terrain within international development, and inform future phases of global programming. Global public challenges rooted in harmful norms and practices are especially difficult to tackle because they are highly contested and often resilient to policy reforms on the ground. FGM, GBSS, and child marriage are powerful examples of such ‘sticky policy problems’ (Kahan, 2000). There is a growing interest of the international development cooperation on social and gender norm change interventions. Yet, even though different harmful practices are rooted in gender inequality and require social norm change (Bicchieri and Mercier, 2014), they have been traditionally studied in silos, with a few exceptions. For example, Rahm and Kostenzer (2018) provide one of the first investigations to compare GBSS and FGM on the global agenda. They find that despite similarities in scale (for example, number of affected women), more global resources, attention, and political weight is given to

the ‘eradication’ of female genital mutilation versus the ‘prevention’ of sex selection. The reasons for this bias are mainly due to regional focus (Africa vs Asia) and form of discrimination (postnatal vs prenatal) but also institutional fragmentation. By comparing different global programmes, the research offers *practical* guidance for decision-makers and international organizations on how to enhance global gender policy with potential relevance for other policy fields. These evidence-based insights come at a critical juncture of the UN system, facing budget cuts and profound structural and programmatic transformations.

In summary, the book offers a unique combination of theoretical innovation, empirical evidence, methodological novelty, and practical insights. It not only enriches our understanding of harmful practices and global governance but also provides vital insights to strengthen future interventions. By connecting theoretical insights to real-world applications, it addresses the ‘research-to-action’ gap in the field of gender equality and harmful practices. As such, the book is a valuable resource not only for academics, but the findings have significant implications for policy makers, practitioners, and international organizations working to eradicate harmful practices and promote gender equality worldwide.

Harmful Practices and Global Governance

Harmful practices, including from child marriage, female genital mutilation, and gender-biased sex selection, persist across societies, affecting millions of women and girls. Deeply entrenched in social norms and power structures, these practices violate human rights and undermine gender equality. Addressing them requires shifts in social attitudes and gender norms, along with legal response, policy interventions, and economic incentives. Global governance plays an important role in this process as international organizations, transnational advocacy networks, and states have come together to define, monitor, and eliminate harmful practices. Over the past decades, harmful practices have gained growing attention, bolstered by international human rights conventions, feminist movements, and evidence-based policy making. Landmark agreements such as the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and the Beijing Platform for Action have established a normative framework that urges states to take action. At the same time, global governance mechanisms – ranging from United Nations initiatives to regional legal instruments – have sought to translate these commitments into measurable actions. However, progress remains uneven, challenged by political resistance, cultural relativism, and the need for context-specific solutions.

Global governance is defined here as the complex and dynamic system of ‘formal and informal institutions, mechanisms, relationships, and processes through which diverse state and non-state actors articulate collective interests, establish rights and obligations, and mediate differences’ to paraphrase [Thakur and Van Langenhove \(2006, p 233\)](#). On the one hand, global governance involves institutionalized coordination efforts to establish binding rules and regulations for addressing transnational challenges and providing global public goods ([Risse, 2012](#); [Kaul, 2016](#)). On the other hand, it operates as a ‘nonhierarchical network’ spanning multiple levels of governance and encompassing international organizations, transnational regimes, markets,

and civil society actors (Rittberger, 2002, p 2). Domínguez and Velázquez Flores (2018) offer historical background, definitions, and features of global governance. As both an analytical framework and a mode of regulation beyond the nation-state, it reflects the evolving interplay between power, knowledge, and legitimacy in shaping global policies. Global policy is a closely related concept that has been defined as a ‘set of ... processes of public-private deliberation and cooperation among both official state based and international organisations with non-state actors around establishing common norms and policy agendas for securing the delivery of global public goods or ameliorating transnational problems’ (Stone and Ladi, 2015, p 840). Pouliot and Thérien (2023, p 22) further expand the concept, shifting its focus ‘from global public goods to bricolage’, highlighting the tensions, value conflicts, and social practices that underpin global policy making.

This chapter examines the global governance of harmful practices, raising critical questions about governance mechanisms and the interplay between cultural norms, legal instruments, and structural inequalities. While practices like female genital mutilation, child marriage, and gender-biased sex selection differ in their manifestations, they share deep-rooted patriarchal underpinnings of controlling women’s bodies, agency, and life trajectories. Building upon the 3-M-Model (Rahm, 2019a), this chapter interrogates the *motives* driving these practices, the *methods* through which they are carried out, and the *magnitude* of their demographic and health consequences. The chapter then turns to the commonalities and differences of harmful practices prevalent across the Global North and the Global South, and the historical evolution of international mobilization against it, tracing key milestones in global policy frameworks. In doing so, the chapter critically assesses how global governance conceptualizes *harmfulness*, exploring how shifting knowledge paradigms and technological advancements have reshaped understandings of health and harm in the global policy arena. A central theme of this chapter – and indeed, the broader inquiry of this book – is the role of knowledge in shaping global understandings of harm. Which or whose knowledge counts in determining what is harmful or not? And how do different epistemic communities influence the governance of harm? These questions remain pivotal in the evolving discourse on harmful practices and their regulation at the global level.

Motives, methods, magnitudes of harmful practices

Understanding harmful practices requires a multidimensional analysis of their underlying motives, the methods through which they are perpetuated, and the magnitude of their impact. These practices are shaped by a complex interplay of cultural norms, social expectations, economic incentives, and political structures across diverse contexts.

While often framed as ‘traditions’, they serve specific functions within societies, reinforcing power hierarchies, controlling female autonomy, and perpetuating gendered inequalities. The methods used to sustain these practices vary widely from rudimentary practices to highly medicalized interventions, making their eradication challenging. The scale of these practices, though varying by region and context, underscores their systemic nature, requiring both targeted interventions and broader structural transformations. Understanding commonalities and differences for why, how, and to what extent societies engage in harmful practices is crucial for effective prevention and response.

A substantial body of literature has examined the prevalence, causes, and consequences of harmful practices (that is, [Kaur, 2013](#); [Guilmoto, 2015](#); [Andro and Lesclingand, 2016](#); [Rahm, 2019a](#); [Presler-Marshall et al, 2020](#); [John, 2021](#); [Psaki et al, 2021](#); [Kok et al, 2023](#); [Nakamura et al, 2023](#)). Much of this research, however, has focused on specific practices or country contexts in isolation, often overlooking the connections between them. For example, of the 24 chapters in the *Routledge International Handbook of Harmful Cultural Practices*, 22 focus exclusively on female genital mutilation ([Jaschok et al, 2024](#)). Similarly, the seminal work *Child Marriage in an International Frame* primarily examines India ([John, 2021](#)) – an important focus given that India alone accounts for roughly one-third of the women and girls worldwide who were married before the age of 18 ([UNICEF, 2025](#)). While such case-specific studies provide valuable depth, they often fail to capture the broader systemic patterns and interlinkages across harmful practices. A more holistic approach is needed to identify cross-cutting drivers and interdependencies that transcend individual contexts and practices to inform global response.

Recognizing the limitations of a fragmented approach, scholars and international agencies increasingly emphasize the interconnections among harmful practices. [Glover and Liebling \(2018\)](#) conducted a systematic review of studies on child marriage, son preference, and female genital mutilation in Asia and Africa, identifying shared control mechanisms that sustain these practices, including religious beliefs, social pressure, and patriarchal structures. They argue that studying harmful practices in isolation overlooks their common roots and that a holistic response could enhance synergy effects to advance gender equality. Similarly, the UNFPA Asia Pacific Regional Office (APRO), together with the United Nations Children’s Fund Regional Office for South Asia (ROSA), released a study on child marriage and its interlinkages with other harmful practices such as dowry, sex selection, and polygamy within South Asia. Their analysis is grounded in the hypothesis that targeting the root causes of one practice may have ripple effects on others, given their shared underlying drivers ([UNFPA APRO and UNICEF ROSA, 2020](#)). In 2021, I was approached by UNFPA APRO and asked to produce a guidance note on *Interlinkages of harmful practices against women and*

girls (Rahm, 2021). Much of what is written in this section originates from this engagement and was updated with the latest evidence.

Similar motives to engage in harmful practices

At the first glance, female genital mutilation (FGM), child marriage, and gender-biased sex selection (GBSS) do not seem to have much in common. These practices vary significantly across geographic, cultural, economic, and social contexts, making it essential to conduct in-depth analyses to understand their specific drivers. For example, in Bangladesh, Pakistan, and Nepal, child marriage is often linked to economic incentives such as dowry, reducing household size, and transferring human capital between families (UNFPA APRO and UNICEF ROSA, 2018). In Gujarat, India, caste traditions, social norms, and concerns over adolescent girls' safety and chastity further influence marriage decisions. Meanwhile, 'love marriages' between adolescent peers are also on the rise in India (UNFPA and UNICEF, 2019). In Zambia, with one of the highest child marriage rates worldwide, consensual unions following teenage pregnancy are quite common (Population Council, 2017), yet trends differ across provinces (Kabelka et al, 2024). These variations underscore the need for localized diagnostics to grasp the unique mechanisms sustaining each practice. However, zooming out to a broader perspective reveals striking similarities in the underlying motives. Across different contexts, these practices are often driven by gender inequality, socio-cultural norms, sexual morality, marriageability concerns, economic pressures, women's safety, religious beliefs, and political factors. While their specific expressions vary, these overarching patterns suggest that the motives behind FGM, child marriage, and GBSS are more alike than they might initially seem.

1. Gender inequality

Harmful practices are rooted in gender inequality, the unequal treatment and opportunities experienced by people based on their gender. Gender inequality persists worldwide, intersecting with race and class and other systems of discrimination (Evans, 2017b). It is commonly expressed in male privileges and favouritism (Jayachandran, 2015) and the belief that girls and women are inferior to boys and men. In many communities where child marriage is practiced, girls are undervalued compared to boys – they are seen as a burden or liability for their family and consequently married off young (Kumari, 2025). Likewise, in communities where GBSS is prevalent, daughters are discriminated against (Croll, 2000), while sons are preferred and enjoy a higher social status (Purewal, 2010). In these cases, 'inequalities in gender roles induce parents to prevent the survival of female babies' (Murray,

2008, p 19). FGM also stems from gender inequality (Khosla et al, 2017) as the practice seeks to assert or preserve domination over women and girls, gaining sexual and reproductive control over women, who are considered inferior to men. Gender inequality, at its core, interacts with social norms that sustain harmful practices (Cislaghi, Manji, and Heise, 2017; Cislaghi and Heise, 2019).

2. *Socio-cultural norms*

Harmful practices are driven by social conventions that are often maintained because they have been practised for generations (Mackie, 2018; Lindskog, Congdon Fors, and Isaksson, 2022). Social norms encompass unspoken and informal rules of what is believed to be typical and appropriate behaviour (Amin and Al Shaikh, 2025). While there is ample terminology around gender and social norms (Cislaghi and Heise, 2020), a popular understanding proposed by Bicchieri (2006) stipulates that social norms are based on two types of social expectations: (1) empirical expectations based on the belief that a certain behaviour will be followed (for example, most people in my community practice FGM or child marriage); and (2) normative expectations based on the belief that a certain behaviour ought to be followed (for example, most people in my community expect me to undergo GBSS or FGM). Thus, norm compliance results from wanting to conform to the projected behaviour and expectations of the social reference group (Bicchieri, 2006). The collective enforcement of harmful practices like child marriage, FGM and GBSS is strongly linked to family honour, the avoidance of shame for the girl/women and her family, social belonging, and concepts of what is culturally expected of an ‘ideal’ girl or woman in a given society (for example, to be cut, married off young, to conceive a son). Females and families who conform to the traditions of child marriage, GBSS and FGM are met with social approval and in-group favouritism, respectability, and honour, while others risk social exclusion and humiliation (Nanda, Gautam, and Verma, 2012).

3. *Sexual morals and control of female sexuality*

Socio-cultural norms are deeply intertwined with sexual morals and the control of females’ sexual and reproductive lives. Child marriage is sustained by the idea that once a girl reaches puberty and becomes sexually active, she needs to be married and protected by her husband (Greene et al, 2018). This disregards the fact that the husband is often the aggressor, as child brides are disproportionately affected by intimate partner violence compared to women who are married as adults (Han et al, 2025). FGM is often associated with the *rite of passage* from childhood into womanhood (Graamans et al, 2019).

Men in societies where FGM is prevalent may prefer a cut/moral wife, as the practice is believed to reduce lust, prevent promiscuity, and control female sexuality (Sakeah et al, 2006). Meanwhile, other extended family members and the community as a whole may push for the practice to be continued to preserve the girl's 'purity' (Wijaya, Fisher and Kirkman, 2024). Similarly, GBSS is also a form of controlling female reproduction, where women are supposed to give birth to a male offspring. Sonless women are often blamed for their 'inability' to conceive a son, even though biologically the male sperm determines the foetal sex (Rahm, 2019a).

4. Marriage and kinship

Harmful practices are sustained by kinship and marriage customs. Basic elements of kinship are linked to marriage practices, residence patterns, and lineage organizations and serve as pillars of socialization (Stone and King, 2019). Premarital virginity serves as a perceived guarantee of moral standards. In this regard, underage girls are seen to have a higher marriageability before they become sexually active. Similarly, FGM among girls is often regarded as a prerequisite for a 'good' marriage later in life. In cultures where GBSS is practised, premarital virginity also plays an important role and becomes visible in different local customs. One example is the 'red apple tradition' in Armenia, where the family of the groom used to deliver apples to the bride's family, if the daughter-in-law proved to be a virgin during the wedding night. Another example is the custom of 'sworn virgins' in Albania. The eldest daughter in a sonless family swore to be a life-long virgin and to culturally perform the roles of a male offspring. Otherwise, women typically leave the parental home upon marriage to reside with the husband and in-laws, who often demand at least one male offspring to maintain the family lineage. This is sustained by patrilineal and patrilocal family systems (Den Boer and Hudson, 2017). Compliance can increase women's household bargaining power and own value within the family (Das Gupta et al, 2003). While harmful practices predominantly exist in societies where women marry out of the family, they can also occur in matrilineal or bilateral family arrangements.

5. Economic reasons

Harmful practices are sustained by economic motives. Child marriage is most prevalent in the poorest parts of the world (Subramanee et al, 2022; Pourtaheri et al, 2023). Some families living in poverty use early marriage as a way to reduce family costs so they have one less child to feed, clothe, and educate. Dowry or bride price is welcome in those poor families, and young girls fetch a higher bride price or require a lower dowry to be paid by their parents (Khanal and Sen, 2020). Economic reasons also play a role

in FGM, where uncut girls face a higher risk of financial insecurity, as they are less likely to find a husband who sustains them financially (Momoh, 2010). Whereas FGM and child marriage are prevalent among poorer socio-economic strata, GBSS tends to be more prevalent among higher socio-economic levels, specifically among the affluent and emerging middle class (Kaur et al, 2016). This is an important difference between FGM and child marriage on the one hand and GBSS on the other. Nevertheless, economic concerns also matter in cultures where GBSS is prevalent: families often rely on sons for social security and financial protection in old age (Tafuro, 2020). Sons inherit the family assets and land, while daughters are considered an economic burden as they leave their natal family after marriage. During crises, including the COVID-19 pandemic, harmful practices tend to increase as families use them as coping mechanisms when facing economic hardship or safety concerns (UNFPA, 2020b). Thus, poverty and the absence of social protection shields are key drivers for the continuation of harmful practices.

6. *Safety and protection*

Harmful practices are often sustained by the idea that families act in the best interest of their daughters, ensuring their safety and protection. For example, it is believed that girls who are uncut or unmarried underage may be at high risk of harassment and physical or sexual assault, when in fact the practices themselves can be regarded as forms of sexual violence (Tridewiyanti, 2019; Tsunda Salihu, 2024). Similarly, some women turn to sex selection to prevent their daughters and themselves from harm and harassment (Puri and Nachtigall, 2010). The idea that harmful practices ensure the safety of females is misleading because overall, women and girls are less safe in societies where harmful practices are rampant. International bodies have condemned the notion that ‘prejudices and practices (like forced marriage or female circumcision) may justify gender-based violence as a form of protection or control of women’ as postulated in Articles 2(f), 5 and 10(c) of the CEDAW General Recommendation No. 19 on Violence against women (CEDAW, 1992).

7. *Religious beliefs*

Harmful practices have been associated with religious beliefs even though they are not prescribed in religious texts. Religion thus is misused to justify harmful practices (Bartelink, Longman, and Bradley, 2022). Child marriage is prevalent across different religious landscapes, including Christian, Hindu, and Muslim, among others (Jailobaeva et al, 2024). FGM occurs among some members of Muslim, Christian and Jewish faiths as well as animistic beliefs. Meanwhile, GBSS is practised among adherents of Christian, Muslim,

Hindu, and Buddhist faiths and Confucian beliefs. Hence, the practices go beyond religious boundaries. Hayford and Trinitapoli (2011) identify three main ways to understand religious differences in the intergenerational transmission of harmful practice, with a focus on FGM. The first looks at *socio-economic* factors, suggesting that differences may be due to people's economic backgrounds rather than religion itself. The second focuses on specific religious beliefs about circumcision and how they influence decisions and actions. The third sees religion more as a shared *group identity* rather than just a set of individual beliefs and practices (Hayford and Trinitapoli, 2011). Their findings suggests that religious considerations are closely interlinked with social norms and economic drivers discussed previously. Because of this contested connection to religion, religious leaders play a key role in tackling harmful practices.

8. Political and institutional factors, and humanitarian crisis

Political barriers play a significant role in the persistence of harmful practices. While child marriage, GBSS, and FGM are legally prohibited in many countries, they continue to be practised. They remain socially and morally acceptable despite their illegality. Several factors contribute to this impunity. First, these practices are often difficult to detect, as they can be carried out discreetly or in private settings, evading government oversight. Families may also circumvent laws by traveling to countries where practices remain legal. Second, political will to enforce restrictions is often weak. In some cases, lawmakers and politicians either turn a blind eye or actively endorse these practices, prioritizing political expediency over enforcement. Third, the lack of accountability and reluctance to challenge entrenched norms further allow these practices to persist. A critical factor is the gap between social norms that support harmful practices and legal frameworks designed to eliminate them. The wider this gap, the more likely it is that the practice will continue despite legal prohibitions. Fourth, humanitarian crises and protracted emergencies – such as armed conflicts and civil wars – create heightened insecurity for girls and exacerbate harmful practices. Crisis settings have been linked to rising instances of GBSS, as seen in the aftermath of the dissolution of the Union of Soviet Socialist Republics (USSR), where political instability contributed to an increase in skewed sex ratios at birth in the Caucasus region (Das Gupta, 2015). Similarly, during times of conflict, the risk of child marriage surges as families, driven by fear and desperation, arrange early marriages for their daughters in the hope of securing their protection, maintaining honour, and ensuring social stability within the community (Singh, Goli, and Singh, 2022). These examples illustrate how political instability and weak institutional frameworks create an environment in which harmful practices not only persist but intensify.

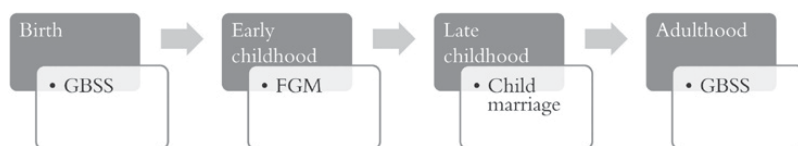
These eight motives driving FGM, GBSS, and child marriage are interconnected, forming a complex and dynamic system across individual, social, material, and institutional levels (Cislaghi and Heise, 2019). At its core, gender inequality (motive 1) shapes power relations in societies where these harmful practices persist. They are deeply rooted in social norms (motive 2), sexual morality (motive 3), and marriage customs (motive 4), while also being reinforced by economic factors (motive 5). Additionally, personal concerns – such as safety and protection (motive 6) and religious beliefs (motive 7) – along with institutional challenges like impunity and political barriers (motive 8), contribute to their continuation. Families who uphold these traditions often do so not out of a desire to harm their daughters but rather to protect them or secure financial and social advantages. However, good intentions mean little to girls and women subjected to harmful practices, who face lifelong health complications due to genital mutilation, or drop out of school and become pregnant because they are forced into early marriage (UNFPA, 2020a). As we will see in the next section, the practices have no benefits that would justify the harm done to women and girls.

Diverse methods affected by tradition and technology

Harmful practices vary widely in how they are carried out. They affect girls and women at different stages of their lives, starting before birth, up to adulthood (see Figure 2.1). GBSS takes place before or after birth. FGM is usually practised in early childhood, and child marriage occurs later in childhood, around adolescence. GBSS affects women again in adulthood at their reproductive stage. Harmful practices are often accompanied by celebratory rituals – such as rites of passage ceremonies for FGM, wedding festivities for child marriage, or the preferential treatment of male births – which downplay their harmfulness and reinforce their role in maintaining social cohesion.

Gender-biased sex selection aims at avoiding female offspring and takes place at different stages. Stage 1 (preconception sex selection) relies on the use of assisted reproductive technologies and selected implementation of male embryos after sperm sorting. Stage 2 (prenatal sex selection) is most

Figure 2.1: Life-cycle approach to harmful practices



Source: Author's own illustration

commonly used and involves ultrasound scans for foetal sex determination during pregnancy followed by sex-selective abortions of female fetuses. Stage 3 (postnatal sex selection) manifests in infanticide or fatal neglect of females under the age of six. With increased access to modern technology, postnatal sex selection has declined (Goodkind, 1996), and parents increasingly opt to select at earlier stages (stages 2 and 1) using ‘modern technology to satisfy old desires’ (Duthé et al, 2012, p 1). Doctors have become engaged in the practice. Even if they oppose prenatal sex selection, they may consider it their duty to help parents in their quest for a male offspring to prevent postnatal neglect or infanticide (Puri and Nachtigall, 2010). In some countries, gender-biased sex selection has triggered powerful market incentives, creating financial profits for medical professionals (Rahm, 2019a). This has resulted in the ‘commercialization’ of procedures, particularly in the private sector (Gammeltoft and Nguyen, 2007, p 165). Examples are the overuse of antenatal ultrasound scans in Vietnam (Gammeltoft, 2007; Becquet, 2019), or ‘package deals’ of (illegal) sex determination via portable ultrasound machines paired with in-house sex-selective abortion services in North India (Bhattacharya and Singh, 2017). The indirect endorsement by part of the medical community may contribute to the persistence and expansion of harmful practices.

FGM involves the cutting or injuring of female genital organs, typically performed on girls between birth and age 15. The World Health Organization (WHO) classifies FGM into four major types: Type 1 (clitoridectomy) is the partial or total removal of the clitoral glans and/or clitoral hood. Type 2 (excision) refers to the partial or total removal of the clitoris and the labia minora, with or without removal of the labia majora. Type 3 (infibulation) involves the narrowing of the vaginal opening with or without the excision of the clitoris. Type 4 includes all other harmful procedures to the female genitalia for non-medical purposes, for example, pricking, piercing, incising, scraping, and cauterizing (WHO, 2008, 2025). Traditionally, FGM has been performed by birth attendants, circumcisers, or family members who have often undergone the procedure themselves (Momoh, 2010). In some countries, medical professionals have become involved in the practice, a phenomenon known as medicalization (Serour, 2013; Leye et al, 2019). In Indonesia, for example, this has led to FGM’s institutionalization within medical practice (Budiharsana, 2016). These cuttings often take place within the first five months after birth as part of postnatal packages that also include vaccinations and ear piercing (Clarence-Smith, 2012). In some cases, the cutting can be more symbolic as midwives have reported (UNICEF, 2023). The global prevalence of medicalised FGM is estimated to be as high as 21 per cent (~1 in 5 survivors) (Andrew, Jones and Farley, 2024).

Medicalization is highly controversial (Pearce and Bewley, 2014). Some argue that medicalized FGM is a *lesser evil* or a form of harm reduction since

it is performed in sterile conditions rather than in unsanitary environments (Shell-Duncan, 2001). In Egypt, Kenya, and Sudan, medicalization has occurred alongside declining prevalence rates (Shell-Duncan, Gathara, and Moore, 2017; Shell-Duncan, 2023), while in parts of Nigeria and Kenya, it is reported to have led to less invasive forms, such as *nicking* instead of clitoridectomy (Orubuloye, Caldwell, and Caldwell, 2000; Njue and Askew, 2004). However, critics – particularly international organizations involved in the eradication of FGM – strongly oppose medicalized FGM, arguing that it violates medical ethics, particularly the ‘do no harm’ principle (Van Eekert et al, 2024). They contend that medicalization may legitimize the practice, impede progress toward its abandonment, and undermine the UN Sustainable Development Goal (SDG) target to end FGM by 2030 (Doucet, Pallitto, and Groleau, 2017; Kimani, Barrett, and Muteshi-Strachan, 2023). Medical professionals play an important role in preventing FGM by promoting health education, advocating against medicalization, and ensuring access to accurate information, counselling, and appropriate care (Abdulcadir, 2021, p 473).

Child marriage, unlike FGM and GBSS, does not involve a specific physical procedure performed at a particular moment, apart from the marriage ceremony itself. The circumstances leading to child marriage vary significantly across regions, reflecting diverse cultural, social, and economic dynamics. In many cases, child marriages are arranged by parents or extended family members to strengthen kinship ties. Some marriages are agreed upon years in advance, with children betrothed at a young age, while others occur suddenly due to external pressures. For example, in South Asia, caste norms and cultural expectations heavily influence child marriage. In some communities, lower-caste girls may be married early to secure social mobility, while in upper-caste families, early marriage is sometimes practised preserving lineage and honour. In Latin America, child marriage is frequently linked to adolescent pregnancy, rather than strictly being arranged by families. Many girls enter informal or legal unions after becoming pregnant, often due to societal and familial pressures to legitimize the relationship. This form of child marriage tends to be driven more by gendered expectations of motherhood and economic necessity rather than by traditional matchmaking. In parts of the Middle East and Central Asia, different practices shape child marriage traditions. In Kyrgyzstan, for example, some cases involve bride kidnapping (Bazarkulova and Compton, 2021), known as *Ala Kachuu* (which translates to ‘grab and run’). This practice can occur with or without the consent of the bride’s family. Once abducted, the girl is taken to the groom’s home, where family members gather to celebrate a wedding, often culminating in a religious blessing by an imam. The pressure on the girl to accept the marriage is immense, as spending even a single night in another man’s home can lead to social stigma, making it difficult for her to marry anyone else. In many cases, the wedding night involves coercion and sexual violence.

While tradition and family arrangements continue to play a dominant role in child marriage, technology is increasingly shaping how unions are formed (see also [Box 2.1](#)). In some contexts, young people use social media to meet and establish relationships that may lead to early marriage, while in others, parents use digital platforms to select partners for their children, including ‘cases of “selling” child brides on social media’ ([UNFPA, 2020a](#), p 12). This evolving dynamic adds new dimensions to the persistence of child marriage in the modern era.

Box 2.1: From low to high-tech: harmful practices and technological change

GBSS involves high-tech. The practice has transitioned from low to high-tech. Whereas formerly GBSS was mostly driven by female infanticide and daughter neglect, it has transitioned to modern forms of sex selection using a variety of reproductive technologies, including ultrasound, assisted reproductive technologies, in-vitro fertilization, sperm sorting, and so on among other forms.

FGM is transitioning from low to high-tech. Whereas FGM is still practised in many parts of the world using rudimentary instruments such as knives, scissors, pieces of glass or razor blades without the use of anaesthetics and antiseptics, the practice is transitioning to medicalised cuttings using scalpels in sterile, clinical settings and performed by medical practitioners.

Child marriage is mostly low-tech. The practice is closely linked to poverty and low economic development. Child marriage is likely to disappear in the coming decades. With expanding income-earning opportunities, promotion of social security and female empowerment, poverty will continue to decrease, uprooting the need for child marriage.

Source: [Rahm \(2021\)](#)

Harmful practices have an important cross-border dimension. As practices are unavailable or illegal in the home country, this can lead individuals to seek services abroad. FGM has increasingly become a transnational issue, with families and practitioners crossing borders to circumvent legal bans. In countries where FGM has been criminalized, the practice has gone underground, exacerbating risks for women and girls in border communities ([Sakeah et al, 2019](#); [Walela, 2020](#)). Similarly, gender-biased sex selection (GBSS) has led to the rise of ‘sex-selection tourism’ ([George, 2013](#)) and a ‘cross-border trade in assisted reproduction’ ([Whittaker, 2011](#)), with fertility clinics in the US and Thailand catering to Asian clients seeking male offspring ([Rahm, 2019a](#)). Reports indicate that hundreds of couples from China, Hong Kong, and Singapore travel to Bangkok annually for IVF treatments that enable sex selection ([Kaye and Jittapong, 2014](#)). Cross-border child

marriage also persists, as seen in Bangladeshi women negotiating marriages in India (Mehta, 2019) along with broader patterns of cross-border marriages in South Asia (Kaur, 2012). Additionally, bride trafficking is a concern, particularly in China and South Korea, two countries with a significant share of surplus males and scarce females due to several decades of sex-selective practices (Kawaguchi and Lee, 2012). Addressing these transnational challenges requires enhanced cross-border coordination and interventions, yet targeted policies remain often insufficient (Wouango, Ostermann, and Mwanga, 2020). Despite these different manifestations, child marriage, FGM, and GBSS are global in scale and negatively impact women during their life span with adverse effects also for the next generation.

Global magnitudes and consequences of harmful practices

This section is organized into two parts. The first part discusses the prevalence of harmful practices. The second part explores the individual and social consequences of female genital mutilation, gender-biased sex selection, and child marriage.

1. Global prevalence of harmful practices

The magnitude of harmful practices has been extensively documented in a growing body of statistical literature, driven by international commitments such as the Convention on the Rights of the Child (CRC) and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), which obligate states to collect, update, and disseminate data on trends and prevalence (UNFPA, 2020a). The Sustainable Development Goals (SDGs) have further improved the availability and dissemination of data on harmful practices, bolstered by establishing international indicators under UNICEF's stewardship (Malhotra and Elnakib, 2021). The presence of reliable data sources and recognized prevalence indicators has played a crucial role in elevating harmful practices as a priority concern on the global development agenda. However, despite advancements in data coverage, persistent gaps remain, particularly in ensuring timely and comparable data across regions and demographic groups. Figures 2.2 to 2.4 illustrate the prevalence of child marriage, FGM, and sex selection respectively scaled as of 2020. The latter is represented in terms of son preference and skewed sex ratios. The biological sex ratio at birth is around 105 male births per 100 female births. Sex ratios above 105 are considered skewed towards male births, and are an indication for prenatal sex selection when based on a large sample. Skewed child sex ratios (ages 0–6) indicate the combined effects of prenatal and postnatal discrimination. These maps were obtained from *The WomanStats*

Figure 2.2: World map: Child marriage

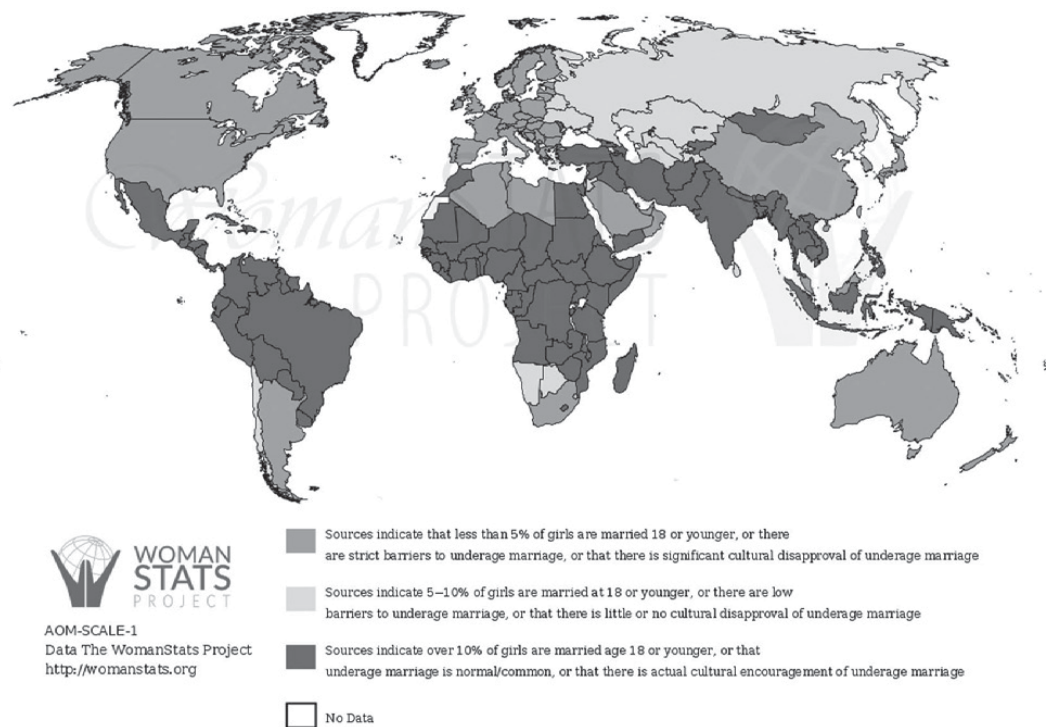


Figure 2.3: World map: Female genital cutting

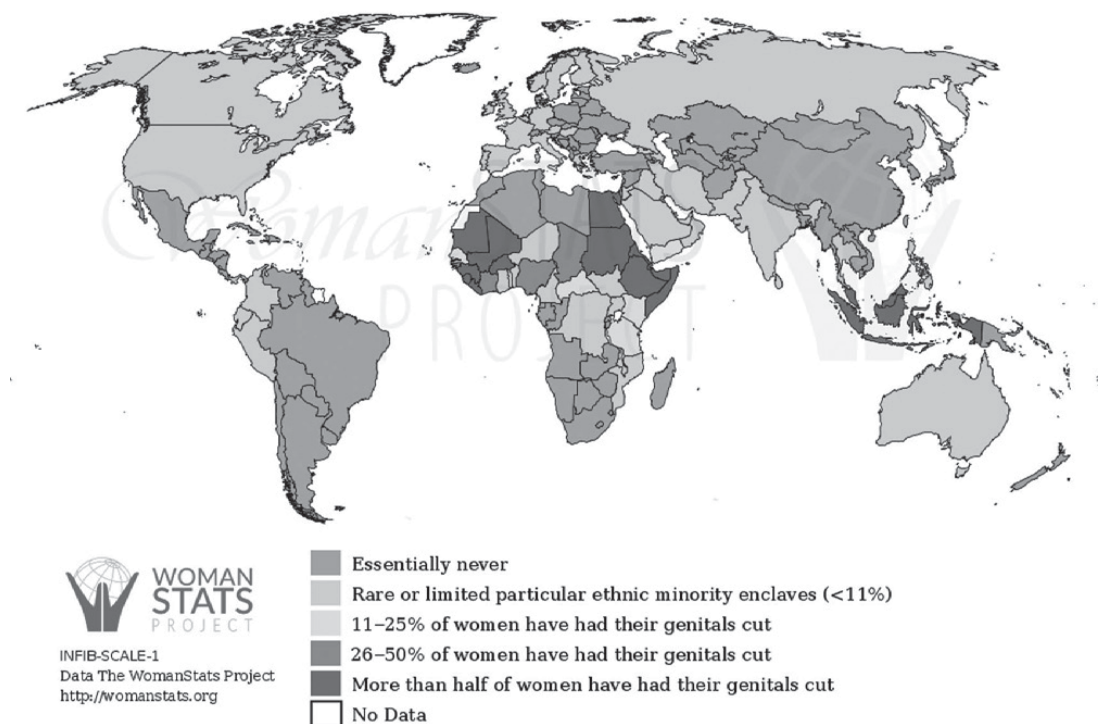
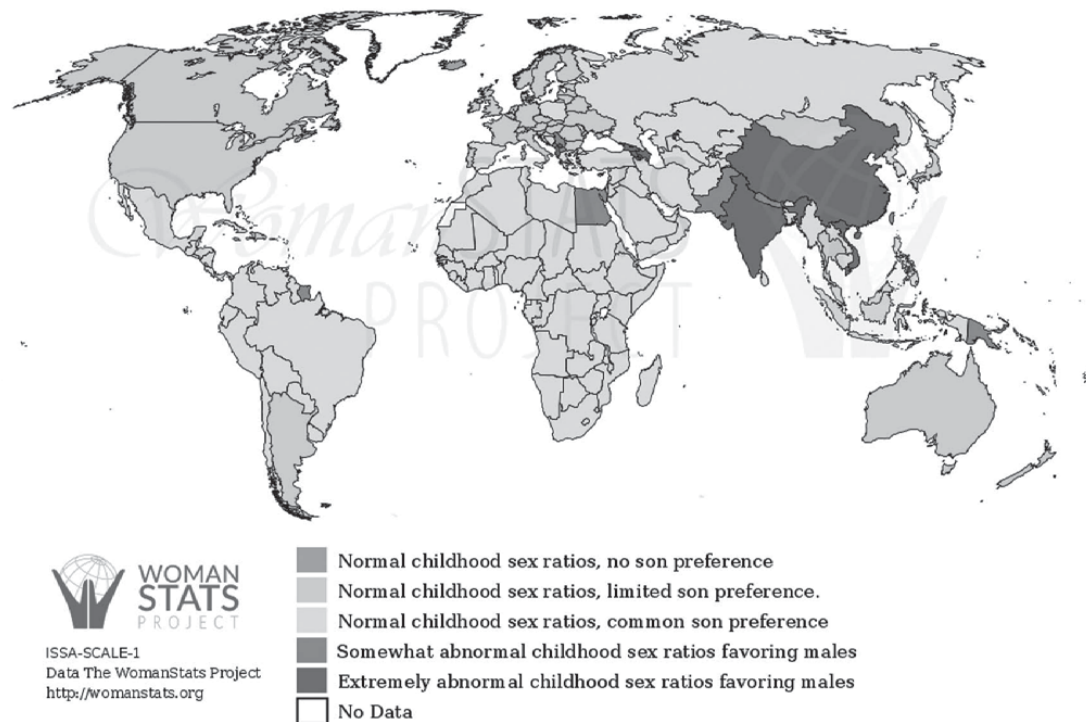


Figure 2.4: World map: Son preference and skewed sex ratios



Project, which provides statistical data on the status of women worldwide and is one of the unique sources covering all three harmful practices (see [Figures 2.2–2.4](#)).

Child marriage affects over 650 million women and girls worldwide ([UNICEF, 2025](#)). Child marriage is particularly prevalent in Africa, the Arab Region, Latin America, Eastern Europe, Central Asia, South Asia, and Southeast Asia, where more than 10 per cent of girls are married under age (see [Figure 2.2](#)). Detailed regional data are available from various studies, including those by [Minh Cong Nguyen and Quentin Wodon \(2015\)](#), [Le Nestour et al \(2018\)](#), [Yaya et al \(2019\)](#), [UNFPA \(2020\)](#), and [Vera Sagalova et al \(2021\)](#). In late 2023, the Global Programme to End Child Marriage launched the Child Marriage Data Portal under UNICEF's stewardship ([UNICEF, 2025](#)). The portal provides the latest data on child marriage prevalence, defined as the percentage of young women aged 20 to 24 who were first married or in union before age 18. Child marriage prevalence is calculated using the most recent data available for each country, covering the period from 2015 to 2023. The portal also provides data on the absolute number of child brides, who were first married or in union before age 18. The following information is obtained from the UNICEF Child Marriage Data Portal unless flagged otherwise ([UNICEF, 2025](#)).

Globally, the highest prevalence of child marriage (31 per cent) is found in Sub-Saharan Africa with 125 million women and girls affected, although large cross-country disparities exist (see also [Yaya, Odusina, and Bishwajit, 2019](#)). Central and Southern Asia account for the highest absolute number of child brides worldwide (309.8 million). India alone contributes with 222 million women and girls married before age 18 to over one-third of the global total; another third is distributed across ten countries (Bangladesh, China, Indonesia, Nigeria, Brazil, Pakistan, Ethiopia, Mexico, Iran, and Egypt), while the remaining third is spread across 192 countries ([UNICEF, 2023](#)). Child marriage prevalence is declining in most countries ([Pourtaheri et al, 2023](#)). However, progress has been hindered by the COVID-19 pandemic, ongoing humanitarian crises, and conflicts ([Girls Not Brides, 2024](#)). Moreover, regions with the highest rates also experience population growth, leading to an expected increase in the absolute number of child marriages. According to UNICEF, every day, an estimated 33,000 girls are married before the age of 18, amounting to over 12 million annually ([UNICEF, 2025](#)). By 2030, 150 million girls under 18 are projected to be married. At the current pace, UN Women estimates that child marriage will not be eradicated until 2092 ([Bhatt et al, 2024a](#)). Boys are also impacted. In 2019, 115 million boys and men were married before age 18, with the highest rates in Latin America and the Caribbean ([Gastón, Misunas, and Cappa, 2019](#)). Nevertheless, girls are disproportionately affected. Approximately 1 in 5 young women aged 20–24 were married before age 18, compared to

1 in 30 young men (UN, 2025), while this gap is smaller in India, with 1 in 5 women compared to 1 in 6 men aged 20–24 years married as children (Gausman et al, 2024).

FGM affects over 230 million women and girls who have been subjected to the practice (Bhatt et al, 2024a). It is documented in over 30 countries, mainly in Africa (West, East, and Northeast Africa), Asia and the Middle East (see Figure 2.3). A 2025 report by Equality Now indicates an even wider spread of the practice in 94 countries worldwide, including in newly identified countries of Azerbaijan, Vietnam, and Cambodia (Equality Now, 2025). The prevalence of female genital cuttings varies greatly within and across affected countries. According to UNICEF, it affects over 90 per cent of women and girls aged 15–49 and is thus almost universal in Somalia, Guinea, and Djibouti. Meanwhile, FGM prevalence is close to 1 per cent in Cameroon, Ghana, and Uganda (UNICEF, 2024). Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS) and other national survey data reveal that in several affected countries the prevalence of FGM is much higher than the stated preference for the practice to continue (UNICEF, 2024). This discrepancy reveals the tension between empirical and normative expectations surrounding social norms (Bicchieri, 2006). FGM is also practised throughout Asia (including India, Sri Lanka, Bangladesh, Thailand, Malaysia, Brunei, Singapore, Cambodia, Vietnam, Laos, the Philippines, and Indonesia), which has received less scholarly attention (Dawson et al, 2020). With migration patterns, FGM has spread. It is documented among diaspora in Australia, Europe, North America, and New Zealand. For example, the United States Centers for Disease Control and Prevention estimated that 513,000 girls and women in the United States were at risk of, or had been subjected to, FGM in 2012, attributing the change primarily to increased immigration from countries where it is practised (Goldberg et al, 2016). In England and Wales, as of 2015, an estimated 137,000 girls had undergone FGM (Macfarlane and Dorkenoo, 2015). The FGM prevalence appears to be declining in many countries (Farouki et al, 2022; Ayenew et al, 2024), yet similar to child marriage, considering demographic growth more girls are estimated to become affected (Bhatt et al, 2024a). According to the United Nations, every year approximately 4 million girls are at risk. By 2030 an estimated 68 million girls will undergo FGM (UNFPA, 2020a; Stevenson and Kelly, 2022). FGM has been contrasted to male circumcision, a phenomenon that is globally much more widespread than female circumcision. Scholars estimate that 1 in 3 men globally are circumcised (Morris et al, 2016), compared to approximately 1 in 17 women subjected to FGM. The differing ramifications and health consequences, and the possible medical benefits of male cutting have been extensively discussed elsewhere (Aldeeb Abu-Sahlieh, 2006; Malone and Steinbrecher, 2007; Möller, 2020).

Son preference has existed in many civilizations, both in the past and present, and results in diverse forms of gender discrimination, including unequal access to nutrition, health care, and education (Hudson, 2007). Son preference is widespread globally, but not everywhere does it manifest in gender-biased sex selection (see Figure 2.4). Skewed sex ratios have been documented in Asia, the Caucasus, and parts of Eastern Europe (Croll, 2000; Jha et al, 2011; Duthé et al, 2012; Guilмото, 2015; Guilмото et al, 2018). Countries with sex imbalances at birth include Albania, Armenia, Azerbaijan, China, Georgia, India, Montenegro, Nepal, Tunisia, and Vietnam, among others (Rahm, 2012; 2019a; Rahm et al, 2022). The highest sex ratios at birth are reported in China, Azerbaijan, Armenia, and Vietnam with over 111 male births per 100 female births, while the biological norm is around 105. The resulting surplus in males or scarcity in females at an aggregated level was first calculated by Amartya Sen (1990, p 61) who pointed to ‘more than 100 million women missing’ due to son preference and sex selection. This number – containing both prenatal and postnatal forms of sex selection – has risen to an estimated 147.2 million women missing in 2025 (Bongaarts and Guilмото, 2015). Chao et al (2019) have computed the share of missing female *births* due to *prenatal* sex selection between 1970 and 2017 to be 45 million, with 97 per cent of the total share of missing female births being recorded in China and India (Chao et al, 2019). Every year, 1.2 million additional female births are missing due to prenatal sex selection (UNFPA, 2020a). These numbers refer to the affected (unborn) females but not to the mothers who are pressured to undergo one or several abortions. If we also consider the ‘harm’ done to women undergoing GBSS, the total number of women impacted by GBSS is significantly higher (Rahm and Kostenzer, 2018). Technically, sex selection is gender blind. Sons can equally be deselected. Socio-culturally, however, sex selection in favour of females remains more hypothetical (Kolk and Jebari, 2022). Even in countries that have shifted from son to daughter preference in terms of couples’ stated preferences, like South Korea (Chun and Das Gupta, 2022), this has *not* translated into skewed sex ratios in favour of girls. Over the past decade, Korea’s sex ratio at birth has now remained constant around the biological norm (KOSIS, 2025).

In summary, Table 2.1 compares child marriage, female genital mutilation, and gender-biased sex selection and presents recent estimates on the number of affected females. There are significant differences in the prevalence of these practices: (1) child marriage is the most widespread, affecting a far greater number of women than FGM and GBSS; (2) more females have been married as minors or subjected to FGM than are ‘missing’ due to GBSS. However, if we consider the impact on mothers undergoing one or several sex-selective abortions, the number of women affected by GBSS effectively doubles. (3) Prevalence rates vary drastically across and within countries. While some countries have near-universal child marriage and

Table 2.1: Estimated number of women affected by child marriage, FGM, and GBSS by region and data source, as of 2025

	No. of girls (million) married/mutilated/ missing	Region	Data
CM	650	Africa, Asia, Latin America, Europe, and the Middle East	DHS, MICS, and other national surveys
FGM	230	Africa, Asia, and the Middle East	DHS and MICS and other national surveys
GBSS	147	Asia, Caucasus, Eastern Europe (with 83% in China and India)	UN World Population Prospects

Source: [Bongaarts and Guilмото \(2015\)](#); [Rahm and Kostenzer \(2018\)](#); [UNICEF \(2025\)](#)

FGM rates (that is, over 90 per cent), only a small proportion of people actively engage in sex selection in countries with severely skewed sex ratios. A sample calculation estimated that in China, where the sex ratio at birth reached 115 males per 100 female births, approximately 4.65 per cent of births were a result of sex selection (that is, 10 excess male births out of a total of 215 births) ([Rahm and Kostenzer, 2018](#)).

Harmful practices are culturally specific and typically do not overlap within the same populations. However, there are exceptions. For example, research has documented the coexistence of female genital mutilation, child marriage, and son preference in rural northern Nigerian communities ([Oluwayemisi et al, 2018](#)). Yet, fertility rates remain high and access to reproductive technologies low, resulting in no significant impact on sex ratios at birth or last birth. Women and girls can be subjected to multiple forms of harmful practices, leading to compounded negative outcomes, especially among poor and rural ethnic groups. In South Asia, particularly in India and Nepal, multiple harmful practices coexist, including gender-biased sex selection, child marriage, caste-based discrimination, menstrual restrictions (such as Chhaupadi), dowry practices, and witchcraft accusations ([UNFPA APRO and UNICEF ROSA, 2020](#)). Similarly, several African countries have high prevalence rates of both child marriage and FGM, including Burkina Faso, Chad, Eritrea, Ethiopia, Gambia, Guinea, Liberia, Mali, Mauritania, Nigeria, Sierra Leone, Somalia, Sudan, and Yemen, yet distributions vary widely ([UNICEF, 2021](#)). A recent study found that women who had never experienced FGM were less likely to be married as children compared to those who had undergone FGM, suggesting an association between the two practices ([Ahinkorah et al, 2023](#)). GBSS and FGM can also coexist in countries like India and Indonesia, although they are practised by different

communities and vary in scale and prevalence. For example, in India, GBSS is widespread and has resulted in decades of skewed sex ratios, while FGM is limited to minority communities (the Bohra). In contrast, FGM is widespread in Indonesia, but only some minority groups engage in sex selection (Guilmoto, 2015). Some researchers have suggested that FGM is correlated to increased sex ratios at birth due to stress hormones and traumata associated with the cutting (Martin and Williams, 2008; James, 2010). However, this hypothesis is countered by demographic evidence that points to low sex ratios at birth in countries with high FGM prevalence (Morse and Luke, 2021).

2. Consequences for individuals and societies

At an individual level, girls and women undergoing harmful practices are exposed to adverse health risks including severe physical, sexual and psychological health implications. Child marriage has been associated with profound physical and psychological distress ‘due to the loss of adolescence, forced sexual relations, intimate partner violence, and early confinement to household roles’ (Schief, Lin, and Haenni, 2018, p 11). Countries with a high prevalence of child marriage also have a higher prevalence of physical or sexual violence against adolescent girls (Sardinha et al, 2024). It is associated with an increased risk of early and multiple childbearing, leading to maternal and neonatal health complications, higher maternal mortality and morbidity, and infant mortality (Santhya, 2011; Raj and Boehmer, 2013). FGM involves immediate physical complications including severe pain, excessive bleeding, tissue swelling and infections, among others, that can result in shock, life-threatening complications, or even death (Koski and Heymann, 2017). Sexual health implications may include painful sexual intercourse and dysfunction, and hypersensitivity of the genital organs (Yassin, Idris, and Ali, 2018). Genital mutilation has also been linked to infertility, which can cause the husband and his family to reject the woman (Aimen et al, 2016). Psychological health complications of FGM are depression, anxiety, phobias, post-traumatic stress disorder, and psychosexual problems (Lever et al, 2019; Tammary and Manasi, 2023). Meanwhile, prenatal sex selection – the most common form of GBSS – involves repeated pregnancies and second-trimester abortions, which may put the woman’s life in danger, especially when performed in clandestine, unsanitary settings. Similarly to other harmful practices, women pressured to produce a son or undergo GBSS are frequently subject to depression, and physical and emotional violence by their intimate partners and in-laws (Kostenzer, 2019). The practices are not only detrimental to the health and well-being of the concerned victims but have adverse long-term consequences for societies at large.

At a societal level, a process of normalization takes place. Girls and women being subjected to harmful practices consider these as ‘normal’ and are hence more likely to continue the practices themselves or pass them on to the next generation and their children. Women having undergone harmful practices have restricted access to education, healthcare, participation in society and work life. Such unrealised female potential widens gender inequality, undermines socio-economic development, and comes at a high cost for the concerned nation-states (Wodon and De la Briere, 2018). Lower educational attainment limits economic opportunities and contributes to the cycle of poverty. Young brides who bear children are often unprepared for their role as mothers. Upon marriage, they tend to drop out of school, are more likely to face physical or sexual violence from their partners, and are less likely to escape the poverty trap. This negative cycle – unless broken – continues with the next generation. Therefore, reducing the prevalence of child marriage benefits society at large. As more girls are empowered and educated, they have higher earnings prospects and are more likely to reinvest earnings into their families and communities. Thus, besides being a human rights obligation, empowering women and girls benefits overall development (Duflo, 2012). GBSS and FGM also have larger social ramifications. Prenatal sex selection has led to demographic imbalances that affect the concerned populations for generations to come. While some scholars note positive side-effects such as increased savings to attract a bride (Wei and Zhang, 2011), others stress more the negative consequences stemming from the so-called ‘marriage squeeze’ (Kaur, 2013). Millions of Indian and Chinese bachelors, especially from rural and poor settings, will not be able to marry (Guilmoto, 2012). The scarcity of brides has been linked with increased levels of violence, prostitution, human trafficking, and spread of sexually transmitted diseases (Hudson and Den Boer, 2004). FGM also contributes to the ‘absence’ of females, who are less likely to fully participate in society due to severe health complications. Ultimately, harmful practices lead to increased health spending, morbidity and mortality.

This section on magnitudes showed that harmful practices such as child marriage, female genital mutilation, and gender-biased sex selection are practised across large parts of the Global South, with considerable cross-country and in-country variation and adverse consequences for individuals and societies at large. As Joffe (2015, p 81) rightly stressed, international attention has largely focused ‘on the ills of the global South while ignoring discriminatory practices which prevail in more developed nations, practices which may be equally founded on harmful traditional cultural notions’. In response, the next section turns to the commonalities and differences of harmful practices across the northern and southern hemisphere.

Harmful practices in the Global North and Global South: transcending the divide?

According to Longman and Bradley (2015, p 11) ‘the concept [of harmful practices] and its development ... remain almost exclusively focussed on forms of gender discrimination and violence against women in the Global South, and among minority and migrant women in the Global North’. Yet, harmful practices are not confined to the southern hemisphere. They also occur in the Global North, often taking different forms within distinct socio-political contexts. This section explores how harmful practices manifest across regions, critically examining the Global North–South divide. By doing so, it aims to contribute to the ‘theorising and tackling *global* gender inequalities’ (Longman and Bradley, 2015, p 11, emphasis added).

The *Global North* and *Global South* terminology is widely recognized and used by scholars globally, offering a preferable alternative to outdated notions like *First World* vs *Third World*. According to Gruenbaum (2020, p 23):

The terms Global North and Global South ... are not just about places. These terms are meant to reflect the political and socio-economic differences between the richer, more developed regions, and the poorer, less developed regions of the world. With Europe, North America, and Australia in the ‘North’ and Africa, Central and South America, and much of Asia in the ‘South’, people see correlations with other factors that they suppose might explain the divide.

Gruenbaum continues by stressing that many individuals in the Global North are unaware that their present prosperity is rooted in past injustices. Instead, they tend to perceive their well-being and privileged status as an inherent entitlement, frequently linked to notions of racial, ethnic, religious, or civilizational superiority. This mindset reinforces a divisive narrative of ‘us’ versus ‘them’, portraying ‘us’ as enlightened and ‘them’ as primitive or regressive (Gruenbaum, 2020, p 24). Considering this background, a critical examination of harmful practices reveals a stark double standard in how they are perceived and addressed in the Global North versus the Global South. While certain practices in the Global South are widely condemned, similar or related practices in the Global North often escape scrutiny.

Female genital mutilation has received extensive attention as a harmful practice predominantly associated with non-Western cultures. However, scholars have highlighted the politicization of genital cutting practices, exposing inconsistencies in legal and societal standards. As Johnsdotter and Essén (2010, p 29) observe: ‘How can it be that extensive genital modifications, including reduction of labial and clitoral tissue, are considered acceptable and perfectly legal in many European countries, while those

same societies have legislation making female genital cutting illegal, and the World Health Organization bans even the “pricking” of the female genitals?’ This disparity reflects deeper tensions within legislative and medical frameworks, where procedures such as labiaplasty and gender-affirming surgeries in the West are framed as legitimate – often under the guise of medical necessity or personal choice – while similar practices in the Global South are harshly condemned as ‘barbaric’. Kleinsorg (2024, p 94) traces the evolution of Western discourse on FGM, noting that in the 18th and 19th centuries, clitoridectomy was morally accepted and justified as a ‘cure’ for masturbation and other supposed ailments: ‘FGM, broadly speaking, was initially considered as a Western practice, but when physicians performing clitoridectomies were disgraced and the operations banned in the early 20th century, foci on the otherness of practicing communities came to the fore’. Even into the mid-20th century, there were documented cases of young girls under the age of five in the United States undergoing clitoridectomy for caressing themselves. One survivor recounts: ‘My FGM happened in white, Midwest America. It took place in a church clinic that used a scalpel on girls who masturbated’ (Kleinsorg, 2024, p 95). While such cases are rare, medicalized genital modifications still occur. The British Society for Paediatric and Adolescent Gynaecology reported that between 2008 and 2012, 266 labial reductions were performed on girls under 14 in the UK (Barbara et al, 2015). Critics argue that the WHO’s framing of FGM selectively targets non-Western practices while overlooking comparable interventions in the Global North, ‘raising concerns about gender bias and cultural imperialism’ (Earp and Johnsdotter, 2021, p 196). Jeffreys (2005, p 28) echoes this bias, noting that harmful practices in the West are often justified through narratives of consumer choice, science, and medicine, underpinned by the ‘law of the market’. The perception that the West does not have ‘a culture’ that produces ‘harmful practices’ contributes to the invisibility of these issues in policy and public discourse (Jeffreys, 2005).

Gender-biased sex selection is another area where double standards prevail. While sex selection for medical reasons, such as avoiding sex-linked genetic diseases, is widely accepted globally, the framing of non-medical sex selection varies significantly between the Global North and South. In the Global North, preconception and pre-implantation sex selection are often described as ‘family balancing’ or ‘lifestyle’ choices (Wahlberg and Gammeltoft, 2018). In some contexts, sex selection is seamlessly integrated into fertility treatment packages offered to couples seeking assisted reproductive technologies, positioning it as an added benefit within the broader pursuit of parenthood. Conversely, prenatal sex selection practised in the Global South is commonly framed as a manifestation of son preference (Rahm, 2022), an expression of ‘social devaluation and subordination of women’ (Murray, 2008, p 20). Similar to FGM, sex selection raises questions about agency

and self-determination. Women may choose to deselect daughters as being a mother to a son can enhance their status within family and society. Sex selection is thus a way for women to navigate patriarchal norms: not merely as passive victims but as strategic agents within constrained circumstances. It reveals how harmful practices not only reflect external pressures but function as internalized strategies for survival and standing.

Child marriage is often portrayed as an issue predominantly affecting the Global South, yet this practice also persists in the Global North (see [Box 2.2](#)). While global campaigns have rightfully focused on ending child marriage in countries with high prevalence rates, legislation in parts of North America and Europe still allows minors to marry under specific conditions, suggesting persistent double standards. The theme of agency is similarly complex in the context of child marriage, as highlighted by sociological and anthropological literature ([Merry, 2009](#); [Horii, 2022](#)). [Horii \(2022\)](#) critiques the dominant human rights discourse for its 'blind spot', which often overlooks the nuanced ways in which agency is expressed within traditional and constrained environments. Just as women might navigate son preference to improve their social standing, girls and their families might engage with traditional marriage practices as a form of negotiating security and belonging.

Box 2.2: Child marriage in the US

Approximately 300,000 girls and boys were married as minors in the United States between 2000 and 2018 ([Reiss, 2021](#)). Marriage laws in the US are set at the state level, resulting in significant variation across the country. Child marriage is legal in 37 states, and four states – California, Oklahoma, New Mexico, and Mississippi – lack any minimum age requirement for marriage. Courageous women have raised their voices, motivated to bring about change. One of them is Sherry Johnson, who was married at the age of 11 to a 20-year-old man in Florida. She openly spoke in her 2019 TEDMED Talk about her personal story and 'fight to end child marriage in America' ([Kazungu, 2022](#), p 25). In 2020, the [Tahirih Justice Center \(2020, p 8\)](#) amplified survivor voices through a report featuring stories of women and girls who endured child marriage in the US. Among them was Skyler, who testified:

'I was a victim of child marriage in Maryland. I speak to you today to bring light to this issue, which is very dear to me. Most of you may believe child marriage only happens in third world countries, but I am here to tell you that it happens in the USA, right here in your own back yard'.

Even before she got married at the age of 16 to a man twice her age, Skyler's account revealed years-long experiences of domestic abuse, rape, neglect, and repeated institutional failures: 'By the time I was 15, I had been raped 150 times, all at the hands of men my mother brought into my life. Time and time again, the system failed to

protect me, and I fell through the cracks' (Tahirih Justice Center, 2020, p 8). The Tahirih Justice Center's report aimed to inspire a broad coalition – including funders, lawmakers, advocates, reporters, researchers, and other survivors – to join the movement to end child marriage in the United States. In 2024, this momentum led to the introduction of the Child Marriage Prevention Act in the US Congress, which aimed to comprehensively combat child marriage in the United States (Sen. Durbin, 2024). Additionally, the US joined the Global Programme to End Child Marriage as one of multiple donor countries, signalling international commitment to this issue. However, the progress remains fragile. In 2025, with the Trump administration's defunding of international development aid and curtailing national legislation, progress to combat child marriage is at peril, both domestically and internationally.

While the Global North–South framework helps highlight structural inequalities and can offer analytical clarity in research and policy discussions (Reidpath and Allotey, 2019), the binary risks oversimplification and stereotyping. It creates reductive categories that ignore that Western cultures exist within the Global South and vice-versa. The discourse may unintentionally sustain neo-colonial narratives of *civilization vs backwardness*, continuing cultural hegemony that frames the Global South as requiring correction (Jaschok et al, 2024). Tabak and Doğan (2024) critically examine how the UN's portrayal of harmful practices in the Global South may indirectly position Western norms as superior and universal, reinforcing a colonial subject position. Moreover, the Global South is not a homogenous category. For example, large differences exist in the type of genital cuttings prevalent in Indonesia or Malaysia (Type 1) versus Somalia or Sudan, where Type 3 is practised. A closer view, however, on diverse expressions and evolutions of genital cuttings, child marriage, and sex selection reveal striking similarities that counter traditional Global North–South divides (see Table 2.2).

In recent decades, there has been a growing trend to move beyond the simplistic Global North–South divide. A notable example is the consultation process initiated by the Convention on the Elimination of All Forms of Discrimination Against Women and Convention on the Rights of the Child Committees before drafting a new guideline on harmful practices. The Committees launched a formal review process and invited organizations and individuals with extensive experience on harmful practices affecting girls under the age of 18 to submit their calls, in order to broaden the focus to more developed nations (Joffe, 2015). The consultation process led to the acknowledgment of practices such as excessive dieting, plastic surgery, and unattainable beauty ideals – issues that had previously been largely excluded from the harmful practices discourse (CEDAW and CRC, 2014, p 4).

Table 2.2: Expressions of genital cuttings, child marriage, GBSS in the Global North and South

Global North	Global South
Genital cuttings and modifications Clitoridectomy and labia removal was commonly practiced by doctors in the Global North in 19th/20th centuries as a ‘cure’ for hysteria and masturbation (Gruenbaum, 2020). Episiotomies and the so called ‘husband’s stitch’ have been documented in Europe and North America to ‘sexually benefit men’ (Kimani and Shell-Duncan, 2018). Trend towards female genital cosmetic surgery on girls under 18 (Gruenbaum, 2020), labia reduction and ‘designer vaginas’ (Green, 2005). Surgeries on intersex children (Ammaturo, 2016) and ‘gender reassignment’ surgery (Jeffreys, 2005). Early, forced, child marriage Child marriage is documented in North America, Europe, and Australia among migrants and non-migrants (Koski and Heymann, 2018; Koski and Clark, 2021; Zeweri, 2023). Legislation laggards? As of 2024, child marriage remains legal in 37 US states, with some lacking a minimum age requirement. England and Wales raised the legal marriage age to 18 in 2022, eliminating the previous allowance for marriage at 16 with parental consent. The minimum age for marriage in Canada is 16 years (World Bank, 2023).	Medicalized FGM is widespread in the Global South, with approximately 1 in 4 cuttings being performed by healthcare providers (Kimani and Shell-Duncan, 2018). Episiotomies – originally introduced by French medical textbooks – are routinely practised in Cambodia to sexually benefit men and prevent husband’s infidelity (Schantz et al, 2015). Trend towards vaginoplasty, labiaplasty, hymenoplasty, in Indonesia and South Korea (Heo et al, 2016; Wijaya, Fisher, and Kirkman, 2024). Sex reassignment surgery among hijra in India (Mathai, 2022). Child marriage in the Global South is often associated with poverty (Baikady et al, 2024), but socio-cultural dynamics are more varied (Horii, 2022). Legislation leaders? Tunisia was among the first countries in the Global South to outlaw child marriage in 1956. The Tunisian Code of Personal Status set the minimum legal age for marriage at 17 for girls and 20 for boys. This legislation also abolished forced marriages and required mutual consent (Afif Jaidi, 2013). Ethiopia’s Revised Family Code (2000) set the minimum age of marriage at 18.

Table 2.2: Expressions of genital cuttings, child marriage, GBSS in the Global North and South (continued)

Global North	Global South
Sex selection and son/daughter preference	
Preconception and pre-implantation sex selection of embryos are often framed as ‘lifestyle’ choices (Wahlberg and Gammeltoft, 2018).	While prenatal sex selection is still common, preconception and pre-implantation sex selection are on the rise (Rahm, 2022).
The use of IVF/PGD for sex selection is unregulated in the US, while it is prohibited in Canada, Australia and most of Europe (Rahm, 2022).	Many Asian countries (including Vietnam, Nepal, India, South Korea, and Japan) have outlawed the use of IVF/PGD for sex selection for non-medical reasons. However, in Indonesia, sex selection is permitted for the second child (Rahm, 2022).
Evidence of emerging daughter preference in Europe, indicated by trends such as not having a second child if the first is female (Cukrowska-Torzewska and Grabowska, 2023).	Evidence of emerging daughter preference in South Korea, reflected in stated preferences for ideal family composition (Chun and Das Gupta, 2022).

Source: Compiled by the author

International organizations have indeed increasingly emphasized the *global* nature of harmful practices transcending geographic (and gender) boundaries, as can be seen in the State of World Population Report (UNFPA, 2020a, p 8):

With many variations, harmful practices are widespread and can be found in every region of the world, in both developing and developed countries. No country can claim to be entirely untouched by them. While some harmful practices, such as child marriage, may also affect boys, they are strongly concentrated among girls and women, affecting hundreds of millions.

This broader framing aims to dismantle the notion that harmful practices are predominantly a problem of the Global South and fosters a more inclusive and universal human rights approach.

Brief historical review of the global mobilization against harmful practices

The global movement against harmful practices has evolved, shaped by shifting political landscapes, international advocacy, and the establishment of human rights frameworks. While early efforts to address practices such as child marriage, female genital mutilation, and infanticide can be traced back to colonial interventions and missionary-led campaigns in the 19th and early 20th centuries, it was not until the post-World War II era that an internationally coordinated response emerged. The establishment of the United Nations in 1945 provided a critical platform for developing international legal instruments and conventions to protect women and girls, most notably the CEDAW (1979) and the Child Rights Convention (UN General Assembly, 1989). From the 1990s onward, numerous soft laws, non-binding declarations, and normative frameworks emerged emphasizing prevention, advocacy, and community engagement. The adoption of the Sustainable Development Goals (SDGs) in 2015 further solidified the commitment to ending harmful practices by 2030, framing the issue as a core component of gender equality and sustainable development. This section traces these historical phases in the global mobilization against harmful practices.

Early activism and colonial efforts (19th to early 20th centuries)

It is good to swim in the waters of tradition, but to sink in them is suicide! (Mahatma Gandhi, cited in Kishwar, 1985, p 1691)

During the 19th and early 20th centuries, colonial administrations, particularly in British-controlled regions such as India and parts of Africa,

introduced legislation aimed at curbing practices harmful to women and girls. While often framed as ‘civilizing missions’, these interventions were deeply intertwined with colonial power dynamics and cultural imperialism. The Female Infanticide Prevention Act of 1870, for instance, tried to curb high rates of female child mortality in India, and followed earlier colonial laws that outlawed sati (the burning of widows) and promoted widow remarriage (Nair, 1996). The Age of Consent Act of 1891 in India raised the legal age of consent for sexual intercourse from 10 to 12 years for all girls, whether married or unmarried, making its violation a criminal offence equivalent to rape. Similarly, British authorities, in collaboration with Christian missionaries, attempted to suppress FGM in African colonies. These interventions frequently portrayed harmful practices as markers of ‘barbarism’ to justify colonial rule (Boyle, 2005).

Colonial efforts to address harmful practices faced two major drawbacks. First, they were often complicit with existing power structures. Rather than dismantling indigenous systems of hierarchy and patriarchy, colonial powers frequently collaborated with local elites, reinforcing traditional norms that oppressed women. Few colonial administrators genuinely advocated for female emancipation, and most tacitly supported patriarchal values, allowing them to assert moral superiority while avoiding challenges to the broader system that disadvantaged women (Hutchins, 2015; Rahm, 2019a). Second, these interventions were marked by cultural absolutism – defined as the inability to recognize or respect cultures beyond one’s own – combined with a desire to impose one’s values onto others (Young McChesney, 2015). As such, interventions often relied on stigmatization and public shaming. For instance, the 1870 Female Infanticide Act in India employed a ‘naming and shaming’ strategy, publicly proclaiming the names of implicated clans and villages (Sinha and Gasper, 2010). This triggered resistances and backlashes. Similarly, colonial efforts to ban FGM in parts of Africa backfired, leading in extreme cases to self-initiation rites by girls who ‘circumcised themselves’ (Thomas, 2003, p 79). ElMorally (2024, p 1) argues in a thought-provoking chapter on ‘Decolonizing Female Genital Mutilation’ that colonization inadvertently strengthened FGM as an ‘identity-affirming practice’ by imposing foreign cultural norms. She contends that the persistence of FGM can be seen as a form of resistance to external control, where communities reaffirm their identity and agency. According to ElMorally, any attempt by the international community to demonize the practice or intervene without cultural sensitivity risks exacerbating the issue by reinforcing its symbolic value as an act of defiance.

The colonial legacies as ‘outsider’ imposition have been widely studied; meanwhile, early resistance from ‘within’ has received less attention. Feminist movements in the 20th century, such as those led by Huda Sharawi (1879–1947)

in Egypt, challenged harmful practices from within cultural and national contexts. Sharawi was a pioneering figure in Arab feminism. Growing up in a *haram* and married at the age of 13, she stayed separated from her husband until the age of 20 and pursued her education. She advocated for women's voting rights, education, new family legislation, a ban on child marriage, and became an international peace activist, all part of her broader struggle for both women's liberation and colonial liberation (Eriksen, 2022). During the same time, in India, Mahatma Gandhi (1869–1948) emerged as a vocal opponent of customs like child marriage, dowry, and female infanticide, promoting women's rights and societal reform (Howard, 2013). Just like Sharawi, Gandhi was married at the age of 13 and became a prominent advocate against child marriage. When the Child Marriage Restraint Act 1929, also known as Sarada Act, sought to raise the minimum age of marriage to 14, Gandhi felt it should have been raised to 16 or even 18 (Kishwar, 1985). These early, often contradictory efforts – marked by both colonial impositions and indigenous resistances – set the stage for the post-World War II era, when newly independent states, international organizations, and feminist movements would reshape the discourse on harmful practices within the framework of human rights and global governance.

Human rights in the post-World War II era (1945–90)

All human beings are born free and equal. (Article 1, Universal Declaration of Human Rights, 1948. Hansa Mehta is widely credited for changing Article 1 from *all men* to *all human beings*.)

Where, after all, do universal human rights begin?

In small places, close to home – so close and so small that they cannot be seen on any maps of the world. ... Such are the places where every man, woman, and child seeks equal justice, equal opportunity, equal dignity without discrimination. Unless these rights have meaning there, they have little meaning anywhere. (Eleanor Roosevelt, 'Where do universal human rights begin?', statement on 27 March 1958, UN Commission on Human Rights, see also Figure 2.5)

The aftermath of World War II marked a new era of international cooperation, driven by the urgent need to prevent future atrocities and enshrine fundamental human rights. The founding of the United Nations in 1945 marked a pivotal moment, as world leaders sought to establish a global order rooted in peace, security, and the protection of human dignity. Among the UN's core objectives was the promotion of universal human rights, an ambition shaped both by Enlightenment ideals and the devastating legacy of the war, particularly the Holocaust and wartime abuses. The newly formed United Nations Commission on Human Rights (UNCHR) took up the task of drafting a global human rights

Figure 2.5: Hansa Mehta and Eleanor Roosevelt, [United Nations](#) (1949)



Source: UN Photo/Marvin Bolotsky

framework, culminating in the adoption of the Universal Declaration of Human Rights (UDHR) in 1948. This landmark document, spearheaded by Eleanor Roosevelt and influenced by advocates such as Hansa Mehta, represented the first attempt to codify a universal standard of rights that transcended distinctions of sex, race, class, caste, and religion. By enshrining key principles – such as the right to life (Article 3), freedom from slavery or servitude (Article 4), the right to marriage at ‘full age’ with ‘free and full consent’ (Article 16), and the protection of motherhood and childhood (Article 25) – the UDHR laid the foundation for international efforts to address harmful practices, shaping human rights discourse and legal frameworks for generations to come ([UN General Assembly, 1948](#); [Koski, Mangat and Wright, 2023](#)).

Child marriage

The issue of child marriage was initially addressed within broader human rights discussions. The UDHR included marriage rights, specifically Article 16(2),

which stated that marriage should occur only with the free and full consent of intending spouses, indirectly highlighting child marriage as a violation of human rights. However, the lack of a specific minimum age for marriage in the UDHR led to ongoing debates. The UN Commission on the Status of Women (CSW), established in 1946, consistently emphasized child marriage as a barrier to gender equality throughout the 1950s and 1960s. The 1956 *Supplementary Convention on the Abolition of Slavery* included provisions against forced and child marriages, framing them as forms of slavery and servitude. In 1962, the Convention on Consent to Marriage, Minimum Age for Marriage, and Registration of Marriages sought to establish clearer standards, but efforts to include a specific age threshold were ultimately unsuccessful, and ratification remained limited. In parallel, a UN Resolution under the same title (Consent to Marriage, Minimum Age for Marriage, and Registration of Marriages) was drafted and adopted in 1965, and here too the minimum age caused tension. Ultimately, a recommendation was issued to set the minimum marriage age at 15 years, but this guideline was not legally binding (Koski, Mangat and Wright, 2023). The 1979 Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) reiterated the importance of protecting women and girls from child marriage in Article 16.2 but avoided specifying a universal minimum age due to geopolitical and cultural sensitivities. It was not until a decade that the widely accepted threshold of 18 years began to take shape and that child marriage became framed as a children's rights issue. Koski et al (2023, p 585) argue that this shift 'was seemingly established through a discursive innovation that borrowed principles from the 1989 Convention on the Rights of the Child' while 'the current, commonly used definition of child marriage – as marriage before the age of 18 – has never been agreed upon in a legally binding international convention'. Article 1 of the Convention on the Rights of the Child (CRC) defined a child as 'every human being below the age of eighteen years unless under the law applicable to the child, majority is attained earlier' (UN General Assembly, 1989). While the CRC prohibits all forms of violence and sexual abuse against children (Articles 19 and 34), it does not explicitly refer to child marriage. The 'discursive innovation' that Koski et al (2023) describe involved linking the CRC's definition of childhood with earlier UN conventions that condemned child marriage without specifying a minimum age. The CRC was ratified by 196 countries, including every UN member except the United States (United Nations, 2025). This widespread endorsement reinforced 18 as the globally accepted minimum age for marriage in international discourse, yet inconsistencies persist, at national levels. For instance, while both Canada and the United States advocate for the elimination of child marriage abroad (serving as partners in the Global Programme to End Child Marriage), they continue to permit child marriage domestically (Koski and Heymann, 2018; Koski and Clark, 2021; Koski, Mangat and Wright, 2023).

Female genital mutilation

Female genital mutilation entered the international discourse in the 1950s when the UN Economic and Social Council (ECOSOC) requested a World Health Organization (WHO) study on ‘ritual operations’ affecting girls (UN ECOSOC, 2022, p 17). Initially, discussions framed FGM as a cultural tradition rather than a health or human rights issue (Andro and Lesclingand, 2016). It was not until the 1970s that feminist advocacy gained momentum, shifting the focus toward its severe health consequences and gendered implications. The establishment of the NGO Working Group on Traditional Practices Affecting the Health of Women and Children in 1977, and the WHO’s first regional seminar on the topic in 1979 further contributed to reframing FGM as a harmful practice (Ras-Work, 1999). Fran Hosken, a journalist and women’s rights advocate who had studied FGM since the early 1960s through extensive fieldwork across Africa, presented her findings at the regional seminar in Khartoum to representatives from ten countries – Burkina Faso, Djibouti, Egypt, Ethiopia, Kenya, Nigeria, Oman, Somalia, Sudan, and South Yemen. The Hosken Report provided a first mapping of different types of cuttings, including sunna, excision, and infibulation (Hosken, 1979), influencing future policies and interpretations (Accad, 2024). However, debates around FGM at the time were highly polarized. At the 1980 UN Conference on Women in Copenhagen, heated discussions erupted between European and African delegations. Many African representatives equated FGM with male circumcision and defended it as a rite of passage (Andro and Lesclingand, 2016). At the same time, prominent African and Arab intellectuals spoke out against the practice (Accad, 2024). Among them was Asma El-Dareer, a Sudanese physician and researcher, who documented her own circumcision experience, the medical complications she endured, and her lifelong commitment to raising awareness to end the practice (El-Dareer, 1982). Similarly, Raqiya Haji Dualeh Abdalla, then Director of Culture for the Somali Ministry of Culture and Higher Education, conducted one of the first surveys on FGM in Somalia (Abdalla, 1982). Like Hosken and El-Dareer, Abdalla documented the three main types of FGM (sunna, excision, and infibulation), detailing their severe physical and psychological effects, the cultural justifications used to sustain them, and the manipulation of religious teachings to uphold the practice (Accad, 2024). By 1985, a global consensus began to emerge regarding the harmful effects of FGM. The Working Group on Traditional Practices Affecting the Health of Women and Children presented its first report to the UN Commission on Human Rights in 1986 (Andro and Lesclingand, 2016) and successfully lobbied for provisions to protect children from harmful practices in the CRC (Ras-Work, 1999). From this point forward, international reports and studies increasingly framed FGM as a

violation of fundamental human rights, leading to stronger advocacy and policy measures aimed at its eradication.

Gender-biased sex selection

Global awareness of GBSS developed more slowly compared to child marriage and FGM. During the 1980s, data on son preference and systematic daughter neglect in Asia began to emerge, highlighting deeply ingrained gender biases. However, the issue received limited attention for several reasons. First, it was only during the 1980s that reproductive technologies that enabled prenatal sex selection became widespread. Second, at the time, policy focus was directed towards fertility decline – for instance, China introduced the One-Child Policy in 1979. Sex selection was very much an unintended consequence of the expansion of the international family planning movement in the 1960s and 1970s (Connelly, 2008), and some policy makers even welcomed the trend as a means to curb population growth, anticipating that fewer female births would lead to fewer future mothers (Miller, 2001). Third, data constraints made it difficult to detect and interpret skewed sex ratios, which were first observed in countries like China, India, and South Korea (Rahm and Kostenzer, 2018). South Korea became one of the first countries to ban prenatal sex determination in 1987, followed by China and India soon after. However, it was not until the 1990s that the issue gained international attention. The wake-up call came with Amartya Sen's seminal 1990 article, 'More Than 100 Million Women Are Missing', which underscored the magnitude of sex discrimination and pushed the topic on the global agenda (Sen, 1990). Interestingly, Sen's article was a condensed version of his earlier writing on 'Women's Survival as a Development Problem' (Sen, 1989), which had received less attention than the *missing women* framing. Throughout the 1980s, Sen had been publishing on gender bias and discrimination against women. In 1985, for example, he prepared a UN report on *Women, Technology, and Sexual Division*, which acknowledged gender bias in developing nations, yet underestimated the impact technology would have in terms of sex selection: 'Family planning is certainly one type of technological modernization that would tend to *help* rather than *harm* the interests of women' (Sen, 1985, p 25, emphasis added). Certainly, access to ultrasound has overwhelmingly helped rather than harmed women in their sexual and reproductive health and rights, but it also triggered new harms in the form of prenatal gender discrimination. This fundamental tension – between the health benefits and the potential harmful usages of reproductive technologies – would go on to shape much of the debate on gender-biased sex selection.

Importantly, two legally binding conventions emerged during this era that laid the groundwork for addressing harmful practices: the Convention on the

Elimination of All Forms of Discrimination Against Women (CEDAW) (1979) and the Convention on the Rights of the Child (CRC) (UN General Assembly, 1989). While neither explicitly defined child marriage, female genital mutilation, or sex selection, they established critical legal foundations for future action:

1. The CEDAW legally obligates States to ‘take all appropriate measures ... to modify or abolish existing laws, regulations, customs and practices which constitute discrimination against women’ and to ‘modify the social and cultural patterns of conduct of men and women, with a view to achieving the elimination of prejudices and customary and all other practices which are based on the idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for men and women’ (Articles 2f and 5a).
2. The CRC places the ultimate responsibility on governments to ensure the protection of children’s fundamental rights. It calls on State Parties to ‘take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence ... while in the care of parent(s), legal guardian(s) or any other person who has the care of the child’ (Article 19.1). Moreover, Article 24.3. states that States ought to take ‘all effective and appropriate measures with a view to abolishing traditional practices prejudicial to the health of children’.

The global mobilization for women’s rights during this period unfolded against the backdrop of Cold War geopolitics, shaping the pace and focus of international reforms. While the United Nations provided a critical platform for advocacy, ideological divides between the Western and Eastern blocs often influenced policy priorities. Nevertheless, feminist activists successfully lobbied for stronger international frameworks to combat harmful practices. The International Women’s Year (1975) and the United Nations Decade for Women (1976–1985) played a pivotal role in raising global awareness, particularly through the World Conferences on Women in Mexico City (1975), Copenhagen (1980), and Nairobi (1985). Despite conflicts and controversies – such as over the minimum age for marriage – these conferences facilitated critical international dialogue, bringing harmful practices into the international spotlight. The *Forward-looking Strategies for the Advancement of Women* adopted in Nairobi (1985) aimed to accelerate the implementation of CEDAW, promote gender equality, and address harmful practices more directly.

Harmful practices as violence against women (1990–2015)

Since the 1990s, harmful practices have gained increasing recognition by international organizations as forms of violence against women (Andro

and Lesclingand, 2016). This period saw significant advancements in the establishment of both hard and soft laws to protect women's rights. With the end of the Cold War – often symbolized by Fukuyama's concept of the 'end of history' – a new global consensus on human rights emerged. This shift facilitated the adoption of landmark international declarations, which placed harmful practices at the centre of gender equality efforts. Among the pivotal developments were:

- The 1993 Declaration on the Elimination of Violence against Women, which explicitly recognized 'female genital mutilation and other traditional practices harmful to women' as 'acts of violence' (Article 2) (UN General Assembly, 1993).
- The 1994 International Conference on Population and Development (ICPD) Programme of Action, which included recommendations urging governments to address FGM, prenatal sex selection, and child marriage (United Nations, 1995).
- The 1995 Beijing Declaration and Platform for Action, which dedicated a full section to the girl child and called on both governmental and non-governmental actors to eliminate all forms of discrimination against girls, including early marriage, FGM, and GBSS (United Nations, 1996).

These declarations, despite being non-binding, played a critical role in raising global awareness, shaping normative standards, and influencing the policies and interventions of governments, international organizations, and NGOs. International NGOs, in particular, lobbied extensively to bring the severity of violence against women to the forefront of global discussions. Before 1993, the topic was largely absent from the international policy agenda (Heise, 1993), but sustained advocacy efforts ensured its recognition as a critical human rights issue (Joachim, 2007).

Two landmark conferences – ICPD (1994) and the Fourth World Conference on Women in Beijing (1995) – significantly shaped the global response to harmful practices and deserve closer attention. The 1994 International Conference on Population and Development in Cairo marked a fundamental shift in global population and development policies. It moved away from a focus on demographic targets – such as fertility rates and population control – toward an emphasis on population quality, encompassing maternal and child health, voluntary family planning, and the protection of reproductive rights (Rahm, 2019a). The ICPD Programme of Action (PoA) explicitly addressed different forms of harmful practices, including child marriage, FGM, and prenatal sex selection, urging governments to take decisive actions (outlined in PoA sections 4.21–4.23). It stressed that the discrimination against girls started from the earliest stages of their life (PoA section 4.15) and it called on states to 'eliminate all forms of discrimination

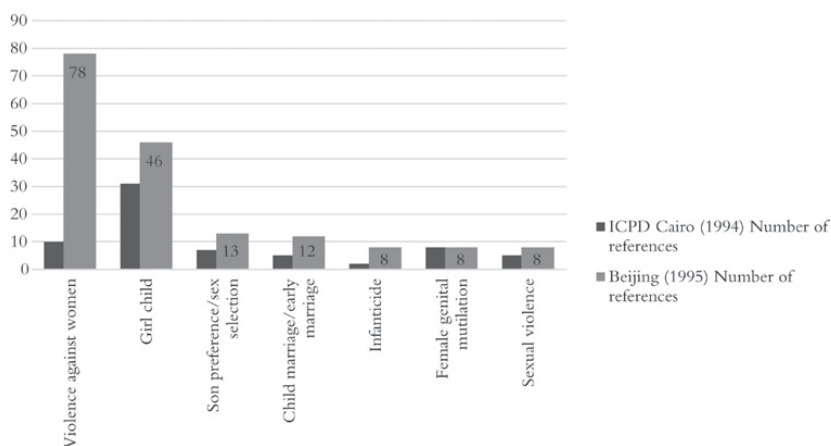
against the girl child and the root causes of son preference, which result in harmful and unethical practices regarding female infanticide and prenatal sex selection' (PoA section 4.16). At the same time, the PoA emphasized women's reproductive freedoms, outlining their rights to comprehensive sexual and reproductive health services. The ICPD framework placed empowerment, gender equality, and individual rights at the core of population and development. Ultimately, 179 governments adopted the ICPD Programme of Action ([United Nations, 1995](#)).

A year later, the 1995 Fourth World Conference on Women in Beijing further reinforced the global commitment to tackling violence against women. With approximately 15,000 participants, it was one of the largest international gatherings on women's rights. Beijing placed a global spotlight on harmful practices, making three unique contributions: first, it recognized a *life-cycle* approach to violence against women, by stressing that discrimination and violence begin before birth and persist throughout life. It explicitly acknowledged that sex-selective abortion, female infanticide, and early/child marriage contribute to systemic gender inequalities by stating: 'Discrimination and violence against girls begin at the earliest stages of life and continue unabated throughout their lives' ([United Nations, 1996](#), paragraph 39). The Platform also highlighted disparities in access to nutrition, health, and education, reinforcing the need for early intervention to prevent gender-based discrimination. Second, it recognized the power of partnerships. Paragraph 107 of the Beijing Declaration emphasized the importance of multi-stakeholder collaboration, requiring governments, NGOs, the media, the private sector, and international organizations to work together to eliminate harmful practices. This approach was particularly innovative because it encouraged intersectoral cooperation to develop *programmes* against FGM, GBSS, and child marriage. The Beijing Declaration also addressed the medicalization of harmful practices, recognizing the ethical dilemmas posed by technological advancements ([United Nations, 1996](#)). This broadened the responsibility beyond governments, fostering a global, multi-stakeholder approach to tackling harmful practices. Third, it put child marriage, FGM, and sex selection on an equal footing. This was particularly surprising, and might have been influenced by the fact that the Fourth World Conference on Women took place in Beijing, where son preference and sex selection was by then well documented. Nevertheless, neither before nor after Beijing, did GBSS arguably receive the same level of urgency as other harmful practices. This recognition becomes evident in the frequency of explicit references to child marriage, FGM, son preference, and sex selection in the official Beijing Declaration, as well as in Hillary Clinton's closing remarks, which highlighted the gravity of these practices (see [Box 2.3](#)).

Box 2.3: Excerpts from Hillary Clinton's speech at the 1995 Beijing conference, and references to harmful practices in the ICPD Programme of Action and Beijing Declaration and Platform for Action

It is a violation of human rights when babies are denied food, or drowned, or suffocated, or their spines broken, simply because they are born girls. It is a violation of human rights when women and girls are sold into the slavery of prostitution for human greed – and the kinds of reasons that are used to justify this practice should no longer be tolerated. It is a violation of human rights when women are doused with gasoline, set on fire, and burned to death because their marriage dowries are deemed too small. It is a violation of human rights when individual women are raped in their own communities and when thousands of women are subjected to rape as a tactic or prize of war. It is a violation of human rights when a leading cause of death worldwide among women ages 14 to 44 is the violence they are subjected to in their own homes by their own relatives. It is a violation of human rights when young girls are brutalized by the painful and degrading practice of genital mutilation. It is a violation of human rights when women are denied the right to plan their own families, and that includes being forced to have abortions or being sterilized against their will. If there is one message that echoes forth from this conference, let it be that human rights are women's rights and women's rights are human rights once and for all. (First Lady Hillary Rodham Clinton, Fourth World Conference on Women in Beijing, China, September 1995. Source: [Clinton, 1995](#)).

Figure 2.6: Number of references to harmful practices as violence against women in the ICPD Programme of Action and Beijing Platform for Action



Source: Compiled by author based on [United Nations \(1995, 1996\)](#)

The phrase 'women's rights are human rights' had existed before (Keck and Sikkink, 1998), but was never brought so prominently into global consciousness. Clinton's speech, delivered before an audience of delegates representing 189 countries around the world, was a defining moment in the global women's rights movement. She directly condemned various forms of gender-based violence – including infanticide, forced abortions, marriage-related violence – many of which were also prevalent in China. Despite not naming any specific country, China immediately censored the speech, cutting it from the closed-circuit television feed in the conference hall and blocking nationwide broadcasts. However, this did not diminish the applause it received or the impact it had in linking women's rights to human rights (Clinton, 1995).

Both the ICPD PoA and the 1995 Beijing Platform for Action were pivotal in advancing international recognition of harmful practices. Figure 2.6 illustrates the number of explicit references to specific forms (that is, son preference/sex selection, child/early marriage and female genital mutilation) in each document, underscoring their growing importance in global policy frameworks as forms of violence against women.

By the turn of the century, several resolutions under the title 'Traditional or customary practices affecting the health of women and girls' were adopted by the UN General Assembly, including Resolution A/RES/52/99 in 1998, Resolution 53/117 in 1999, and Resolution 56/128 in 2001 (IANWGE, n.d.). These resolutions welcomed international and regional efforts while urging nation-states to take concrete action. FGM received particular attention. In 2003, the establishment of the *International Day of Zero Tolerance for Female Genital Mutilation* marked a global commitment to eradicating the practice, held annually on 6 February. In 2008, the first joint UNFPA–UNICEF Programme to Eliminate Female Genital Mutilation was launched, gradually expanding to 15 high-prevalence countries (UNFPA and UNICEF, 2013). The WHO released an interagency statement endorsed by ten UN agencies on *Eliminating FGM* (WHO, 2008). This was complemented by a *Global Strategy to Stop Health Care Providers from Performing Female Genital Mutilation* in 2010 (WHO, 2010). Similar interagency statements addressed other harmful practices, including *Preventing Gender-Biased Sex Selection* (WHO, 2011), *Eliminating Forced, Coercive, and Otherwise Involuntary Sterilization* (WHO, 2014), and *Eliminating Virginity Testing* (WHO, 2018).

Regional agreements also played a crucial role in shaping policy responses. The African Charter on the Rights and Welfare of the Child, adopted in 1990 and entering into force in 1999, sought to protect children from

harmful social and cultural practices (Article 21) (African Union, 1990). In Asia, the 1990 SAARC Year of the Girl Child, followed by the 1991–2000 SAARC Decade of the Girl Child, raised awareness of sex selection. By the late 2000s, skewed sex ratios at birth were also observed for the first time in Southeast Europe and the Caucasus. In response, several European institutions issued legislation against sex selection (Stump, 2011). Interestingly, while European institutions framed the practice as ‘gendercide’ (Papadopoulou, 2013), UN agencies increasingly cautioned against this terminology. In the mid-1990s, sex selection had been framed as a form of ‘violence against women’ in the Beijing Declaration and Platform for Action. A decade or two later, UNFPA issued a guidance note advising against this framing, as it could infringe on reproductive rights and restrict access to safe abortion (UNFPA, n.d.). Additionally, regional treaties such as Latin America’s Belém do Pará Convention (Organization of American States, 1995), Africa’s Maputo Protocol (African Union, 2003), Europe’s Istanbul Convention (Council of Europe, 2014), and more recently the Directive (EU) 2024/1385 (European Union, 2024) criminalized various forms of violence against women, including harmful practices, and required states to implement policy measures. However, these regional efforts left approximately 75 per cent of the global female population – particularly in Asia – without legal protection (Langrand, 2024).

Harmful practices as a barrier for sustainable development (since 2015)

The post-2015 era has been characterized by the rise of global partnerships, with harmful practices becoming a growing concern for civil society organizations, governments, and international organizations alike (Kostenzer, 2016; Rahm and Kostenzer, 2018; Koski, Mangat, and Wright, 2023). The *2030 Agenda for Sustainable Development* launched in 2015 and signed by 193 countries, explicitly acknowledges that sustainable development cannot be achieved if half the global population is denied fundamental rights. Yet, women and girls around the globe continue to face discrimination, violence, and unequal access to essential resources such as land, finance, inheritance, and technology. The Sustainable Development Goals (SDGs) were designed as a call to action to address these systemic barriers. Unlike its predecessor, the Millennium Development Goals, the SDGs specifically seek to *eliminate all harmful practices* by 2030 (SDG 5.3). Despite this broad language, the Global Indicator Framework explicitly monitors only two manifestations under SDG 5.3: child marriage and female genital mutilation (Cookson et al, 2026).

Beyond these two recognized practices, many other harmful practices have gained attention through emerging global partnerships and alliances. The post-2015 period has witnessed the growth of knowledge-sharing systems

and collaborative networks aimed at accelerating progress towards gender equality. Inspired by the Joint Programme to Eliminate FGM, launched in 2008, new global initiatives were introduced, including the UNFPA Global Programme to Address Gender-Biased Sex Selection and the UNFPA-UNICEF Global Programme to End Child Marriage. All three programmes, implemented by the UN and co-financed by the European Union under its Global Public Goods and Challenges framework ([European Union, 2015a, 2015b, 2015c](#)), reflect a strategic shift beyond hard and soft law. The focus has increasingly shifted towards social norm change interventions as well as multi-sectoral and multi-stakeholder partnerships.

With the 2030 deadline approaching, international organizations have intensified efforts to monitor progress and synthesize key findings beyond their regular reporting. For example, an evaluation synthesis on SDG 5 reviewed and analysed UN evaluations conducted between 2015 and 2023 related to SDG 5 and found that harmful practices continue to be persistent barriers to gender equality worldwide ([UN Women, 2024](#)). Simultaneously, the UN Commission on Population and Development, the primary legislative body overseeing the implementation of the ICPD Programme of Action, conducted a comprehensive review in 2024 to assess progress at the 30th anniversary of the ICPD. These are just two examples of recent assessments that paint a stark picture. The overall message emerging from these reviews is clear ‘the world is off track to achieve SDG 5 by 2030’ ([Bhatt et al, 2024b](#), p 12). Stalled progress is attributed to a triple crisis – COVID-19, climate change, and conflict – as well as selective implementation, where governments and institutions cherry-pick goals rather than committing to comprehensive reforms ([Forestier and Kim, 2020](#); [UN Women, 2024](#)). An increasingly prominent factor to explain stalled progress is the growing gender backlash.

As of early 2025, conservative forces have gained momentum across multiple regions, shaping the political landscape in ways that challenge gender equality efforts. From Milei in Argentina to Meloni in Italy, from Trump in the US to Orbán in Hungary, Putin in Russia, and Xi Jinping in China, the global surge in autocratic governance is increasingly marked by a rollback of gender equality commitments. This trend is characterized by increased polarization, defunding of equity and inclusion programmes, cuts to humanitarian and development aid, and a significant rise in global military expenditure. In these political battlegrounds, women and girls are among the first to bear the consequences. The rollback of gender equality initiatives threatens to erode decades of progress, undermining the commitments made under the 2030 Agenda for Sustainable Development and prior agreements.

A pivotal moment in this trajectory was the Summit of the Future in September 2024, where global leaders convened to establish the

parameters for the post-2030 agenda and the future of multilateral governance. The resulting Pact for the Future – alongside its annexes, the Global Digital Compact and the Declaration on Future Generations – was presented as a renewed commitment by 193 countries to reinvigorate a faltering multilateral system. As UN Secretary-General António Guterres underscored in his opening remarks, ‘twenty-first century challenges require twenty-first century solutions’ (Desai, 2025, p 1). Action 35.c. of the Pact for the Future underlines the commitment of governments to:

Address the challenges faced by all young women and girls, including by combating gender stereotypes and negative social norms and eliminating discrimination, harassment, all forms of violence against young women and girls, including sexual and gender-based violence, and harmful practices, including female genital mutilation and child, early and forced marriage. (UN, 2024, p 24)

However, such commitments will be tested against an increasingly fragmented, polarized international order, where pressing challenges – including peace and security, climate change, gender equality, and human rights – are deeply interconnected.

Over the past 80 years, the UN has consistently identified harmful practices as a pressing concern, establishing international laws and standards to address them. As Eleanor Roosevelt emphasized, human rights must hold meaning close to home – they must be more than legal principles; they must translate into lived realities. The post-2030 era will require more than rhetorical commitments. It will require robust accountability mechanisms, effective enforcement of international norms at national and local levels, and resilient coalitions capable of resisting regressive trends. The further challenge is to anticipate and proactively counter emerging threats – particularly digital violence and online perpetration of harmful practices against women and children (Polyzoidou, 2024; Fry et al, 2025). The task ahead is thus also to ‘future-proof’ human rights protections against evolving and technologically mediated forms of gender-based harm (Rahm et al, 2026). This brief historical review of the global mobilization against harmful practices examined the emergence of human rights frameworks and consensus documents, as well as the evolving framing of harmful practices: initially regarded primarily as a human rights issue – particularly within the domains of women’s and children’s rights – these practices have increasingly been recognized as a broader impediment to gender equality and sustainable development. The next section zooms into the specific international legal frameworks and concrete policy instruments to end harmful practices.

Legal architectures and lofty agreements to end harmful practices

Child, early, and forced marriage, all forms of female genital mutilation, and gender-biased sex selection are widely recognized as harmful practices that violate the human rights of women and girls. These rights – spanning civil, cultural, economic, political, and social dimensions – are enshrined in various international and regional treaties. Furthermore, numerous international consensus documents, including those emerging from United Nations world conferences and summits, reaffirm human rights and urge governments to respect, protect, and fulfil them (UNFPA, 2020b). This section discusses state obligations according to four key areas: international legal frameworks, regional treaties, national constitutional obligations, and non-binding consensus documents seeking to end harmful practices. Focus is placed on the most pertinent agreements; an extended list of international and regional commitments can be found in [Appendices 1 and 2](#).

International law: from the UDHR to CEDAW

Gender equality and the right to be free from sex- and gender-based discrimination are fundamental human rights enshrined in the International Bill of Human Rights (1948), which includes the Universal Declaration of Human Rights (UDHR) (UN General Assembly, 1948), the International Covenant on Civil and Political Rights (UN General Assembly, 1966a), and the International Covenant on Economic, Social and Cultural Rights (ICESCR) (UN General Assembly, 1966b). Under the ICESCR, States Parties are required to: (a) ensure that harmful social or traditional practices do not obstruct access to pre- and post-natal care and family planning services; (b) prevent third parties from coercing women into undergoing harmful traditional practices, such as FGM; (c) implement measures to protect vulnerable and marginalized groups, particularly women, children, adolescents, and older persons, from gender-based violence (OHCHR, 2000). The ICESCR has been ratified by 172 UN Member States.

Convention on the Elimination of All Forms of Discrimination Against Women (UN General Assembly, 1966) defines a broad set of obligations on States Parties, requiring them to: (a) modify or abolish discriminatory laws, regulations, customs, and practices (Article 2.f); (b) take all appropriate measures, including temporary special measures, to eliminate gender-based discrimination (Article 4.1); (c) modify social and cultural patterns of conduct to eliminate prejudices and practices based on the inferiority or superiority of either sex (Article 5.a); (d) ensure access to healthcare free from discrimination (Article 12.1); (e) prohibit child marriage and ensure

that any betrothal or marriage of a child has no legal effect (Article 16.2). The CEDAW has been ratified by all but seven UN Member States.

The Convention on the Rights of the Child ([UN General Assembly, 1989](#)) provides additional protections for children, requiring States Parties to: (a) implement legislative, administrative, social, and educational measures to protect children from all forms of physical, sexual, and mental violence (Article 19); (b) abolish traditional practices that are prejudicial to the health of children (Article 24.3); (c) ensure that no child is subjected to torture or cruel, inhuman, or degrading treatment (Article 37.a). Overall, the CRC upholds four core principles of non-discrimination (Article 2), the best interests of the child (Article 3.1), the right to life, survival, and development (Article 6), and the right to be heard (Article 12). The Convention has been ratified by all UN Member States except the United States.

Respective treaty bodies have reinforced States' obligations through General Comments, concluding observations, and recommendations. These interpretations highlight the necessity of comprehensive interventions that address the root causes of harmful practices while promoting gender equality. Treaty bodies stress the importance of awareness-raising and education through long-term informational campaigns targeted at community and religious leaders, family members, men and boys, as well as women and girls. Moreover, they stress the importance of multi-sectoral approaches, integrating legal, budgetary, administrative, and political measures, and collaborating with civil society, faith-based organizations, and communities ([UNFPA, 2020a](#)).

The first global strategy to eradicate harmful practices has been put forward in the Joint General Recommendation/General Comment No. 31 of the Committee on the Elimination of Discrimination against Women and No. 18 of the Committee on the Rights of the Child on harmful practices, hereafter Joint General Comment ([CEDAW and CRC, 2014](#)). It reaffirms state obligations established under the CEDAW and CRC that serve as the 'basis for the elaboration of a global strategy to eliminate harmful practices' and outlined key pillars of such a strategy ([OHCHR, 2015](#), p 6). In particular, the Joint General Comment focuses on four pillars: data collection and monitoring, legislative development and enforcement, prevention of harmful practices, and protective measures for those affected. First, it asks States for regular collection, analysis, and dissemination of data disaggregated by sex, age, geographic location, socio-economic status, and education level to track progress and identify gaps. Second, it outlines the development, enactment, implementation and monitoring of relevant legislation, public awareness of those laws, and sufficient human, financial, technical and other resources necessary to effective enforcement. Third, prevention is a cornerstone of this global strategy, requiring shifts in social and cultural norms to establish rights-based approaches that empower women and girls. Fourth, protective

measures and responsive services are spelled out to be extended to survivors and those at high risk, including migrant women, regardless of their legal status (CEDAW and CRC, 2014).

The Joint General Comment also underscores the need for a ‘coordinated, mainstreamed’ approach (CEDAW and CRC, 2014, p 10). In particular, it requests States to engage in *horizontal* coordination across education, health, justice, social welfare, law enforcement, immigration, and media sectors, as well as *vertical* coordination between local, regional, and national authorities, alongside engagement with traditional and religious leaders. Moreover, it underlines that ‘strategies aimed at eliminating harmful practices also need to involve a wide range of other stakeholders, including national independent human rights institutions, health, education and law enforcement professionals, members of civil society and those who engage in the practices’ (CEDAW and CRC, 2014, p 11). To sustain progress, States are urged to allocate adequate human, financial, and technical resources, while establishing mechanisms for coordination and monitoring to track progress and drive accountability. This first attempt at outlining a global strategy to end harmful practices arguably marked the beginning of comprehensive global programmes, including UN-led initiatives that tackle harmful practices through vertical and horizontal coordination.

Regional instruments: from Maputo to Istanbul

Regional human rights frameworks further strengthen state obligations to eliminate harmful practices. The African Charter on Human and Peoples’ Rights (Banjul Charter) adopted in 1981, and its Protocol on the Rights of Women in Africa better known as Maputo Protocol adopted in 2003, require States Parties to ‘enact and effectively implement appropriate legislative or regulatory measures, including those prohibiting and curbing all forms of discrimination particularly those harmful practices which endanger the health and general well-being of women’ (Article 2.1.b) (African Union, 2003). Article 1 of the Maputo Protocol defines harmful practices as ‘all behaviour, attitudes and/or practices which negatively affect the fundamental rights of women and girls, such as their right to life, health, dignity, education and physical integrity’ (African Union, 2003). Article 5 of the Maputo Protocol lays out State obligations to curb harmful practices through four pillars – awareness, prohibition, support services, and prevention – which noticeably resemble the key pillars of global strategy proposed by the CRC and CEDAW over a decade later (CEDAW and CRC, 2014). The Charter has been ratified by 54 African Union Member States, with Morocco being the only African country that has not ratified it. Meanwhile, the Maputo Protocol has been ratified by 44 out of 55 Member States.

Similarly, the African Charter on the Rights and Welfare of the Child (1990) obliges States to eliminate harmful social and cultural practices affecting children's welfare, dignity, growth, and development. It specifically mandates the prohibition of child marriage and betrothal, setting the minimum age of marriage at 18 years and requiring marriage registration. To date, 50 AU Member States have ratified the Charter, while Morocco, the Sahrawi Arab Democratic Republic, Somalia, South Sudan, and Tunisia have not done so. Meanwhile, three Member States, namely, Egypt, Mauritania, and Sudan, have entered reservations to some provisions of the Charter.

In the Americas, the Inter-American Convention on the Prevention, Punishment, and Eradication of Violence Against Women, the 1994 Convention of Belém do Pará commits States to modifying social and cultural norms that reinforce gender stereotypes and perpetuate violence against women (Article 8.d) ([Organization of American States, 1995](#)). It has been ratified by all but two American states, Canada and the United States. In Europe, the Council of Europe Convention on Preventing and Combating Violence Against Women and Domestic Violence, better known as Istanbul Convention, provides a legal framework for preventing violence, protecting victims, and prosecuting perpetrators ([Council of Europe, 2014](#)). It requires states to invest in education, specialized training, support services, and data collection. As of 2023, 39 European countries and the European Union have ratified the Convention, though Turkey withdrew in 2021 and similar debates are ongoing in Latvia as of 2025. In select eastern EU Member States, the Convention triggered substantial gender and democratic backsliding ([Krizsán, 2021](#)). In South Asia, the SAARC Convention on the Promotion of Child Welfare in South Asia (2002) reinforces legal protections against harmful practices by obligating states to establish strong legal frameworks and international cooperation mechanisms to protect children's rights.

In addition to international and regional legal frameworks, national constitutions play a central role in protecting the rights of women and girls. According to UN Women, all UN Member States include provisions in their constitutions guaranteeing gender equality and prohibiting discrimination against women and girls ([UN Women, n.d.](#)). Furthermore, 187 national constitutions recognize the right to freedom from violence, while 185 constitutions guarantee equality in marriage and family life ([UN Women, n.d.](#)). These constitutional commitments serve as fundamental legal safeguards, reinforcing states' obligations to uphold gender equality and prevent harmful practices at the national level.

Consensus documents: from Cairo and Beijing to 2030

Commitments for the eradication of harmful practices are reaffirmed in a variety of non-binding consensus documents. These agreements, while not

legally enforceable, set normative standards that guide policy development, advocacy, and implementation at international, regional, and national levels. Over the past decades, key global frameworks have repeatedly underscored the urgency of eliminating harmful practices against women and girls, providing governments with clear directives for action.

One of the earliest and most influential global commitments emerged from the 1994 International Conference on Population and Development (ICPD) held in Cairo and its Programme of Action ([United Nations, 1995](#)). Endorsed by 179 governments, the ICPD Programme of Action explicitly calls for immediate steps to end FGM and other harmful practices that endanger the health and rights of women and girls. It also emphasizes the elimination of all forms of discrimination against the girl child, particularly addressing son preference, female infanticide, and prenatal sex selection. To achieve these goals, the document urges governments and communities to support (a) community outreach and advocacy, particularly through partnerships with village and religious leaders to challenge harmful norms; (b) educational and counselling programmes to raise awareness about the impacts of harmful practices on girls' and women's health; (c) medical and psychosocial support, including appropriate treatment, rehabilitation, and counselling for those affected by such practices.

Building on these principles, the 1995 Beijing Platform for Action set forth a more detailed roadmap for eliminating harmful practices through policy reforms, education, and advocacy ([United Nations, 1996](#)). The Platform outlines concrete actions for governments and other stakeholders. It calls on governments to: (a) support NGOs and community-based organizations in challenging negative attitudes and harmful practices against girls; (b) integrate gender-sensitive education by developing curricula, teaching materials, and textbooks that address the harmful effects of traditional or customary practices and improve girls' self-image and career prospects, particularly in underrepresented fields like mathematics, science, and technology; (c) ensure that tradition and religion are not used to justify discrimination against girls. Additionally, governments, along with international and non-governmental organizations, are urged to: (a) remove barriers to education for married and pregnant girls by promoting inclusive policies and providing childcare support; (b) encourage balanced gender representation in educational materials and the media while combating child pornography and harmful stereotypes; (c) address the root causes of son preference and eliminate discriminatory practices such as prenatal sex selection and female infanticide; (d) prioritize formal and informal education programmes that empower girls, foster self-esteem, and promote gender equality in all aspects of life. As such, the Beijing Platform for Action underscores stakeholder-specific interventions at the intersection of policy, education, and advocacy.

The 2030 Agenda for Sustainable Development, adopted in 2015, provided a renewed and explicit commitment to the eradication of harmful practices (United Nations, 2015). SDG Target 5.3 calls for the elimination of all harmful practices against women and girls, specifically naming child, early and forced marriage and female genital mutilation. All 191 UN Member States have agreed to try to achieve the SDGs by the year 2030. Unlike earlier commitments, which were largely aspirational, the SDGs introduced concrete indicators and mechanisms for progress monitoring, placing a stronger emphasis on measurable outcomes and accountability. However, despite the formalization of measurable targets, significant gaps in data availability and accountability persist, rendering the achievement of SDG 5 a distant prospect (Rahm et al, 2026). The African Union set forth a longer-term vision in its *Agenda 2063: The Africa We Want*. The objectives are by design interlinked with the SDGs (African Union, 2025). As a non-legally binding framework, the Agenda 2063 articulates the aspiration that by 2063, ‘all harmful social practices (especially female genital mutilation and child marriages) will be ended and barriers to quality health and education for women and girls eliminated’ (African Union, 2015, p 9).

International commitments have been indeed reinforced by regional frameworks, national policies, and grassroots interventions. In many regions, legally binding instruments – such as the Maputo Protocol in Africa or the Istanbul Convention in Europe – have translated global principles into regional obligations for governments. Meanwhile, local organizations and advocacy networks continue to mobilize diverse stakeholders, from policy makers to community leaders, to feminist youth in efforts to challenge deeply rooted traditions and practices. Despite significant progress – including declining prevalence rates in certain communities – persistent challenges remain to meet the target of ending harmful practices by 2030 (UNFPA, 2020a). Appendices 1 and 2 provide an overview of major international and regional instruments that have shaped global commitments and policy efforts toward this goal.

This chapter examined harmful practices through the lens of global governance. The chapter applied the 3-M Model (motives, methods, magnitudes) to analyse the persistence of harmful practices such as female genital mutilation, child marriage, and gender-biased sex selection across large parts of the world (Rahm, 2019a, 2021). These practices, while distinct, share common drivers, including patriarchal control, social pressure, and economic roots. Their methods have evolved over time, ranging from traditional rituals to medicalized interventions and high-tech procedures, amplifying their demographic and health consequences. A comparative analysis of harmful practices in the Global North and Global South revealed both commonalities and disparities. While such practices were historically associated with the Global South, similar forms of gendered control persist

in the Global North. Legal double standards and cultural framing have influenced perceptions, shaping policy responses and global discourse. Finally, the chapter provided a historical review of global mobilization against harmful practices, from early colonial interventions to modern international human rights frameworks. It examined state obligations as enshrined in international laws, regional treaties, and national constitutions, emphasizing the need for integrated, context-specific strategies that engage multiple stakeholders to eliminate these practices and support their eradication to and beyond 2030.

Gender Justice by Design? Mapping Actors and Networks in Global Programmes

Armed with knowledge, backed by international human rights agreements, and buoyed by new commitments by governments and civil society, we have the power to defy the forces that perpetuate harm and to realize a world where every woman and girl is free to chart her own future. (Dr Natalia Kanem, United Nations Under-Secretary-General and Executive Director of the United Nations Population Fund [[UNFPA, 2020a](#), p 5])

As Dr Natalia Kanem’s statement underscores, knowledge plays a fundamental role in the global ‘fight’ against harmful practices. It stands alongside international human rights agreements and commitments by governments and civil society as a cornerstone for change. It is suggested that, together, these three elements – knowledge, rights, and commitments – form a powerful triad used to challenge and dismantle structures of harm. The quote not only reflects the high ambitions of these programmes but also the emphasis that is given to knowledge mobilization and multi-stakeholder partnerships. While the [previous chapter](#) explored the role of human rights agreements and government commitments, this chapter shifts focus to the role of knowledge transfer in global gender programmes and the networks of actors involved in their design, implementation, and dissemination.

Global challenges that transcend national borders increasingly require global (policy) solutions. The necessity for concerted policy responses has led to a growing ‘marketplace’ for global cooperation beyond the traditional confines of national policy making. In this context, the exchange of evidence-based policy, lessons sharing, and the transfer of

policies and programmes across diverse socio-political and administrative landscapes have gained currency. This knowledge transfer (further defined later) occurs within an evolving transnational policy arena – what [Stone \(2013\)](#) terms the ‘global agora’ – where new constellations of actor-networks have emerged. These networks disseminate knowledge and influence policy change across multiple jurisdictions. Illustrative of these dynamics are three global gender programmes co-funded by the European Union (EU) and implemented by the United Nations: The Global Programme to End Child Marriage; the Joint Programme to Eliminate Female Genital Mutilation; and the Global Programme to Address Gender-Biased Sex Selection. These initiatives exemplify the promise of global collective action in informing policy and curbing gender-discriminatory practices. However, the real-world impact of these programmes often grapples with the inherent challenges of cross-cultural and inter-policy workings, which may impede their capacity to achieve their goals. There remains a critical gap in our understanding of how knowledge is transferred within and across these programmes and to what extent it translates into actionable policy.

This chapter has two main objectives: on the one hand, it introduces Actor–Network Theory (ANT) – originally developed in Science and Technology Studies (STS) – as a novel framework for analysing knowledge transfer in global programmes. On the other hand, it examines knowledge transfer mechanisms in global gender programmes through three case studies, using an interdisciplinary mixed-methods approach. The chapter is organized as follows. First, it defines and characterizes global gender programmes and knowledge transfer, and reviews current understandings of transfers in these programmes, identifying key debates and gaps. This is followed by an introduction to ANT as an analytical tool to interrogate global governance and knowledge transfer processes. The empirical section then presents the three global gender programmes – on child marriage, female genital mutilation, and gender-biased sex selection – drawing on policy and programme file analysis, participant observations, and in-depth interviews with key stakeholders. The subsequent section maps the key actors and networks using social network analysis (SNA) and Twitter (now X) data, followed by an examination of designated knowledge transfer hubs and the barriers they encounter, based on key informant interviews. The chapter then moves to a comparative analysis of the three case studies, highlighting commonalities – such as shared actors, policy goals, and commitments to shifting social norms – while also addressing differences in scope, political leverage, and sustainability. The chapter concludes by synthesizing its theoretical and empirical findings, reflecting on their implications for the effectiveness of global gender programmes and the broader landscape of transnational policy making.

What are global (gender) programmes?

Definitions and evolution

Global gender programmes are multi-level, multi-sectoral initiatives led by UN agencies to advance gender equality, combat violence against women and girls, and improve reproductive, maternal, newborn, and child health. Funded by multilateral donors and implemented through partnerships with governments, NGOs, academia, faith-based groups, and the media, these programmes operate from global to local levels, playing a key role in producing and disseminating knowledge to counter gender inequalities and harmful practices.

Global programmes have been widely studied as collaborative entities that bring together diverse stakeholders – including international organizations, governments, civil society, and the private sector – to address complex, transnational challenges (Reinicke, Deng, and Witte, 2000; Stone, 2013, 2017; Alesani, 2019; Stone, 2020; Rahm, 2023). These initiatives have thus been framed as global public–private partnerships, engaging actors from multiple sectors to set agendas, mobilize resources, and mediate interests (Reinicke, Deng, and Witte, 2000; Witte, Reinicke, and Benner, 2005; Stone, 2013). Schäferhoff et al (2009, p 451) describe global programmes as a ‘hybrid form of governance, in which non-state actors co-govern alongside state actors for the provision of collective goods’, assuming governance roles traditionally reserved for sovereign states. Situated at the nexus of development aid and global public goods provision, these programmes recognize knowledge transfer as a critical asset (Kanbur, 2001). Rahm (2023, p 4) defines global programmes as ‘global development initiatives that utilize knowledge and policy transfer alongside multi-level, multi-stakeholder coordination to achieve a common goal’. These programmes share similarities with transnational advocacy networks (Keck and Sikkink, 1998) and transnational policy networks (Stone, 2017) in their capacity to pool expertise and resources across actors, sectors, and scales. However, what sets them apart is that they ‘operate within, not around, international organizations as the formal power holders with an explicitly global mandate’ (Rahm, 2023, p 2).

Global programmes emerged as a new model for international aid and development, responding to inefficiencies, impositions, and parallel implementation systems of traditional donor-driven assistance that were increasingly recognized by the end of the Cold War (Wessal and Wescott, 2019). In the 1980s and 1990s, global programmes first emerged in the field of health (Banati and Low-Beer, 2011), environmental protection (Anderson, 1987), and agriculture (Frison and Sharrock, 1997). They represented a novel finance instrument in development ‘outside the scope of competition for scarce funds by national governments’ (d’Orville and Najman, 1995, p 174),

even though funding gaps and competition persist (McHugh, 2023). One of the first global initiatives was WHO's Global Programme on AIDS (1987–95).

The launch of the Millennium Development Goals (MDGs) in 2000 introduced a more collaborative design and implementation approach involving diverse development partners. Principles of ownership, alignment, accountability, and broadened partnership were established to improve aid effectiveness. The World Bank became a powerful advocate for and sponsor of global programmes (Stone, 2013, 2017). The Bank recognized the challenge of financing global public goods, and spotted the potential of global programmes as 'initiatives whose benefits are intended to cut across more than one region of the world and in which the partners: reach explicit agreements on objectives; agree to establish a new (formal or informal) organization; generate new products or services; contribute dedicated resources to the program' (World Bank, 2004, p 2). These early global programmes tended to 'cohere around the international organizations' (Stone, 2013, p 42), operating through fluid and informal collaborations that gradually led to their institutionalization over time, such as through the establishment of advisory committees. Around the same time, transnational advocacy networks became increasingly active, particularly in 'value-laden debates' on human rights, women's rights, and infant health (Keck and Sikkink, 1999, p 91). Several global programmes emerged with support from UN entities, focusing on global challenges that disproportionately affect women and girls. Notable examples include the 1999 Global Programme against Trafficking in Human Beings (Aronowitz, 2002), the 2005 Global Programme on Reproductive Health Commodity Security (Nugent, Bloom, and Musunguzi, 2011) and the 2008 Joint Programme to Eliminate Female Genital Mutilation (Raufu, 2023). These newly emerging networks were becoming simultaneously more transnational and localized, a phenomenon coined as *glocalism* (Swyngedouw, 2004).

With the adoption of the Sustainable Development Goals (SDGs) in 2015, a shift towards the formalization of global programmes has taken place. Specifically, SDG 17 emphasizes partnerships for the goals, which has spurred more structured global partnerships across various development sectors. They are characterized by shared goals, risks, and benefits among various stakeholders (including governments, private sectors, NGOs, and international agencies). This new period is marked by global (gender) programmes that are not merely operating in the vicinity of international organizations but are increasingly managed by them. This transition is evident in the establishment of dedicated staffing within the United Nations headquarters and its regional, country, and sometimes local offices. These offices administer global programmes in close collaboration with implementing partners, reflecting an organizationally embedded approach. Examples – besides the three case studies explored here – include the United

Nations Office on Drugs and Crime (UNODC) Global Programme to End Violence Against Children, the United Nations Educational, Scientific and Cultural Organization (UNESCO) Global Action Programme on Education for Sustainable Development, or the Food and Agriculture Organization (FAO) Global Action Programme on Food Security and Nutrition in Small Island Developing States, all of which were launched in 2015 and demonstrate the evolution towards formal, structured global cooperation in addressing development challenges.

Characteristics and functions

Key features of global programmes can be summarized as followed:

Multi-stakeholder, multi-sectoral collaboration: Global programmes represent alliances of international organizations, governments, civil society, private sector, foundations, donors, and other actors (for example, academia, media, faith-based organizations, and youth leaders) active across different policy sectors, such as health, social affairs, and economy (Benner, Reinicke and Witte, 2004; Weiss and Wilkinson, 2014).

Multi-level operation: They operate at global, transnational, regional, national, and local levels, often with a focus on South–South and Triangular cooperation (De Renzio and Seifert, 2014; Haug, 2021).

Shared goals: Actors come together to jointly address transnational policy problems and advance shared objectives (Stone, 2013). These goals are often aligned with international agendas like the Sustainable Development Goals (Leal Filho et al, 2021).

Accountability and transparency: Global programmes commonly establish governance structures and mechanisms for accountability and transparency, even if this tends to be a weak spot (Wessal and Wescott, 2019). Results frameworks or similar tools are used to specify objectives, responsibilities, and outputs of the partnership (Wessal and Wescott, 2019; Rahm, 2019b). Accountability mechanisms also include regular reporting, independent evaluations, communication, and outreach.

Pooling of resources and funding: Global programmes leverage financial, technical, and operational resources from both the public and private sector (Alesani, 2019). This may include funding, technology transfer, expertise, and in-kind contributions. While efforts are made to increase co-financing from countries receiving support, global programmes continue to rely on donor support from international bodies (UN), regional entities (EU), and national governments (such as Norway or Canada) (Wessal and Wescott, 2019; Hösli, 2022).

Risk-sharing: Global programmes allow both donor and target countries ‘to reap “risk-sharing benefits” in the production of global public goods’

(Reinsberg, 2024, p 74). Risk sharing applies not only to financial and technical commitments but also leveraging potential backlashes from addressing culturally and politically sensitive issues.

Development and capacity building: Focus is placed on developing countries, both low-income and middle-income countries, and on strengthening capacity by transferring knowledge, skills, and technologies. Most activities are implemented at country levels in cooperation with multiple actors (Zuber et al, 2018).

Impact and scalability: Global programmes seek to impact a given phenomenon on global, regional, national, and local levels. Investments are made to identify solutions that can be scaled up or replicated in other contexts or regions (Begovic, Linn, and Vrbensky, 2017; UNICEF, 2020c), yet their impact remains poorly understood (Heymann et al, 2019), and scalability is often hindered by various barriers related to funding, monitoring and evaluation, policy and regulatory systems (Linn, 2023).

Knowledge and policy transfer: A core activity of global programmes is to provide and mediate platforms for transnational knowledge sharing, policy transfer, standard setting, and deliberations to inform decision-making (Stone, 2004). The programmes themselves can be understood as ‘mobile technologies’ (Ilcan and Phillips, 2008, p 711) facilitating the movement of diverse knowledge and policy instruments across time and space (Rahm, 2023). Knowledge transfer is used as a strategic tool to broaden the programmes’ reach and ‘scale up’ its initiatives.

Knowledge and transfer

Knowledge transfer refers to the process of transmitting knowledge – both explicit and tacit – between individuals, teams, or organizations (see also Box 3.1). It can be defined as ‘processes through which actors and organizational units exchange, receive, and are influenced by the experience and knowledge of others, and can manifest itself through changes in the knowledge bases and performance of recipients’ (Røvik, 2023, p 1). The concept is often used interchangeably with *knowledge sharing* or *knowledge exchange*, though there are subtle nuances. Tangaraja et al (2016) suggest that knowledge transfer is an umbrella concept, which can include knowledge sharing as a subset category of personalized uni-/or bidirectional knowledge exchanges. Meanwhile, knowledge exchange has been described as an interactive process between research users and producers to increase knowledge uptake (Mitton et al, 2007). Within global programmes, knowledge transfer plays a critical role in supporting decision-making and institutional learning. It also serves as a strategic tool for producing authority to influence the way policies are designed, implemented, and evaluated (Freeman and Sturdy, 2014, 2017).

In that way, it aligns with [Mitton et al \(2007, p 729\)](#), who see knowledge transfer as an effort ‘to increase the likelihood that research evidence will be used in policy and practice decisions’.

Box 3.1: What knowledge?

The [Collins English Dictionary \(2025\)](#) defines *knowledge* as:

1. the facts, feelings, or experiences known by a person or group of people
2. the state of knowing
3. awareness, consciousness, or familiarity gained by experience or learning
4. erudition or informed learning
5. specific information about a subject
6. sexual intercourse (obsolete except in the legal phrase carnal knowledge)

This definition includes both *tacit* knowledge, learned through individual or group experiences, which are difficult to formulate and communicate, as well as *explicit* knowledge on a given subject, that can be readily articulated, codified, and shared. The concept of knowledge also has an archaic meaning in biblical contexts, where to *know* referred to sexual intercourse and male penetration. The term *carnal knowledge* has persisted in legalese as a euphemism for sexual relations, including rape of minors in some jurisdictions ([Cornell Law School, 2022](#)).

This book understands knowledge ‘as an organizational resource of strategic significance’ ([Laihonen, Kork, and Sinervo, 2024, p 223](#)), which has become a core asset for international organizations in advancing their goals and mandates ([Böning, 2024](#)). Within the UN system, knowledge serves three core functions ([Svenson, 2016](#)):

1. Facilitating social and organizational learning, enabling institutions to adapt and evolve.
2. Establishing international norms and standards, shaping global governance frameworks.
3. Generating products and services, including reports, policies, and technical guidance.

Knowledge is used to advise member states, shape policies, and implement programmes. The ability to control knowledge is power ([Haas, 1997; Barnett and Finnemore, 1999](#)), underpinning the legitimacy and legitimization of international organizations ([Tallberg and Zürn, 2019](#)). As a core asset in global governance, knowledge facilitates coordinated international action, aligns strategies to tackle complex global challenges, and supports the provision of global public goods ([Kaul, 2016](#)).

While often perceived as objective and neutral, knowledge has also been weaponized to justify oppression. Claims of ‘superior knowledge’ have historically legitimized discrimination, exploitation, and violence – from colonial legal impositions on practices like infanticide and FGM, which provoked resistance (see [Chapter 2](#)), to Nazi ideology,

where assertions of ideological supremacy justified crimes against humanity. Carl Schmitt, a prominent legal theorist and Fascist, exemplified this logic in *The Nomos of the Earth*, arguing that superior education and knowledge confer the right to conquer and subjugate (Vadi, 2025). This twisted view underscores how knowledge, far from being neutral, can also serve power and oppression.

Knowledge transfer occurs through a variety of mechanisms, both formal and informal. Formal channels include structured interventions such as international conferences, workshops, training sessions, and seminars, as well as digital platforms for e-learning, webinars, and knowledge repositories. Global summits, such as the United Nations Climate Change Conferences (COP), the Commission on the Status of Women (CSW), and the SDG forums, actively facilitate the circulation of knowledge across borders. Informal mechanisms are equally important. Mentorship, peer learning, networking events, and communities of practice enable the transfer of insights that may not be explicitly documented but are essential for policy implementation. Documentation of best practices, case studies, and research reports further contributes to the consolidation of knowledge in global programmes. The (perceived) effectiveness of knowledge transfer not only depends on the mechanism of transfer, but also on several other factors, including the relevance of the knowledge, the absorptive capacity of the recipient, and the level of trust between the sender and recipient (Veeger and Westermann-Behaylo, 2022).

Despite its centrality, knowledge transfer within global programmes remains an underexplored area in policy scholarship. Seminal works by Reinicke, Witte, and Benner have recognized that global programmes serve as platforms for gathering and disseminating knowledge (Reinicke, Deng, and Witte, 2000; Benner, Reinicke, and Witte, 2004; Witte, Reinicke, and Benner, 2005). Some programmes even prioritize knowledge transfer as a core function, bringing together diverse forms of knowledge: ‘factual or scientific knowledge, knowledge about power, politics, and decision-making, knowledge about how different groups of actors view each other or how to bring about compromise on hotly contested issues’ (Reinicke, 2001, pp 43–4). Global programmes do not merely synthesize existing knowledge; they also generate new knowledge through consensus-building, with the intention to streamline efforts, reduce duplication, and leverage the comparative advantages of partnerships (Witte, Reinicke, and Benner, 2005).

Stone’s research has provided fundamental insights into the role of global programmes in transnational policy making. She offers a typology of transnational networks, positioning global programmes within the

broader landscape of knowledge actors (Stone, 2013). She also highlights the interplay between knowledge transfer, policy transfer, and policy translation, emphasizing how ‘global programs facilitate policy transfer and knowledge translation as a transnational policy process’ (Stone, 2017, p 97). However, this is not a linear but rather a messy process. A useful image may be the *lumpiness thesis* (Howlett et al, 2014) that can similarly be extended to knowledge transfer in global programmes, where differing supply and demand conditions within and across organizations naturally result in uneven distributions of knowledge tools, transfer techniques, and capacities among various governmental and non-governmental actors. According to Stone and colleagues, knowledge transfer in global programmes has evolved from earlier bilateral exchanges to ‘continuous, transnational, multi-scalar, and multi-stakeholder circulations’ (Stone, Porto de Oliveira, and Pal, 2020, p 4). Her work underscores the inherent power asymmetries of actors and ideas involved in the transfer process (Stone, 2017; Stone, Porto de Oliveira, and Pal, 2020). International organizations play a crucial role in this process, functioning as interlocutors that circulate ‘both knowledge and policy infrastructures not only between countries but also between global programs and other international organisations’ (Stone, 2017, p 4).

Other scholars have emphasized the idea of knowledge transfer as a networked process. For example, Finnemore (2014, p 223) argues that rather than a single ‘global governor’ dictating policy, governance emerges from interactions between multiple stakeholders, who compete, collaborate, negotiate power, and shape policy dynamics in diverse ways. This relational approach provides a nuanced understanding of how knowledge circulates within global programmes and the broader policy-making arena. Recent scholarship has further examined the relationship between transnational networks and norm diffusion. Jacqui True (2024, p 199) ‘theorizes the vital link between norm contestation and network globalization’, focusing on transnational feminist activism in peace and security governance. As ‘network bundles’ sustaining the Women, Peace, and Security (WPS) agenda – anchored in UN Security Council Resolution 1325 – these networks disrupt the traditionally male-dominated security governance arenas by contesting entrenched norms and driving the emergence of new ones. In doing so, they influence which global policies gain legitimacy and how gender perspectives are integrated into international governance frameworks.

Knowledge transfer in global programmes is contested. On the one hand, it can enable ‘bridges across boundaries’ becoming (under certain circumstances) a ‘vehicle that can help researchers influence policy, and help policy-makers use research effectively’ (Maxwell and Stone, 2004, pp 1, 15). On the other hand, it can foster bottom-up and top-down resistances, where local, grassroots knowledge and practices clash with the technocratic governance structures imposed by donor governments and international

organizations (Stone, 2020). Some scholars even speak of the ‘delusion of knowledge transfer’ drawing from specific case studies in South Africa and Tanzania, where shortcomings of development aid stem not merely from flawed implementation but from deeper, structural complexities in knowledge transfer within young democracies (Koch and Weingart, 2016).

Knowledge transfer is political. Littoz-Monnet’s research on international bureaucracies highlights how knowledge is mobilized not only to address global public challenges but also for political and strategic purposes (Littoz-Monnet, 2017). Evidence-based policy making, though widely accepted as a ‘best practice’, is often used to grant authority and legitimacy to international organizations while narrowing the range of acceptable policy options. In many cases, technocratic instruments and standardized approaches obscure the political implications of policy decisions, reinforcing dominant governance structures while sidelining alternative perspectives (Alawattage and Elshihry, 2017). This raises critical questions about who controls knowledge production and dissemination, whose knowledge is valued, and how different actors leverage knowledge to maintain or challenge power dynamics in global policy making, ever more so in the digital era.

The digital revolution has accelerated knowledge transfer across borders (Witte, Reinicke, and Benner, 2005), particularly with the rise of artificial intelligence and digital communication technologies. While these advancements offer new opportunities for real-time knowledge exchange and data-driven decision-making, they also introduce new challenges. The digital divide disproportionately affects the Global South, leading to disparities in access to information – particularly for women (Acilar and Sæbø, 2023). Unequal technological advancements further reinforce disparities in knowledge access and participation, raising concerns about inclusivity in global governance processes.

Despite various theoretical perspectives, existing frameworks only capture fragments of the knowledge transfer process (Young, Borland, and Coghill, 2010). ANT offers a promising alternative for analysing the inner workings of knowledge transfer within transnational policy interventions. By tracing the relationships between actors, institutions, technologies, and material artifacts, ANT provides a more dynamic and relational understanding of how knowledge circulates, transforms, and influences policy outcomes. The potential of ANT to rethink knowledge transfer in global programmes and its implications for global policy making will be explored further in subsequent sections.

Actor–network (in) theory: a new lens for knowledge transfer in global programmes

Understanding the dynamic forces of global programmes requires a framework that transcends conventional boundaries. ANT, rooted in STS,

offers such a lens. Developed by Bruno Latour, John Law, Michel Callon, and Madeleine Akrich, ANT challenges traditional sociological theories by rejecting rigid distinctions between human and non-human actors (Callon, 1984; Akrich, 1992; Law, 1992; Latour, 1996b, 1999, 2005; Akrich, Callon and Latour, 2006). Instead, it conceptualizes society as a network of constantly shifting associations, where agency is distributed across both human and material elements. As Shahzad and Gorur (2024, p 158) note, ANT ‘challenges basic assumptions about knowledge, subjectivity, and society’ and draws attention to the everyday practices that shape policies and institutional norms.

ANT emerged in response to post-structuralism and ethno-methodology, focusing on the interdependencies between science, technology, and society (Law, 2009). The term ‘actor–network’ highlights the inseparability of actors and the networks they constitute, forming what Latour (2005, p 9) calls a ‘sociology of associations’. Networks are heterogeneous, integrating not only individuals and institutions but also ideas, technologies, and funding. The formation of these networks is a transformation process in which all participating ‘actants’ – both human and non-human – are reshaped through their interactions (Peuker, 2010, p 325). ANT thus examines how networks evolve, how associations stabilize, and how connections dissolve (Bueger and Stockbruegger, 2018). Rather than a conventional theory, ANT serves an analytical approach that exposes the processes underlying the construction, maintenance, and disintegration of networks. Similar to feminist and decolonial critiques of ‘data-driven’ and ‘evidence-based’ policy frameworks – which often obscure systemic inequalities – ANT highlights those marginalized or even harmed by dominant policy conceptualizations (Shahzad and Gorur, 2024, p 158).

Since its inception, ANT has undergone three waves of development. The first, in the 1980s, centred on technology and innovation (Callon, 1984, 1986; Latour, 1987; Law, 1987), laying the groundwork for its expansion into anthropology, feminism, geography, and international development (Baiocchi, Graizbord, and Rodríguez-Muñiz, 2013). The second wave, shaped by Law’s (2004) *After Method* and Latour’s (2005) *Reassembling the Social*, disrupted binaries such as global versus local, advocating for an analysis of actor relations without assuming predefined structures. During this phase, ANT gained traction in International Relations (Büger and Gadinger, 2007). The third wave, starting in 2010, opened up to novel understandings of science and technology by approaching ANT through a feminist, gender, and violence lens (Lagesen, 2012; Quinlan, 2012; Moore and Singh, 2015). It also merged ANT with new materialism (Coole and Frost, 2010), emphasizing the role of materiality in shaping social phenomena. While new materialism has influenced policy studies (Bennett, 2010), sustainability sciences (Schlosberg and Craven, 2019), and global

governance (Leander, 2021), ANT has been largely overlooked by global policy scholars. This book aligns with Leander (2021), arguing that ANT's materialist perspective shifts governance analysis from static institutions to dynamic processes, offering a richer understanding of global governance as an evolving network of associations.

Latour's (2005) seminal work *Reassembling the Social* provides a useful starting point for examining how heterogeneous elements converge to shape global governance. He challenges the notion of the 'global' as a pre-existing structure. Rather than assuming a top-down dynamic where the global shapes the local, Latour urges scholars to investigate how the global itself is constructed and continuously produced through connections. To guide this inquiry, he proposes three key steps: localizing the global, redistributing the local, and connecting sites. These steps will serve as the foundation for the empirical analysis in subsequent chapters.

Localizing the global

Traditional sociological approaches assume that global structures – like globalization, capitalism, or patriarchy – exert power over local interactions. Latour (2005) rejects this top-down logic of societies being shaped through overarching, deterministic forces. Instead, he emphasizes that scholars should investigate how the global is constructed, or continuously assembled, through localized and networked interactions. Latour invites researchers to 'locate the places, the theaters, the stages where "globalization" is being painted over', suggesting that one will soon realize that 'in spite of so much 'globalonney', globalization circulates along minuscule rails resulting in some glorified form of provincialism' (Latour, 2005, p 190).

A few tools are needed from the ANT repertoire to *localize the global*. The first is anti-foundationalism. Anti-foundationalism is a philosophical standpoint that challenges the notion of absolute, unchanging foundations in knowledge. It rejects self-evident truths or beliefs that require no further justification or inference by other beliefs. Instead, anti-foundationalism is interested in how knowledge claims, beliefs, and practices rise and decline. It aligns with constructivist and social constructionist approaches, which view knowledge and realities as constructed through social processes. For ANT and STS scholars, the concept, however, goes beyond social constructionism. The world is made up of 'webs of relations' that create realities (Law, 2009, p 141). 'Facts and truth emerge because of complex associations between social, technical, natural, physical and economic elements' (Shahzad and Gorur, 2024, pp 158–9). It is the role of ANT scholars to 'look behind the scenes' at the relational forces at play in the construction or 'making of knowledge' (Shahzad and Gorur, 2024, p 159). For Latour, it is not that 'when things are true, they hold', but rather 'when things hold, they start becoming true' (Latour, 1987, p 12).

Anti-foundationalism has important implications for global governance: rather than operating from a singular foundation, global governance consists of fragmented and dynamic assemblages that are constantly renegotiated (Biermann et al, 2009; Acharya, 2016; Pouliot and Thérien, 2023). For example, Pouliot and Thérien (2023, p 44) speak of ‘protean patchworks of governance practices and competing universal value claims’. In this landscape, global programmes do not exist as monolithic entities but are continuously assembled, adapted, and contested across different locations. In the absence of foundational truths, the recognition of public challenges as ‘global problems’ – and the decision on which of these warrant intervention through ‘global programmes’ – remains a continuous process of negotiation. Various actors present their versions of what is ‘true’ based on their contextual understandings and interests. This makes global programmes a ‘battle’ field for contestations, where multiple viewpoints get harmonized through intentional knowledge transfer. Knowledge mobilization serves hence strategic functions ‘behind the scenes’ in the ‘making of’ global programmes, where knowledge bases do not contain any single truth but undergo constant negotiations and contestations.

The second analytical tool from the ANT repertoire considers human–non-human relations. ANT explores the intricate interactions between human beings and non-human entities, also coined as *actants*, in co-constructing the social world. According to Cudworth and Hobden (2018, p 237), ‘agency is not restricted to humans, (but) a whole range of actants exist in the world’. Shahzad and Gorur (2024, p 159) describe actors as ‘hybrid assemblages, dependent on the support of a whole network (or society) of humans and non-humans’. This perspective has ontological implications as it underscores that both human and non-human actors are interwoven through societal processes, creating composite actor–networks that mutually produce each other. The resulting power and agency emerge from these actor–network relationships: not a single actor alone has power, but actor–networks operating together. The task of researchers is to investigate who or what has power or agency in actor–network relationships and how that changes over time. The interaction between human and non-human elements has gained recognition in International Relations, especially in addressing challenges like climate change and ecological degradation. For instance, Castro Pereira and Saramago (2020) highlight the critical role these relationships play in understanding environmental impacts. In the context of global programmes, ANT provides a valuable framework for analysing the diverse actors in global programmes. They range from *institutions* such as International Organizations (IOs), governments, NGOs, and private companies to *individuals* like IO staff members, religious leaders, experts, and change agents, to *instruments* and *ideas* including financial and technical resources, data and statistics, policies and legislation, and digital technologies. The collective agency and power

dynamics of these actants determine the stability or instability of global programmes over time.

The third analytical tool is the concept of *translation*. In ANT, translation refers to the dynamic, ongoing process through which actors – both human and non-human – negotiate, modify, and align their interests to create and stabilize a network. Translation explains how particular viewpoints, technologies, or innovations gain traction, becoming dominant within a network of diverse actors (Latour, 2005). It is not merely about transferring information, but it involves active interpretation, persuasion, and adaptation to context. For Latour, ‘translation is first and foremost a ... “art of persuasion”, a skill developed to convince both humans and non-human to cocreate’ (Janicka, 2023, p 851). It describes how different elements are brought together to act as a whole. Callon (1984) conceptualizes translation as unfolding through four interconnected phases, each critical to understanding how actor-networks are assembled: (1) *problematization* is the stage where certain actors define a problem or issue, framing it in such a way that they position themselves as essential to its resolution; (2) *interessement* is the stage of aligning the interests and priorities of relevant actors (that is, governments, NGOs, donors, and communities) to recognize the issue and commit to the proposed solutions; (3) *enrolment* involves assigning roles of engagement and forming alliances; (4) *mobilization* ensures compliance and network stability by representing the interests of all enrolled actors – including those who may not have a voice. Together, these four phases reveal translation as a contingent process constructing temporary order out of dispersed entities.

With these designated tools to *localize the global*, we can go beyond treating global gender governance as a unified force. The task is rather to analyse the specific institutions and actor-networks that construct, sustain, or contest the very idea of ‘global’ gender programmes. Under this theme, we examine the role of knowledge in the construction of global programmes; namely, how knowledge is generated, processed, transferred, and contested in global programmes. In particular, we ask: how do global programmes come into existence? What knowledge is created and contested in bringing these programmes to life? How do human and non-humans interactions shape the very existence of these programmes? This empirical analysis unfolds under the section ‘Global gender programmes in practice’.

Redistributing the local

Just as Latour (2005) challenges the idea of the global as a static, overarching force, he also problematizes the notion of the ‘local’ as a self-contained and isolated space. Local interactions, he argues, are never purely local but are always embedded in broader networks that shape and sustain them. The conventional division between micro-level interactions and macro-level

structures – a long-standing dichotomy in sociology – is rejected by Latour, who suggests that such distinctions obscure the dynamic relationships between actors, institutions, and technologies. Rather than viewing the local as an independent unit of analysis, it should instead be understood as a site of multiple connections that extend beyond its immediate context. What appears to be a localized phenomenon is, in reality, a node in a broader network. The process of localizing the global, then, must be accompanied by an analysis of how the local is being produced and mediated through external influences. Latour (2005, p 192) asks, ‘How is the local itself being generated? This time it is not the global that is going to be localized, it is the local that has to be re-dispatched and redistributed’. The local, he suggests, takes shape through multiple, intersecting forces that extend beyond its immediate setting.

Additional concepts are needed from the ANT repertoire to *redistribute the local*, namely mediation, and attachment, which are key processes through which actors influence one another. *Mediation* in ANT refers to the process by which actors (both human and non-human) transform, modify, or reinterpret the meaning of something as it moves through a network. Mediation is distinct from intermediaries, which transfer objects without changing them. Instead, mediators actively shape and alter the process or message. Latour emphasizes the role of mediators: ‘we are now interested in mediators making other mediators do things’ (Latour, 2005, p 217). People, institutions, but also digital entries can serve as mediators through which temporary networks of relationships get expressed (Wei, 2024). Mediation is distinct from simple causality: ‘Making do is not the same thing as causing or doing; there exists at the heart of it a duplication, a dislocation, a translation that modifies at once the whole argument’ (Latour, 2005, p 217).

Attachment helps stabilize networks by binding actors together through emotions, interests, norms, or material elements. One may imagine attachment as *slime glue*. It helps ‘shape-shifting ... and temporary connections that make socio-technical configurations *stick*, vacillate, regroup and disassemble’ (De Laet, Driessen, and Vogel, 2021, pp 800–1, emphasis added). For Latour (2005, p 217), ‘the more attachments it has, the more it exists. And the more mediators there are, the better’. In this view, the stability of an actor–network is not based on intrinsic properties of its actors but rather on the multiplicity and density of attachments they maintain. The more an actor is connected – to policies, funding flows, data, legal frameworks, community engagement, individual commitments, and material resources – the more resilient and influential that actor or entity becomes. However, as the ‘slime glue’ metaphor suggests, attachments are not immutable. They can loosen, shift, or break under certain conditions – such as political changes, funding cuts, or ideological resistances – leading to the reconfiguration or even dissolution of the network.

What does that mean in terms of global gender programmes? We examine digital platforms, using Twitter (now X) as a microcosm of knowledge exchange.

We follow pertinent hashtags, key actors, and global gender programmes themselves as they come together during peak times of global mobilization. To paraphrase Latour, *we are now interested in those mediators (who tweet) making other mediators do things* (retweet and alter messages)? Who is connected to whom in the global campaign to end harmful practices? How is knowledge *transferred* and *translated* transnationally and within the technologically imposed character limit? What *attachments*, temporary connections, become apparent, and how do they shift over time? These aspects of the study will be explored in the section ‘Mapping actors involved in global gender programmes’.

Connecting sites

Once the global is no longer assumed to be an overarching structure and the local is recognized as a node in broader networks, the final step in Latour’s analytical framework is to trace the connections between different sites where actors interact and co-create meaning. Latour asks: ‘What happens when we practice the two gestures – localizing the global and distributing the local – together? Every time a connection has to be established, a new conduit has to be laid down and some new type of entity has to be transported through it’ (Latour, 2005, pp 219–20). Actor–networks emerge that maintain a more or less durable connection. According to Latour (2005) it becomes vital to investigate what *type of connections* enable transfer over great distances to shape the social. In *connecting sites*, we quite literally start by examining the sites of connection – specifically, the knowledge hubs created as ‘marketplaces’ to bring together different stakeholders involved in global gender programmes. What types of connectors are at play? How are these sites governed? How does their governance enable or hinder knowledge transfer? Global programmes have increasingly relied on digital platforms for knowledge transfer. Over the past decades, there has been a noticeable rise in so-called ‘knowledge hubs’, which serve as critical channels for generating, transferring, and mobilizing knowledge (see Box 3.2). UN agencies have actively promoted the creation of such hubs, yet little is known about their governance and functioning.

Box 3.2: Definition and functions of knowledge hubs

Knowledge hubs can be defined as meeting points of communities of knowledge and interest. They are characterized by high connectedness and high internal and external networking and knowledge sharing capabilities. They fulfil three major functions: (i) generate knowledge, (ii) transfer knowledge, and (iii) educate and train.

Source: Evers et al (2010, p 683)

As we examine these knowledge hubs, another core concept in the ANT repertoire becomes relevant: co-creation of knowledge. In ANT terms, co-creation involves non-specialists participating in knowledge production alongside scientists. One example is research on rare diseases, where patients and patient associations contribute to data collection, mobilize resources, and co-author scientific publications (Rabeharisoa and Callon, 2004). These groups are not passive recipients of scientific knowledge; they actively shape research agendas and influence the development of treatments. Co-creation as a means of mobilizing knowledge is well established in healthcare (Grindell et al, 2022). It has also gained traction in public policy and governance, where it enables the formation of arenas that bring together a wide range of public and private actors – including citizens – to engage in creative problem-solving processes (Ansell and Torfing, 2021). By fostering a more inclusive and participatory approach, co-creation integrates diverse forms of knowledge to address complex challenges. When policies and programmes are designed through co-creation, they are more likely to be adapted to local needs and conditions, potentially enhancing their effectiveness and sustainability – particularly in value-laden domains such as the eradication of harmful practices.

For ANT scholars, co-creation extends beyond participatory governance; it involves the co-production of knowledge by both human and non-human actors. A compelling example is Gorur and Dey's (2021) analysis of India's centralized digital platform, the Unified District Information System for Education (U-DISE). This platform gathers school data across India and depends on accurate data entry. The challenge was not to make U-DISE user-friendly but rather to 'make the user friendly' towards the platform by entering accurate data into the system (Gorur and Dey, 2021). Several steps were required to align the interests of diverse stakeholders: (1) creating awareness about the need of a centralized platform (problematization); (2) developing a sense of duty and pride to coproduce knowledge (interessement); (3) persuading actors in India's 1.5 million schools to upload information into the portal (enrolment); and (4) developing trust in the platforms transparency and accuracy (mobilization). This example illustrates how co-creation is closely linked to the earlier discussed concept of translation (Callon, 1984). In the case of U-DISE, these steps led to the adoption of a *centralized* digital solution, driven by concerns over mistrust in *localized* data systems (Gorur and Dey, 2021).

Co-creation, centralization, and localization will be key concepts revisited in the empirical analysis of knowledge hubs as essential 'connecting sites' in global programmes. These hubs represent intersections where technological infrastructures and human actors jointly facilitate – or hinder – the transfer

of knowledge across different scales. This aspect of the study will be further explored in the section ‘Knowledge transfer hubs and hindrances’.

The theoretical framework outlined previously will inform the following empirical analyses:

- **Global gender programmes in practice:** This section will explore case studies on child marriage, female genital mutilation/cutting (FGM/C), and gender-biased sex selection (GBSS) to examine the role of knowledge in how global programmes are constructed and contested.
- **Mapping actors involved in global gender programmes:** This section will analyse the various actors engaged in shaping global gender initiatives and how their interactions shift over time.
- **Knowledge transfer hubs and hindrances:** This section will investigate the governance and functioning of knowledge hubs, and identify the facilitators and barriers that influence the dissemination of knowledge into policy and practice.

Applying ANT as an analytical tool enables us to deconstruct the processes through which knowledge is transferred and transformed within global gender programmes. Following Latour’s three-step approach – localizing the global, redistributing the local, and connecting sites – this study illuminates the dynamic and contested nature of global gender governance, emphasizing the networks, mediations, and negotiations that underpin its construction.

Global gender programmes in practice: the case of child marriage, female genital mutilation, and gender-biased sex selection

This section examines the construction and operationalization of global gender programmes, focusing on three prominent cases: initiatives addressing child marriage, female genital mutilation, and gender-biased sex selection. Drawing on [Latour’s \(2005\)](#) approach of ‘localizing the global’, we explore how these programmes are built, negotiated, and enacted across diverse contexts. The section is divided into three parts. First, we offer a broad overview of the mandates and institutional roles of the United Nations Population Fund (UNFPA) and the United Nations Children’s Fund (UNICEF) in addressing harmful practices and a bird’s-eye view of the three global programmes. This overview is grounded in the analysis of policy documents and programme files, situating each initiative within the broader UN mandate of gender equality and human rights. Second, we unpack how knowledge is generated and legitimized in the creation of global programmes,

engaging with anti-foundationalist perspectives that challenge assumptions of universal truths. Drawing from participant observations, insider insights, and in-depth interviews, we reveal the fragmented, contingent processes through which knowledge travels, transforms, stabilizes, and dissolves. Third, we turn to the relational networks between human and non-human actors – such as policy instruments, numbers and indicators, funding – that co-constitute these programmes. We draw particularly on one of the three case studies, highlighting how human–non-human assemblages generate contestations for programme design and delivery, aligning with Latourian notions of agency distributed across networks.

UNICEF, UNFPA, and other global partners look back to several decades of programming to reduce harmful practices, gender inequality, and human rights violations against women and girls. UNICEF's mandate is to *uphold the rights of all children*, while UNFPA's mandate is to *ensure sexual and reproductive rights and choices for all*. Harmful practices sit at the cross-section of both agencies' missions, as they concern the rights of women and children and negatively impact their sexual and reproductive health and rights. Given the current momentum for greater coherence across the UN system, readers may question the relative absence of UN Women in the discussion of the three global programmes. Historically, UNFPA and UNICEF led work on harmful practices before UN Women's creation in 2010, resulting in institutional legacies that shaped mandates and division of labour. This path dependency of the two UN agencies – UNICEF and UNFPA – focusing on harmful practices will be further unpacked below. As for UN Women, rather than duplicating work and establishing parallel programme structures, the agency concentrated on normative leadership and knowledge generation, for example, through platforms such as the Gender Data Hub, the annual Gender Snapshot reports, interagency statements and meta-evaluations on the prevention of harmful practices. Yet, calls to reduce fragmentation and enhance coordination within the UN system have become pronounced with the UN80 Initiative.

UNICEF, established in 1953, operates globally to advocate for the protection of children's rights. Working in over 190 countries and territories, UNICEF's decentralized structure includes headquarters in New York, with key functions dispersed across Geneva, Brussels, Tokyo, Seoul, Budapest, Copenhagen, as well as Florence, where the Global Office of Research and Strategic Foresight is located. UNICEF also maintains seven regional offices and over 180 country offices worldwide. The agency is financed through voluntary contributions from governments, intergovernmental organizations, foundations, the private sector, and individuals. It reports to the UN General Assembly and is committed to advancing the rights articulated in the Convention on the Rights of the Child. UNICEF's Strategic Plan (2022–2025) emphasizes the protection of all children, guided

by its core commitments to children in humanitarian settings. Goal Area 3 specifically targets the elimination of harmful practices, recognizing child marriage and female genital mutilation as human rights violations. The plan underscores the need to increase knowledge and shift attitudes for the elimination of harmful practices (UNICEF, 2022). Moreover, UNICEF plays a critical role as custodian of key SDG indicators related to harmful practices, responsible for the collection, curation, and dissemination of data essential to monitoring progress.

UNFPA, established as a trust fund in 1967 and operational since 1969, plays a leading role within the United Nations system in addressing population and development issues, with an emphasis on gender equality and sexual and reproductive health and rights (SRHR). Like UNICEF, UNFPA is funded through voluntary contributions from governmental, non-governmental, and private actors. What sets the two agencies apart is that UNFPA's focus on SRHR is arguably more politically charged than the child rights agenda, which makes UNFPA particularly vulnerable to funding fluctuations, especially in response to political shifts in key donor countries. One example of this vulnerability is the impact of the US Global Gag Rule (Rodgers, 2018). During conservative US administrations, UNFPA loses millions of dollars in funds as American aid is cut for agencies that provide information on abortion. UNFPA is a subsidiary organ of the UN General Assembly and reports to the UNDP/UNFPA Executive Board. UNFPA headquarters are located in New York, with critical functions distributed to Geneva (humanitarian coordination) and Copenhagen (supply chain operations). Its operations expand over six regional offices, eight representational offices, three subregional offices, and 121 country and territory offices. UNFPA's Strategic Plan (2022–2025) articulates the commitment to 'Acceleration, Transformation, and Reaching the Furthest Behind', focusing on achieving three transformative results by 2030: ending the unmet need for family planning, ending preventable maternal deaths, and ending gender-based violence and harmful practices (UNFPA, 2022). Harmful practices are thus core to UNFPA's agenda, recognized as significant barriers to the realization of SRHR and broader gender equality goals. With the current UN restructuring, UNFPA is likely to be merged with UN Women.

The intersection of UNICEF's focus on child rights and UNFPA's emphasis on sexual and reproductive health forms the backbone of their interagency joint programming. Recognizing harmful practices as violations of both child rights and sexual and reproductive rights, the two agencies collaborate closely on the design, implementation, and scale-up of interventions. Their joint efforts encompass advocacy, policy reform, community engagement, and the production of tools and knowledge on social norms and behaviour change. A cornerstone of this collaboration is the UNFPA–UNICEF Joint

Programme to Eliminate Female Genital Mutilation (FGM), launched in 2008 – the largest global initiative to eradicate FGM. Active in 18 countries across Africa, the Middle East, and more recently Asia, the Joint Programme leverages the complementary strengths of both agencies while generating evidence to guide its strategies. Implemented in partnership with governments, grassroots organizations, and key stakeholders, it seeks to end FGM by 2030 through coordinated, multisectoral action at community, national, regional, and global levels. Its approach combines shifting social norms with strengthening national response systems. Building on over a decade of experience, Phase IV (2022–2030) places particular emphasis on global movement-building, prioritizing women- and youth-led organizations as drivers of change (UNFPA, 2024).

By design, such programming requires extensive transnational and interagency knowledge transfer and translation. The Joint Programme not only shaped global efforts to eliminate FGM but also served as a blueprint for two subsequent initiatives: the Global Programme to End Child Marriage and the Global Programme to Address Gender-Biased Sex Selection, both launched in 2016. As one senior management official at UNFPA Headquarters noted, ‘There’s a lot of adoption by the other programmes. Even the Child Marriage Programme, when it was starting, it was really a copy and paste of the FGM Programme’ (IN24). These programmes share the overarching goal of eliminating harmful practices against women and girls, in line with Sustainable Development Goal (SDG) target 5.3. They are implemented by the same UN agencies. They share similar organizational structures, common donor support – most notably from the European Union and Norway – and comparable stakeholder arrangements. Each programme operates within a collaborative framework involving governments, non-governmental organizations, academia, communities, and other development partners, with targeted interventions across large parts of the Global South. However, despite these similarities, several notable differences emerge. First, the programmes vary significantly in scale. Both child marriage and female genital mutilation have attracted greater international attention and sustained funding compared to gender-biased sex selection (Rahm and Kostenzer, 2018). Second, the Global Programme to Address Gender-Biased Sex Selection is solely managed by UNFPA, in contrast to the FGM and Child Marriage Programmes, which are jointly administered by UNFPA and UNICEF. Within these jointly managed initiatives, UNFPA takes the lead on the FGM Programme, while UNICEF leads efforts on the Child Marriage Programme. Third, while efforts to eliminate FGM and child marriage have been expanded and intensified in alignment with global commitments to end harmful practices by 2030, the GBSS Programme was discontinued in 2023. Table 3.1 provides a comparative overview of the three programmes, summarizing their goals, relevant SDG targets and

Table 3.1: Three global gender programmes at a glance

Name	Global Programme to End Child Marriage (CM)	Joint Programme to Eliminate Female Genital Mutilation (FGM)	Global Programme to Address Gender-Biased Sex Selection (GBSS)
Goal	To contribute significantly to the realization of SDG target 5.3, directly in the 12 global programme countries and indirectly in other countries influenced by the global programme methodology, technical resources, data, evidence and knowledge.	To contribute to ending FGM by 2030 through accelerated collective and multi-sectoral action by mobilizing a broad spectrum of actors at community, national, regional and global levels.	To contribute to strengthening evidence-based national policies and programmes in addressing son preference and gender inequality resulting in gender-biased sex selection in countries of prevalence in Asia and the Caucasus, including activities that foster South–South collaboration and shared learning across nations.
SDG target and indicators	SDG 5.3. Indicator 1. Proportion of women aged 20–24 years who were married or in a union before age 15 and 18.	SDG 5.3. Indicator 2. Proportion of girls and women aged 15–49 years who have undergone female genital mutilation/cutting, by age.	SDG 5.3. no standalone indicator. Indicators used by programme: sex ratio at birth and child sex ratios (number of males per 100 females born/aged 0–5).
Lead agencies	UNFPA–UNICEF	UNFPA–UNICEF	UNFPA
Inception	2016	2008	2016
Phases and funds in million dollars	Phase I: 2016–2019 (84 million) Phase II: 2020–2023 (127 million) Phase III: 2024–2030 (170 million)	Phase I: 2008–2013 (36 million) Phase II: 2014–2017 (60 million) Phase III: 2018–2021 (77 million) Phase IV: 2022–2030 (335 million)	Phase I: 2016–2019 (2 million) Phase II: 2020–2023 (5.2 million) (Phase III: 2023–2025 (7.2 million envisioned, but discontinued)
Donors	EU, Norway, Belgium, Canada, Italy, Netherlands, UK, USA, Zonta International	EU, Norway, Belgium, Canada, France, Germany, Iceland, Italy, Luxembourg, Spain, Sweden, UK, USA, Novo Nordisk Foundation	EU, Norway

(continued)

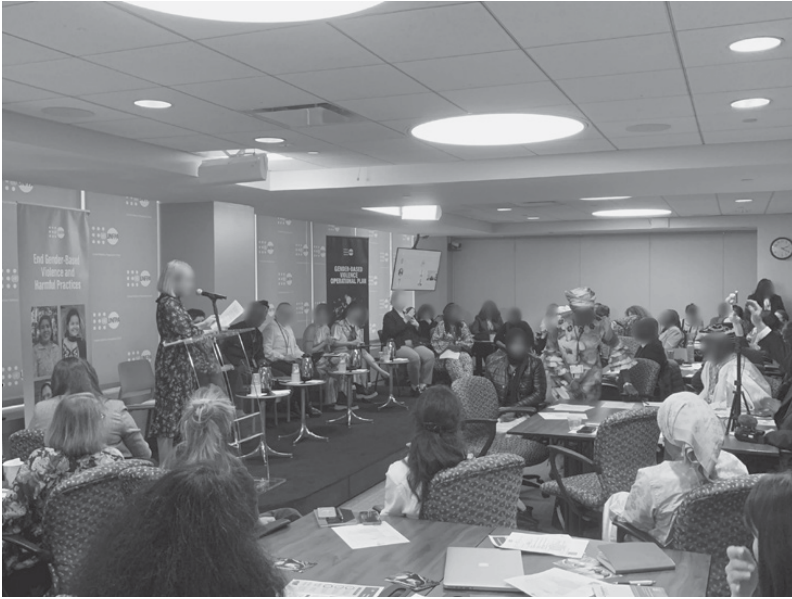
Table 3.1: Three global gender programmes at a glance (continued)

Name	Global Programme to End Child Marriage (CM)	Joint Programme to Eliminate Female Genital Mutilation (FGM)	Global Programme to Address Gender-Biased Sex Selection (GBSS)
Target regions	Africa, Middle East, South Asia	Africa, Middle East, Asia	Asia and the Caucasus region
Target countries	Bangladesh, Burkina Faso, Ethiopia, Ghana, India, Mozambique, Nepal, Niger, Sierra Leone, Uganda, Yemen and Zambia	Burkina Faso, Djibouti, Egypt, Eritrea, Ethiopia, The Gambia, Guinea, Guinea-Bissau, Indonesia, Kenya, Mali, Mauritania, Nigeria, Senegal, Sudan, Somalia, Uganda and Yemen. Tanzania for knowledge sharing	Armenia, Azerbaijan, Georgia, Nepal, Bangladesh, Vietnam. India and China provide knowledge and technical expertise.
Global influence	17 additional countries in Asia, Africa, Europe, Middle East, and Latin America	32 additional countries in Asia, Africa, and Latin America	18 additional countries in Europe, Africa and Central Asia
Key partners	Regional political structures, GOV, NGO, academia, communities and development partners.	Regional political structures, GOV, NGOs, academia, communities and development partners.	GOV, NGOs, academia, service providers, and communities.

Source: Author's compilation based on programme files

indicators, lead agencies, inception years, funding phases, donor structures, target regions and countries, and key implementing partners.

As [Latour \(2005\)](#) reminds us, the global is always localized – it is produced, negotiated, and sustained in concrete places where actors, ideas, and resources converge. Things do not materialize in abstraction; they take shape in specific offices, meeting rooms, and institutions. The images from the Orange Room at UNFPA Headquarters and the Danny Kaye Visitor Center at UNICEF House illustrate these localized production sites (see [Figures 3.1](#) and [3.2](#)). It is in these spaces – during events like the Commission on the Status of Women (CSW) – that the diverse partners of global gender programmes gather: to reiterate global commitments, enrol new donors, exchange knowledge and lessons learned, and discuss emerging problems and possible solutions. These meeting points, though seemingly mundane, are important sites where policy frameworks are shaped, alliances are formed, and the

Figure 3.1: Orange Café, UNFPA HQ, New York, 15 March 2024

global gets localized. CSW in March, held annually in New York, is one such localized node. Each year, CSW attracts thousands of women's rights advocates from around the world, making it a strategic site for advocacy, networking, and knowledge transfer. Yet, it remains curiously provincial. Amid the hustle and constant motion of New York City, the buzz of CSW is easily absorbed and rendered invisible to the broader public. In 2024, I was invited by the Global Programme to End Child Marriage to attend the launch of its third phase during CSW. During my stay, I asked taxi drivers, hotel receptionists, and museum visitors whether they had heard of CSW or of global programmes like the Joint Programme to Eliminate FGM or the Global Programme to End Child Marriage. Uniformly, the answer was no. This paradox highlights the observation that 'globalization circulates along minuscule rails resulting in some glorified form of provincialism' (Latour, 2005, p 190). What appears global and influential from within these concentrated networks is often imperceptible outside them – a reminder that transnational policies are enacted, contested, and contained within specific, localized settings (see Figures 3.1 and 3.2).

Anti-foundationalism and the 'making of' global gender programmes

Harmful practices are often framed as regionally or culturally specific phenomena. How do they become global issues that require coordinated

Figure 3.2: Danny Kaye Visitor Center, UNICEF House, New York, 14 March 2024



Source: Author's photos

international responses? And what forms of knowledge are created, contested, and mobilized in the process? This section addresses these questions through the lens of anti-foundationalism, which challenges the notion of universal truths. From this perspective, knowledge is contingent, socially constructed, and continuously negotiated among diverse actors. Drawing on empirical data, particularly in-depth interviews with key informants, we examine how global gender programmes come into existence and gain legitimacy. The analysis focuses closely on one particular interview conducted with the former Chief of the Gender and Human Rights Branch at UNFPA Headquarters – a pivotal figure responsible for overseeing all three global programmes and founding two of them.

Described by other interviewees as the ‘mastermind’ behind the scenes (IN06), this individual played a decisive role in shaping these programmes. ‘He was key. If he hadn’t been there, it would not have happened ... He was very much the person who drove this programme forward and secured funding,’ remarked a former UNFPA colleague (IN06). Referring to himself, he humbly noted: ‘I would say, I am the founder, if you allow me to say’ (IN08). He identified and seized a strategic window of opportunity: ‘At that time, we [UNFPA together with UNICEF] were running the FGM Programme. We were also starting the Child Marriage Programme. To

me, there was a great opportunity’ (IN08). It was his ‘understanding’ – a conviction shaped by both experience and evidence – that these global programmes were urgently needed: ‘If you look at the three main harmful practices around the world, my understanding is that these [child marriage, FGM] including gender-biased sex selection, are the most important harmful practices in terms of the number of women or girls affected, and the impact of these practices’ (IN08).

Critically, he underscored the role of knowledge transfer in transforming these issues from localized concerns into global priorities: ‘One of the main ways we were able to push for this [gender-biased sex selection] to become a global programme was precisely the use of research, data, knowledge sharing’ (IN08). For him, knowledge transfer was not a one-off event but a continuous, strategic process throughout every phase of programme development – from defining the problem and identifying solutions to enrolling stakeholders and sustaining momentum. This dynamic process aligns closely with [Callon’s \(1984\)](#) four stages of translation: problematization, interessement, enrolment, and mobilization. In the following sections, we unpack each stage, showing how knowledge production and transfer underpin the making of global gender programmes.

Problematization: framing global problems and breaking taboos

The initial stage in the making of global gender programmes involves defining harmful practices as global problems. Central to this process is the deliberate breaking of cultural and political ‘taboos’ (IN05, IN08, IN32), as these issues are often under-prioritized or left unaddressed in political discourse. As the former UNFPA Chief of the Gender and Human Rights Branch emphasized: ‘Knowledge production and transfer are key pillars of these programmes, particularly because these are taboo issues ... These issues are normally under the radar. They are not considered to be a priority for governments’ (IN08). Knowledge production, specifically through data collection and analysis, became instrumental in shedding light on these issues and framing them as deserving of global attention. This was particularly evident in the case of the Global Programme to Address Gender-Biased Sex Selection (GBSS), which faced considerable resistance. Reflecting on this process, the interviewee continues:

As part of our work at UNFPA, we were particularly involved with the Asia Pacific region, and the Eastern Europe and Central Asia region. We were working with specific country offices, mainly those affected by the practice [sex selection], where it had been included in their country programmes. We started collective thinking to develop a global programme that could address the issue from a global perspective,

because there was still the perception that it was a regional issue – primarily an Asia Pacific issue, with some countries in the Caucasus where sex selection had also become prevalent. But there was not the feeling that it was a global issue that warranted global action. My understanding, on the contrary, was that while the practice had originated mainly in China and India, we had witnessed a progressive evolution and extension of the practice to many other countries – Vietnam, Bangladesh, Pakistan, and the Caucasus. We also collected information showing that even some Eastern European countries were affected – Albania, Montenegro, Kosovo, among others. That was the way to shape the programme as a global trend. Otherwise, at the beginning, it was quite challenging ... At UNFPA Headquarters, colleagues were somehow reluctant at different levels – managerial, political, resource mobilization – about the relevance of placing this issue at the global level, mobilizing funds, and developing a global programme. (IN08)

This quote illustrates how data collection and knowledge dissemination were used to problematize sex selection ‘as a global trend’ (IN08). Several key UNFPA reports from this period documented the prevalence of son preference, sex selection, and skewed sex ratios across Asia, the Caucasus, and Eastern Europe (UNFPA EECARO, 2015). Country-specific studies were conducted by UNFPA in Nepal (2007), China (2010), Vietnam (2012), India (2014), Armenia (2013), Azerbaijan (2014), Georgia (2015), Albania (2012), and Kosovo (2016). Together, they painted a larger picture of what the interviewee described as a ‘progressive evolution and extension of the practice’ (IN08). While many policy makers continued to view the issue as a regional concern, UNFPA leadership sought to reframe it as a global phenomenon requiring coordinated, international intervention.

Around the same time, during my research stint at UNFPA Armenia, I contributed to this framing by preparing a report titled *International Best Practices for the Prevention of Prenatal Sex Selection: Recommendations for Action for Armenia* (Rahm, 2012). Armenia had just started investigating sex selection in collaboration with Christophe Z. Guilmoto, a leading demographer, who had already worked extensively with other UNFPA country offices on the issue. UN agencies had issued a Joint Interagency Statement to Prevent Sex Selection (WHO, 2011). The European Union began pressuring for legal reforms (Stump, 2011; Papadopoulou, 2013), and the World Bank entered into the debate on ‘missing women’ in the Caucasus (Das Gupta, 2015). A growing number of actors at multiple levels – UN agencies, academic experts, donors, and multilateral organizations – were beginning to recognize sex selection as an emerging transnational problem.

However, significant resistance persisted within key institutions, including UNFPA itself.

A similar struggle unfolded in the case of female genital mutilation. Despite the UNFPA–UNICEF Joint Programme to Eliminate Female Genital Mutilation running since 2008, there was strong opposition to recognizing FGM as a global issue during the negotiations for the SDGs. As recalled by the former UNFPA Chief of the Gender and Human Rights Branch:

I was at Headquarters. I was in charge at the technical level for UNFPA – with UN Women – on the development of Goal 5 (SDG 5). When it came to SDG 5.3, we encountered strong opposition *even* for FGM. FGM was a very big battle to get into the SDGs because many countries argued, ‘No, this is not a global trend. This is a regional trend, particularly for African countries’. They suggested regionalizing it instead, adding it at the regional level. We had to make a strong advocacy effort. Fortunately, we had also conducted research on FGM outside Africa – such as in Colombia, Indonesia, and within diaspora communities in Europe, Australia, the US, and Canada – to showcase that was a real global trend. It was a *big* issue. We had to come up with all the data and evidence to finally convince Member States, at different levels, that it was a global concern. For the sex selection issue, let me explain – we didn’t even try. Why? Because, at that point, we were just able to promote the issue internally at UNFPA and were not prepared to push for it globally. (IN08)

The interview highlights that within the UN system, there was only marginal consensus on including female genital mutilation in the SDG framework, let alone gender-biased sex selection. UNFPA (and other actors) fought persistently to have FGM recognized as a standalone target in the 2030 Agenda, with specific indicators for monitoring. Ultimately, FGM was included under target 5.3, but no similar push was made for sex selection, reflecting the limited political support and fragile alliances available at the time. The reluctance to recognize sex selection as a global issue in the SDGs also became apparent elsewhere. During the broader consultations on SDG indicators in 2013–14, academics were invited to propose indicators and provide input as part of the *Public Consultation on the Data Revolution for Sustainable Development* launched by the Sustainable Development Solutions Network. At that time, I was conducting my PhD in France and convinced my supervisor, C.Z. Guilmoto, to submit a recommendation to include a global indicator on missing women – as a stark manifestation of discrimination against women (see [Box 3.3](#)). The indicator was never included in the final SDG framework.

Box 3.3: Response to 'Public Consultation on the Data Revolution for Sustainable Development' launched by the Sustainable Development Solutions Network, 12 October 2014

Your Consultation Submission:

Dear all, I can't help feeling frustrated at the list of proposed gender indicators in which I find nothing on Amartya Sen's missing women. I have already estimated for a UNFPA report (the number of) missing women to be more 110 millions, with millions of girls missing because of prenatal sex selection. <http://www.unfpa.org/public/home/publications/pid/12405>

I am now refining these calculations, but numbers remain roughly the same. I can't find any more telling indicator of gender inequity than the number of women who can't be born or who die earlier than they should. Here is a very simple selection of indicators: 1) women missing from excess mortality; 2) girls missing from not being allowed to be born; 3) total missing women. So let these women be counted! Even more so if they are missing.

Best regards

C.Z. Guilmoto

Organization: CEPED

Country: France

Responding on behalf of Your Organization?: No

Source: Personal communication with CZ Guilmoto, 12 October 2014, reproduced with permission

These cases illustrate important insights from the anti-foundationalist perspective: what serves as truth or global knowledge is not self-evident but the outcome of strategic efforts, research, advocacy, negotiation, and contestation. Some 'battles' were won – such as securing funding for three global programmes and integrating FGM and child marriage into the SDGs. Others, like the inclusion of an indicator on missing women, were lost. Yet, crucially, the process of problematizing, breaking the taboo, and reframing harmful practices from localized phenomena to global priorities to be addressed through collective action had begun. Multiple actors, data sources, and advocacy coalitions contributed to this reframing, setting the stage for the next phases: identifying solutions and enrolling actors in the making of global gender programmes.

Interessement: identifying solutions and best practices

Once harmful practices were successfully framed as global problems, the next stage of the translation process – interessement – focused on offering viable

solutions and aligning stakeholders' interests around them. Problematization had opened the door, but as the former Chief of the Gender and Human Rights Branch at UNFPA emphasized, the critical follow-up question was always: 'Okay, we can agree there is a problem. But what are the good practices? Which country has been able to eradicate this?' (IN08). This shift signals the transition from problem definition to solution identification. Once recognition of a harmful practice is secured, attention inevitably turns to how to address it – through strategies, interventions, and models that can demonstrate effectiveness and gain broad support. In this stage, 'best practices' play a critical role. For UNFPA and its partners, producing and disseminating knowledge on 'what works' became central to generating interest among relevant stakeholders.

The former Chief of the Gender and Human Rights Branch explained: 'It was very important to conduct research to identify good practices, and to use those good practices in terms of advocacy and programme purposes. It was a very important entry point [for the GBSS Programme]. The same applies to FGM or child marriage' (IN08). This use of evidence to align interests was echoed by field-level practitioners. A Project Officer at the Harmful Practice Unit at UNFPA Nepal, involved in the Child Marriage and GBSS Programmes, emphasized: 'For advocacy, what works is knowledge, data ... if we're talking, it's because we have facts ready' (IN12). The interviewee further stressed that producing and sharing evidence is not just a technical exercise but a strategic tool to foster acceptance:

If you look at our work plan, a major part of the work has gone on evidence generation, and it's only after a lot of evidence, based on data, opinions, social structures, and interviews, that a certain acceptance to the subject matter came in. Then we move to the strategy and policies. (IN12)

However, as multiple interviews reveal, this process is rarely straightforward. Generating 'acceptance' around sensitive, often controversial issues such as sex selection or FGM involves overcoming resistance and managing contestation. A UNFPA representative from Azerbaijan highlighted the political sensitivities involved: 'There are conflicts. Sometimes you point out findings that the country is not willing to recognize or endorse. As soon as you endorse the findings, that will obligate you to commit to a solution' (IN07). It is noteworthy that the UNFPA Azerbaijan Country Office has been closed in 2025 after 30 years of operation. Recognition of the problem, therefore, is only the first step; the endorsement of viable solutions – and the willingness to act – requires careful negotiation. The same informant continued:

What we try to do is to be as evidence-driven as we can. We are showing that there is a problem. The global programme is trying to

showcase the consequences of son preference and GBSS. They are beyond just the demographic impact. There are also huge human rights implications. Countries who signed up for the 2030 Agenda should be committed. (IN07)

Concrete examples of how best practices were used to persuade actors were provided. For instance, UNFPA commissioned a case study on South Korea – one of the first countries to successfully reverse skewed sex ratios. This case study became a key advocacy tool, providing a tangible example of how the issue could be addressed and eventually eradicated. Similarly, in the case of child marriage and FGM, large-scale data collection efforts, through the Demographic and Health Surveys (DHS) and the Multiple Indicator Cluster Surveys (MICS) and country-level research studies, were strategically used to support advocacy efforts. As the former UNFPA Chief recalled: ‘All the work done in terms of data collection, through the MICS, the big surveys at the country level – all the research studies we supported in terms of the changes in the practices and in perceptions – were a very important pillar for advocacy and programmatic purposes’ (IN08). The production of knowledge products was also highlighted by a representative of the Joint Programme to Eliminate FGM: ‘We are producing a lot of knowledge products at the international, regional, and country levels. Also, we have data fellows at the country level ... We are using all the channels to disseminate this knowledge and generate best practices’ (IN11).

Many interviewees were enthusiastic about ‘best practices’, while others offered more nuanced reflections. One key informant, who provides technical research support to both the Joint Programme to Eliminate FGM and the Global Programme to End Child Marriage, argued:

There needs to be a utilization of best practices in a systematic way, and that’s how evidence can be the catalyst. When you’re applying evidence on what works to end child marriage and FGM at every level – individual, community, societal, policy – that’s the way forward. I’m always a huge champion for best practices. (IN31)

Others recognized that the politics of international organizations often complicate this ideal. The former UNFPA Chief of the Gender and Human Rights Branch openly acknowledged the challenges of producing an unbiased, comprehensive analysis of best practices:

It’s very tricky, because, as UN agencies and as intergovernmental entities, I found it very difficult to say the truth or all the truth about best practices. We were always trying to please everybody somehow – the different Member States, the different countries – so they didn’t feel

shame about their performance when it comes to the abandonment of harmful practices. To me, probably a major gap is a real neutral, independent analysis of best practices. (IN08)

This strategic balancing act reflects the anti-foundationalist nature of knowledge production in global governance: knowledge is not objective or universally accepted but is shaped by negotiations, power dynamics, and the need to accommodate diverse, sometimes conflicting, interests. Certain sensitive issues – referred to by interviewees as ‘hot potatoes’ – remain off-limits, highlighting the limits of global discourse and the tacit boundaries of what can be openly discussed. As one informant observed: ‘However global we try to be, there are also global issues that we cannot discuss, we are not going to question this. That is a limitation, of course, of scientific knowledge, but also of programming, and imagination’ (IN03). Taken together, these insights reinforce the centrality of *interesement* in the making of global gender programmes. Identifying solutions and best practices is not merely a technical exercise; it is a strategic, relational process aimed at securing commitment and aligning interests across diverse actors. It also underscores that knowledge, far from being neutral, is deeply entangled in the political dynamics of global governance. In the next section, we examine how these diverse interests become aligned and how partnerships are formalized through the process of enrolment.

Enrolment: bringing stakeholders on board

Following the recognition of harmful practices as global problems and the identification of viable solutions, including the need for coordinated transnational programming, the next step in the translation process involves enrolment: a process of persuading and securing the participation of key stakeholders. This stage requires more than just problem awareness. It demands deliberate efforts to convince actors to formally align themselves with the goals of the global programmes and take on specific roles within the network.

As the former Chief of the Gender and Human Rights Branch at UNFPA explained, enrolling actors was not without challenges, particularly in the case of the Global Programme to Address Gender-Biased Sex Selection. Reflecting on the early stages, he noted: ‘Colleagues were somehow reluctant ... about placing this issue (sex selection) at the global level, mobilizing funds, and developing a global programme’ (IN08). Interestingly, the resistance came primarily from within UNFPA itself, rather than from country offices or regional partners. He elaborated:

Not so much at the regional level or at the country level, because for them it was good that we could take this issue at the global level.

They were very supportive in that sense. In New York, colleagues at all levels – managerial, resource mobilization, technical, communications – were not so convinced. For some, this was an issue that didn't deserve global attention, while for others, this was such a sensitive issue ... that it could backfire on us if we place it or expose it at a global level. For different reasons, I encountered a sort of overall resistance, I would say, at headquarters. (IN08)

Overcoming this resistance required what Latour (2005) describes as the *art of persuasion*. Knowledge transfer played a crucial role in this regard: 'It was through this knowledge sharing that we were able to convince colleagues at the global level, at the communications level, at the management level, but also at different levels, including the national partners' (IN08). The ease – or difficulty – of enrolment varied across the three global programmes according to the informant:

When it comes to child marriage and FGM, first of all, you have a much stronger research agenda for many years. You have stronger research centres, which have produced a lot of knowledge. You have much stronger NGOs moving forward in terms of advocating for the elimination of both practices. The partner's platform was much larger. In the case of sex selection, it was extremely difficult to find the researchers. We had identified very few researchers in this area. The same when it comes to research centres. The same when it comes to NGOs. We had to build from scratch the whole thing, while in the case of child marriage and FGM it was completely different. There you had much stronger movement at all levels. (IN08)

This comparison underscores how enrolment was facilitated in cases where robust networks of researchers, NGOs, and advocacy groups already existed, as was the case for FGM and child marriage. In contrast, the case of gender-biased sex selection required building partnerships and alliances from the ground up, making the enrolment process more labour-intensive and contingent on convincing new actors to come on board. For example, it took the Global Programme to Address Gender-Biased Sex Selection two years to enrol a partner organization to serve as the 'interregional mechanism', whose 'role was to create the bridges between the countries, and to create the knowledge sharing methodologies' (IN02). Nevertheless, the process of stakeholder enrolment was intentionally collective: 'We started a collective thinking to develop a global programme that could address the issue from a global perspective ... As part of the different meetings and exchanges we had, we identified the different needs in terms of producing knowledge' (IN08). This collaborative approach was formalized through multi-stakeholder

consultations: ‘The knowledge or selection in terms of what we should produce at the global level was also the result of this consultation effort at different levels, which included, of course, national partners, sometimes universities or academic centres, NGOs, country offices, regional offices, reporters, and others’ (IN08).

Another key informant who worked across all three programmes, first at UNFPA Headquarters and later at regional levels, provided further insights into the different actors that get enrolled:

Donors, absolutely. I would also argue – thinking of child marriage and FGM – Member States. This is because of the way resolutions work. For example, there’s an FGM resolution, usually every two years. The UN agencies do have quite a lot of influence and authority. Regional mechanisms are important as well, like the African Union or the Regional Commission in Africa. For child marriage, SAARC in South Asia is key. Not ASEAN – ASEAN hasn’t done anything on harmful practices at all. The statistical offices and the data producers also have influence, even if they don’t see it that way themselves. I think key experts, definitely for GBSS, people like CZG. For child marriage, probably not single individuals, but organizations like Girls Not Brides, which is very influential. And there are champions, individual champions, particularly for child marriage and FGM. Some of the global advocates telling their own stories has been quite powerful. (IN11)

In the case of GBSS, enrolment required deliberate efforts to convince not only institutional actors but also the public and media. A Communication Specialist at UNFPA Armenia recounted the decade-long effort to secure national stakeholder buy-in:

The media helped us a lot in the early years, because they wrote so much, they published so much, interviewed so much that even the strongest doubters just turned and said, ‘okay, you’re right. We have the issue. We should do something about it’. In our case, at this point, it is more or less easy; there is not much to be done to convince our partners and other stakeholders. It took ten years of work. (IN33)

The same interviewee emphasized the importance of the organizational culture at UNFPA Armenia in facilitating stakeholder enrolment through knowledge transfer:

We don’t care, we just share ... This is an organizational culture. From day one that I joined the office, it was open – open to anyone who

needs us. Any information, any materials that are not classified are available widely, and we have never hesitated to share ... If we can add even the smallest thing to the solution of the problem, we don't care who presents it. (IN33)

This culture of openness and knowledge-sharing fostered trust and cooperation, encouraging government agencies, NGOs, and other stakeholders in Armenia to take up the issue of sex selection.

These qualitative findings demonstrate how enrolment in global gender programmes across actors and levels is not automatic but requires sustained effort to persuade, align, and formalize partnerships. It is a deeply relational process, reliant on knowledge-sharing, collective problem definition, and the building of trust across diverse actors. The enrolment of key stakeholders – donors, governments, researchers, NGOs, regional bodies, media, and individuals – ensured that the programmes were positioned for the next stage of translation: mobilization.

Mobilization: sustaining knowledge flows and commitment

The final stage in the translation process – mobilization – is central for sustaining global gender programmes over time. Mobilization involves the continuous circulation of knowledge, the reinforcement of shared goals, and the maintenance of stakeholder engagement. For that, global programmes need to showcase that what they are doing has an effect. Monitoring and evaluation hence become vital for programmes to continue their operations. As the former Chief of the Gender and Human Rights Branch at UNFPA summarized, knowledge transfer remains a cornerstone across the entire programme cycle: 'Knowledge transfer is a pillar throughout the whole process. It is a pillar to have strong and evidence-based advocacy, but also when it comes to the reporting, the monitoring, the evaluation of the programmes' (IN08). A senior M&E Specialist involved in the FGM Programme reinforced this: 'Supporting all this data collection, but also evaluations and studies ... makes the Joint Programme able to generate data and evidence to support advocacy at global, regional, and national levels' (IN15).

Importantly, mobilization is not one-size-fits-all. It is diversified, tailored, and operates across multiple levels, each requiring distinct strategies and actions.

At the organizational level, mobilization focuses on fostering coherence and reducing fragmentation. As one respondent put it: 'Guidance produced by different organizations sometimes contradicts each other' (IN20). Efforts are made to overcome such contradictions. A senior official at UNFPA Headquarters emphasized in this regard the importance of reducing silos: 'We

are trying to have fewer silos and more integrated approaches between the three global programmes. That has already been presented to senior management. We are just waiting for the official creation of the Harmful Practices Unit' (IN24). Despite efforts to reduce silos, only the two joint programmes run by UNICEF and UNFPA would become integrated, while the third programme was discontinued. Importantly, interviewees highlighted differences in knowledge management systems across agencies. One observed: 'UNICEF is more intentional about knowledge management than perhaps some of the smaller agencies [like UNFPA]' (IN11). The same interviewee noted that the Global Programme to End Child Marriage, in particular, has 'the most explicit focus and strongest knowledge component', in terms of evidence generation and structured knowledge exchange (IN11). Another respondent echoed: 'UNICEF has stronger ... I would not say capacity, but their approach is much stronger when it comes to knowledge dissemination' (IN08). Concrete examples include UNICEF's designated knowledge management strategies as well as ongoing investments in research and evidence synthesis (Chandra-Mouli et al, 2019; Chalasani et al, 2021; UNICEF and UNFPA, 2022b, 2023).

At the managerial level, mobilization is closely linked to fundraising, resource allocation and negotiations. A senior official explained: 'At the high political level and the resource mobilization level, it's about placing this issue globally, mobilizing funds, and developing a global programme' (IN08). In the FGM Programme, led by UNFPA, resources were split evenly between UNFPA and UNICEF, with national offices coordinating joint work plans to ensure complementarity. By contrast, the Child Marriage Programme followed a different model: UNFPA focused primarily on Sexual and Reproductive Health and Rights (SRHR), while UNICEF maintained broader leadership. This divergence also shaped how funds were distributed, with most resources channelled through UNICEF (IN08). Donor preferences, including which countries to prioritize or exclude, further influenced the programmes' design, trajectory, and resource mobilization (IN08).

At the operational level, mobilization centres on quality assurance and evidence uptake. Several interviewees emphasized that mobilization goes beyond managing knowledge and mobilizing funds – it also requires ensuring the quality and relevance of data. One respondent lamented: 'Quality of data and evidence – serious issues. I've seen such crappy work coming out of some places. We couldn't use it. No one took it seriously. And it wasn't a one-off occurrence' (IN11). Others highlighted the need for strategies to enhance evidence generation and uptake: 'The goal is to strengthen research quality, support evidence synthesis, and promote uptake. Evidence should be the catalyst to end child marriage and eliminate FGM' (IN31). The same respondent pointed to UNICEF's STAR (Strategic Technical Assistance for

Research) initiative, designed explicitly to promote the use of high-quality research. The interviewee stressed: 'If the research isn't good quality, how will there be uptake?' (IN31). Hence, it becomes important to embed evidence uptake plans into every research activity: 'Whenever we discuss evidence – whether in webinars, workshops, or consultations – uptake needs to be part of that conversation' (IN31). Annual consultations and global meetings play a critical role in supporting this process. A senior official from the Joint Programme to Eliminate FGM described: 'Each year, the Joint Programme organizes a technical global consultation. Countries share implementation experiences, best practices, and invite experts to present new methodologies. It's a key platform to circulate knowledge and build on lessons learned' (IN15). However, respondents also voiced concerns: 'Getting uptake of this evidence is not easy. It's not universal' (IN21). Another noted: '[Often] guidance does not reach decision-makers, or it's not provided in ways decision-makers can use' (IN20). Mobilization, therefore, requires more than producing knowledge, but making evidence accessible, actionable, and persuasive.

At the outreach level, mobilization hinges on continuous media engagement and community action. Media campaigns amplify advocacy efforts, connect actors, and extend reach. I interviewed a so-called 'Triple-A activist', who is affiliated with the Joint Programme through the Global Media Campaign to End FGM. The interviewee explained their outreach role:

Triple-A activists are people who work directly with the Global Media Campaign to end FGM. They are representatives, like coordinators, in different zones. Because the Global Media Campaign cannot come everywhere, at every time, so they have us. We cannot say we're recruited. We are not recruited. We are just coordinating, because we understand what they do. We represent them in different countries. We, the representatives, are called triple-A activists, because we coordinate with the media groups that we have in each country we are established in. In Sierra Leone, we are established in almost all of the districts, except for the Bonthe district, where we still need to go and establish our presence. (IN23)

For this activist, mobilization takes place through constant outreach and media presence. For other grassroots activists, mobilization is often quite literal – requiring physical mobility. One respondent from Kenya highlighted the importance of transportation, noting: 'In places where cars can't reach, we use motorcycles to talk to families and change mindsets about FGM. We bring role model girls whose parents rejected FGM, who got an education, who are now thriving. Even women leaders – we go and talk to them' (IN22). For these grassroots activists, mobilization also meant shifting power: 'There are places I can go where even international organizations cannot [go]. It's

time to shift the power. Give us resources. Give the locals, the grassroots organizations, the means to move, to reach where others can't' (IN22).

These insights reveal that mobilization is not a passive phase but an ongoing, multifaceted effort requiring continuous engagement, knowledge exchange, adaptability, and mediation of diverse interests and needs. It involves a wide range of actors – from grassroots activists to policy makers, data producers to media organizations – all contributing to the maintenance and evolution of global gender programmes. As in previous stages, knowledge remains central – not as neutral data points, but as a negotiated, contested, and strategic resource.

While the Global Programmes to Eliminate FGM and End Child Marriage successfully mobilized and sustained commitment over time, the Global Programme to Address Gender-Biased Sex Selection struggled to do so. I observed this firsthand during my time as a technical consultant, witnessing the extensive efforts that were made to secure the programme's continuation beyond its first two phases. A range of strategies were employed: studies were conducted at global, regional, and national levels; donor briefs and country-specific factsheets were produced. The programme underwent several rebranding efforts, evolving from the 'Global Programme to Address Gender-Biased Sex Selection' to the 'Global Programme to Prevent Son Preference and Undervaluing of Girls', before adopting the 'Every Girl Counts' campaign. The focus shifted strategically – from an emphasis on reproductive coercion to addressing son preference and the structural drivers of gender inequality. Knowledge repositories were established, bi-monthly newsletters disseminated, and UNFPA issued analytical papers, including one applying a human rights-based lens to son preference. Efforts were also made to boost the programme's visibility through science-practice dialogues, bringing together leading researchers and practitioners to bridge the gap between research and policy. Capacity-building was further strengthened through formalized training toolkits, the development of online courses, and the design of global and national curricula. Yet, despite these considerable efforts under constant resource constraints, the programme ultimately failed to secure commitment from donors and UN partners. Instead, the *Every Girl Counts* programme (last official name) quietly faded away. While some countries continued regional initiatives, there was no formal farewell marking its closure.

The gradual unravelling of the programme illustrates how fragile such programmes can be. Latour's insight resonates here: 'when things hold, they start becoming true' (Latour, 1987, p 12). Conviction within these programmes is always provisional, embedded within evolving webs of relations. Following a leadership change at UNFPA Headquarters in 2019, this conviction weakened. Between 2019 and 2021, the Coordinator of the Global Programme to Address Gender-Biased Sex Selection changed at least

four times. By the programme's end in 2023, the final Coordinator confided in an email to me, almost symbolically: '(I think I need to convince myself about the need for a global programme, as opposed to a regional one)'. Without donor mobilization, UN officials themselves began to disengage, dis-enrol, and distance themselves. Interestment diminished, and the problem was quietly sidelined. UNFPA shifted its focus on digital violence and humanitarian response in times of conflict and crisis.

These empirical findings illustrate that the making – and unmaking – of global gender programmes is deeply intertwined with knowledge production and transfer. Their trajectory reflects Callon's four stages of translation:

1. Problematisation: Defining harmful practices as global issues, breaking taboos, and showcasing trends.
2. Interestment: Aligning diverse actors around proposed solutions and best practices.
3. Enrolment: Securing formal commitment and overcoming resistance.
4. Mobilization: Maintaining engagement, circulating knowledge, and securing sustained commitment.

These phases involve different risks for different actors involved in global gender programmes. They take place at different levels, from global to local. Powerfully, they shine through the interview with one grassroots activist from Sierra Leone, who received death threats for campaigning against FGM:

I don't know how to describe it, our society ... People are so gullible and entrenched with traditional culture. To get them just to abandon it is difficult. It has to be in phases. We have to walk through those phases to see if we are able to get the people to begin to understand. Then, we move to the next phase. That is how we have plotted it. We can now discuss on TV, on radio; we can sit and discuss about FGM. Nobody will come and kill you. We have largely succeeded in that [problematisation]. The second phase, now, is to get the people interested in this topic by creating debates in schools, talk on public forums [interestment]. Let people begin to put themselves into the debate. That the larger Sierra Leonean society begins to understand that there is an issue that they need to see, and understand that this issue is serious. It is going against women. It's going against girls. It's causing a lot of problems. As they see, they begin to own the process [enrolment]. The next phase, we target the Government and lawmakers [mobilization]. So, 2030 is far, but it's not that far. (IN23)

This analysis underscores an anti-foundationalist perspective: knowledge is neither fixed nor neutral but negotiated, contested, and strategically

disseminated throughout different phases of problematization, interessement, enrolment, and mobilization. Global gender programmes emerge not as rigid frameworks but as socially constructed assemblages shaped by dynamic networks of human and non-human actors. Crucially, non-human actors – data systems, indicators, reports, surveys, legal frameworks – play a stabilizing role, institutionalizing knowledge and influencing outcomes. The following section turns to these human–non-human entanglements and their role in sustaining or unravelling global gender programmes.

Human-non-human relations: abortion and the limits of the global gaze

How do interactions between human and non-human interactions shape the existence and trajectory of global gender programmes? This section turns to these entanglements, focusing particularly on how sensitive topics like abortion, can influence the enrolment, support, and sustainability of these programmes. The earlier case study description (Table 3.1) revealed notable differences in the scale and scope of the three global gender programmes. In particular, the Global Programme to Address Gender-Biased Sex Selection is much smaller in terms of funding and reach, and is administered solely by UNFPA, unlike the joint UNICEF–UNFPA initiatives on child marriage and FGM. When I asked interviewees to explain these differences, their responses consistently pointed to one critical factor: abortion. Abortion is contested because it raises questions about when human life begins – questions that elicit differing answers across religious teachings, philosophical traditions, and biological sciences (Kurjak and Tripalo, 2004). These divergent perspectives make abortion not only a personal or medical issue but also a deeply moral, ethical, and political one, subject to ongoing debate and contention (see also Box 3.4). This human–non-human entanglement has significant ripple effects across donor behaviour, institutional participation, and programme design and sustainability. A scholar explained: ‘International organizations have their own issues. They want to keep this “blind corner” they don’t want to have discussed. That can be abortion’ (IN03). For many actors, abortion constitutes a ‘hot potato’, complicating support and engagement across feminist movements, academia, donors, and international organizations.

Box 3.4: WHO’s key facts about abortion

- Six out of ten unintended pregnancies end in induced abortion.
- Abortion is a common health intervention. It is very safe when carried out using a method recommended by WHO, appropriate to the pregnancy duration and by someone with the necessary skills.

- However, around 45 per cent of abortions are unsafe.
- Unsafe abortion is an important preventable cause of maternal deaths and morbidities. It can lead to physical and mental health complications and social and financial burdens for women, communities and health systems.
- Lack of access to safe, timely, affordable and respectful abortion care is a critical public health and human rights issue.

Source: [WHO \(2024\)](#)

Feminist and academic reluctance

Several interviewees highlighted tensions between the Global Programme's focus on prenatal sex selection and broader feminist and academic support. The former Chief of the Gender and Human Rights Branch at UNFPA noted: 'When it comes to sex selection, there is always an abortion tension between the feminist movement and conservative groups. Even in the development of the programme at UNFPA, we encountered resistance from feminist NGOs because they preferred this issue to stay under the radar' (IN08). As another respondent explained, feminist movements often prioritize bodily autonomy, which leads them to caution: 'Civil society groups approach this from a rights-based perspective, to the extent that outlawing [sex selection] doesn't restrict women's access to abortion' (IN21). Academic engagement has similarly been limited. Few research centres specialize in the topic, creating what one expert described as a 'closed network': 'You can't get anybody else to work on GBSS seriously because of abortion ... It's very family-like, almost cartel-like' (IN03). The former Chief of the Gender and Human Rights Branch at UNFPA confirmed: 'It was extremely difficult to find researchers, research centres, or NGOs. We had to build the whole thing from scratch, unlike child marriage and FGM where strong movements already existed' (IN08).

Institutional and donor constraints

Institutional hesitancy is equally evident. UNICEF's absence from the GBSS Programme was explained to me in one word: 'Abortion' (IN11). The agency distances itself from abortion-related issues, which affects its engagement with GBSS: 'UNICEF will never come out publicly with some of the things that UNFPA is willing to say about abortion rights. The minute you get a Republican government in the US, they have to distance themselves. The head of UNICEF is always American. It's political' (IN11). This sentiment was echoed by another respondent: 'Since GBSS involves discussions around prenatal sex selection and abortion, that might have been really problematic for UNICEF to engage around. I suspect it was a political decision' (IN09).

UNICEF officials, meanwhile, downplayed the issue, suggesting GBSS is ‘not an issue of prioritization’ (IN19). Donor support is similarly fragile. Several respondents referenced the Global Gag Rule and its chilling effect on UNFPA’s funding. During Republican administrations, UNFPA’s funding is repeatedly cut due to its association with reproductive rights, which is nested in a long history of abortion controversy in the US (Hull and Hoffer, 2021). Under the first Trump administration, UNFPA lost approximately \$182.3 million in core funds – a clear example of how non-human factors like funding policies directly impact programme viability.

Political backsliding and contested terrain

These tensions are further amplified by broader trends of political backsliding. Interviewees (IN03, IN11, IN14) pointed to rollbacks in abortion rights globally – from the US Supreme Court’s overturning of *Roe vs Wade*, to regressions in countries like Afghanistan and Iran: ‘We see regression if you’re looking at access to abortion rights or women’s rights more broadly. This makes advocacy around programmes touching on abortion very challenging’ (IN14). Several interviewees emphasized that UNFPA remains one of the only actors willing to engage in this contested space: ‘There is no other organisation besides UNFPA working directly on gender-biased sex selection’ (IN12). However, even within UNFPA, navigating the issue requires careful framing. Senior officials highlighted how the programme walks a fine line between upholding bodily autonomy and addressing prenatal discrimination: ‘We are a strong defender of bodily autonomy. But there is always a fine balance. That is why we opted for a very strong gender perspective. It’s less sensitive’ (IN24). These abortion-related tensions can explain why child marriage and FGM are explicitly listed in SDG target 5.3., while sex selection is not. As one senior informant explained: ‘It was the abortion issue. There was no support from any agency, including at the time UNFPA because we were struggling internally to place it at the global level. There was no support from Member States. So it was completely impossible to move forward this topic globally’ (IN08). The SDG inclusion of child marriage and FGM has, in turn, secured them increased funding and knowledge production, further widening the gap between these two programme and the one on GBSS (IN19, IN24).

These findings demonstrate how human-non-human relations, especially around sensitive topics like abortion, exert a powerful influence in global gender programmes. As ANT suggests, actors are not limited to individuals or institutions; they include ideas, instruments, and contested issues that shape realities. In the case of the Global Programme to Address Gender-Biased Sex Selection, abortion emerges as a critical, disruptive element, deterring institutional partnerships, feminist support, donor engagement,

and broader actor enrolment. The contested ideas and policy instruments surrounding abortion prompted individuals and institutions to distance themselves from the programme. In this sense, these contestations hindered the translation process: making it difficult to frame GBSS as a global problem, position the programme as a viable solution, enrol key actors, and mobilize support to stabilize the network. This also limited the ability to represent the interests of all enrolled actors – including those without a voice (see [Box 3.5](#)).

Box 3.5: 'Missing Girls' art exhibit that died before it came to life

You are about to enter a space full of baby booties.

Each pair of booties represents 10,000 'missing' women or girls – the result of son preference and gender-biased sex selection. ('Missing Girls' art exhibit text, 2018, unpublished)

Like Latour's high-tech murder mystery of 'who killed Aramis', a personal rapid transit system that never came into existence ([Latour, 1996a](#)), we turn our attention to the ill-fated art exhibit 'Missing Girls'. A venture that was never realized, invites us to consider the intertwined destinies of numbers, yarn, and missing females.

In 2017 and 2018, an art exhibit was diligently planned to be held at the United Nations Headquarter in New York. Eighteen months went into the preparations. The title of the exhibit: 'Missing Girls: Where Have all the Girls Gone?' to be organized by the United Nations Population Fund and an NGO called 'Gendercide Awareness Project' (short Gendap; 'end' in red letters is part of the original name). The exhibit had previously been shown in Austin (2016), Dallas (2017), Toronto (2018), and now headed to New York ([Gendap, 2025](#)). It showed thousands of pairs of baby booties (see [Figures 3.3](#) and [3.4](#)) made by marginalized women from 30 countries, who were paid fairly for their labour and skill. Each handcrafted pair represents 10,000 missing women. As visitors make their way through a floor-to-ceiling labyrinth of baby booties, they should gain a sense for the scale of the problem.

Why did the project fail? Who killed it?

Numbers proved to be contentious. According to one key informant involved in the planning, it appeared to be a 'number game'. The debate arose between various involved actors – UNFPA advisors, communication consultants, NGO staff, academics – over whether there were 117 million or 126 million women missing due to son preference and gender-biased sex selection. Numbers, as non-human actors, wielded power, dictating the scale of the narrative to be spun, quite literally, by the marginalized women whose knitted booties would give form to the formless. The exhibit organizers requested advice from a population scientist. In an interview, the expert states, 'At least for most of these harmful practices, people who have the numbers are at the core ... At the end of the day, there is a pressure of the numbers'. It was the 'number person', the

Figure 3.3: Booties of the Gendercide Awareness Project



Source: Gendercide Awareness Project, reproduced with permission

arbiter of figures, who declared the count to be 126 million, transforming the abstract into the concrete – 12,600 pairs of booties.

Numbers are never neutral. The NGO and UNFPA disagreed over who is represented (or misrepresented) by these numbers. Were these numbers emblematic of 'missing girls' or missing women of all ages? UNFPA opted to focus on 'missing girls' that disappeared because of prenatal and postnatal discrimination. Meanwhile, the NGO stressed that the 126 million 'covers a lot of missing females who died as grown women, not girls' – justifying the NGOs standpoint to call gender-biased sex selection a manifestation of 'gendercide' – note the red letters in the organization's

Figure 3.4: Art installation on missing women



Source: Gendercide Awareness Project, reproduced with permission

name, which can be interpreted to end 'bloodshed' of women and girls. Meanwhile, UNFPA – as the UN agency for sexual and reproductive health and rights – distances itself from such terminology to not endanger access to safe and legal abortions. Given the sensitivity of the issue, the art exhibit texts were revised several times with special focus on 'accuracy and language', until a consensus on the script over 'who counts as missing' was reached. Focus was placed on 'Missing Girls: Where Have all the Girls Gone?'

Numbers need visualization. The organizers knew that numbers alone were insufficient; it required faces, voices, stories – human elements to personify the statistics. Yet, how does one give voice to the women and girls who had been rendered voiceless by discrimination and violence? Whom to portray when females were never born? As one interviewee stressed, 'sex selection is basically something which is completely invisible. It is visible firstly to statisticians who say, 'hey, there's something'. And since it's completely hidden, nobody talks about it' (IN03). This was the exhibit's ambition: to break the silence, to create a human experience on non-human existence, through personal stories, multimedia, and potentially, holograms of women speaking back to the visitors. The organizers wanted to collect 'stories from parents about sex-selective abortion and infanticide and child neglect'. Or stories from 'orphanages for girls, schools for girls, women's and girls' rights activists'. The plan was further to use existing media sources (including the UNFPA supported *No Country for Girls* film) and ask UNFPA country offices to conduct interviews.

These ambitions clashed with the stark reality of timing, budgetary constraints, and institutional approvals. While the planners wove a complex web of narratives, imagery, and advocacy, the funds to sustain their efforts remained uncertain. The UN exhibits committee, the gatekeeper of the venture, still needed to approve the project. At some point, quite advanced in the project, the communication consultant reported back to the NGO saying: 'this may be discouraging – that we have so much material left to find to make a viable proposal to the exhibits committee, and it'll take some time to find the materials, and even then, we're not certain the exhibits committee will accept it'. Meanwhile, a controversy erupted outside the planning rooms – pro-life groups had adopted baby booties as symbols for their cause, inadvertently tainting the exhibit's visual language with political strife. In response, the exhibit's visual strategy was questioned, and the plan for holograms (and distant female voices) was introduced, but it was too late.

In the end – much like Aramis – the 'Missing Girls' exhibit perished under the weight of its own complexity. In 'Aramis or The Love of Technology', Latour (1996a) uses the actor-network theory to analyse the failure of a rapid transit system called Aramis by exploring the complex network of relationships between humans and non-humans (for example, people, technical components, and social forces). Latour illustrates that the project was 'killed' by a multitude of factors, including technical challenges, political changes, shifting priorities in public policy, budget constraints, and the numerous stakeholders with conflicting interests. It was not a matter of one actor being responsible, but rather a series of events and decisions made by different actors that collectively led

to the project being abandoned. Similarly, this was the case with the 'Missing Girls' art exhibit. It never came into existence. Like millions of missing females. What remains are not holograms, but numbers visible mostly to statisticians. Since then, the global estimates have risen to 147 million and counting ([Bongaarts and Guilmoto, 2015](#)).

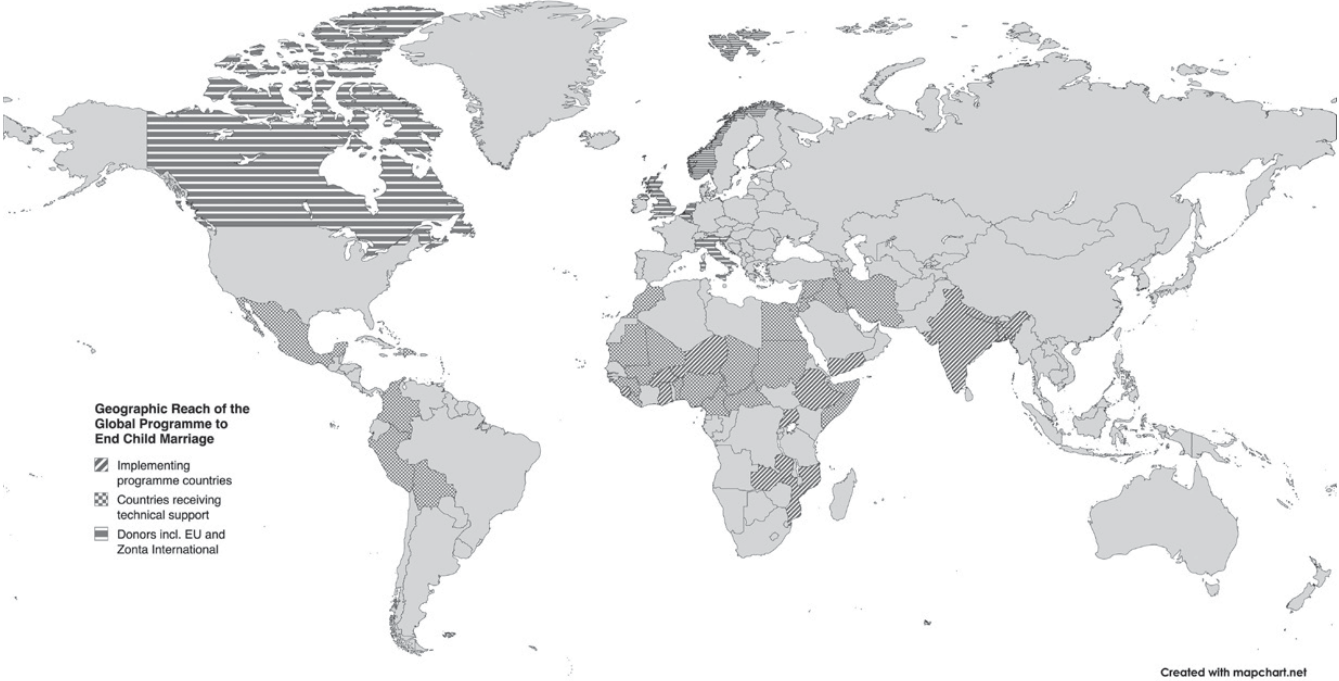
‘Redistributing the local’: mapping actors involved in global gender programmes

Building on the previous section’s effort to *localize the global*, this section follows [Latour’s \(2005\)](#) next move: to *redistribute the local*. It examines how the networks underpinning global gender programmes materialize, connect, and evolve across space and time. Central to this analysis is the mapping of the wide array of actors that constitute these programmes and sustain their momentum. Identifying and categorizing actors within such complex, multi-level interventions is no simple task. Scholars have developed various typologies to make sense of these actor constellations. [Stone et al \(2020\)](#) conceptualize actors in knowledge ecosystems as a threefold order: knowledge actors (individuals), knowledge institutions (organizations), and knowledge networks (their relational ties). Others categorize actors by their function – distinguishing knowledge generators, brokers, curators, disseminators, and users ([HakemZadeh and Baba, 2016](#)). Other approaches focus on the actors’ positions within multi-level governance frameworks, spanning supranational, national, and subnational levels ([Piattoni, 2010](#)), or classify actors based on their type (IGOs, governments, NGOs, donors) and agency ([Kaasch and Martens, 2015](#)). These frameworks provide useful entry points for understanding how actors and coordination mechanisms operate within global governance structures, but they remain mostly static. This section proceeds in two parts. First, it reviews existing stakeholder mapping practices to illustrate how global gender programmes have identified and visualized their actors. Second, it introduces an SNA approach to capture the relational and dynamic dimensions of these programmes in action.

Prior efforts to map the stakeholders involved in global gender programmes reflect the diversity of approaches that were just mentioned. For instance, the Global Programme to End Child Marriage produced a literal map visualizing its geographic reach and stakeholder engagement. It highlights activities in 12 programme countries (including Bangladesh, Burkina Faso, Ethiopia, Ghana, India, Mozambique, Nepal, Niger, Sierra Leone, Uganda, Yemen, and Zambia), 28 countries receiving technical support, and over 100 countries participating in knowledge-sharing initiatives, all supported by eight key donors ([Figure 3.5](#)).

The Global Programme to Address Gender-Biased Sex Selection has been depicted through a more hierarchical stakeholder mapping, visualizing the

Figure 3.5: Global Programme to End Child Marriage at a glance



Note: Donors include Belgium, Canada, Italy, the Netherlands, Norway, the United Kingdom, and the European Union through the Spotlight Initiative, and Zonta International.

Source: [UNICEF and UNFPA \(2023, p 37\)](#)

flows of coordination and influence across various levels (see [Figure 3.6](#)). It illustrates connections between UNFPA Headquarters, two regional offices (EECARO and APRO), and six country offices (Armenia, Azerbaijan, Georgia, Bangladesh, Nepal, and Vietnam). At the national level, key governmental partners – particularly line ministries of health, women’s affairs, social affairs, and statistical offices – are mapped alongside civil society organizations, faith-based actors, academic institutions, and media outlets (see [Figure 3.6](#)).

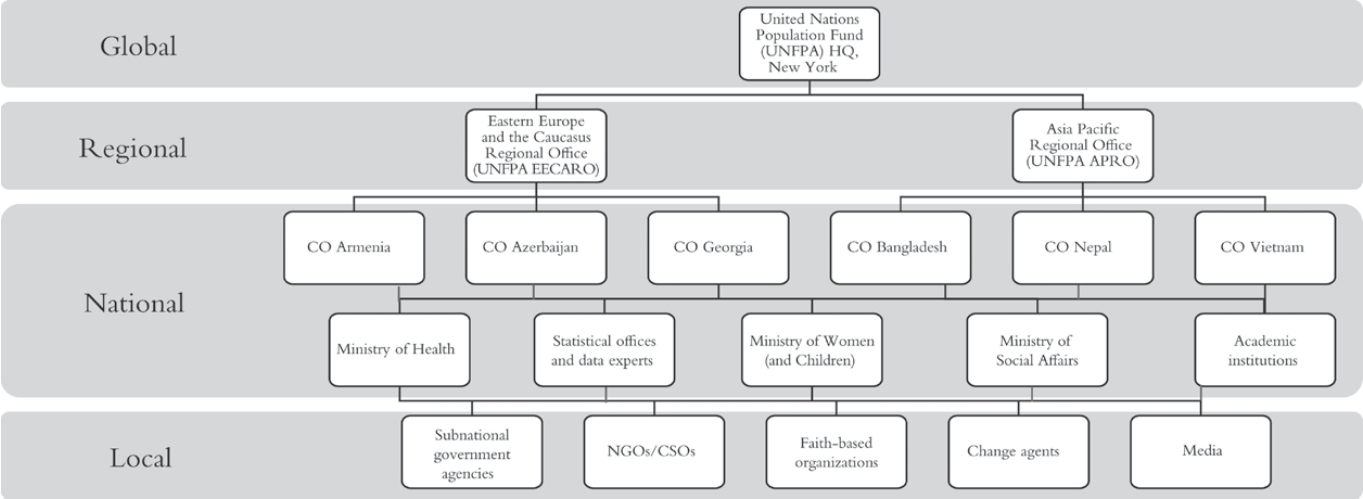
Meanwhile, the Joint Programme to Eliminate FGM conducted a comprehensive stakeholder analysis grounded in human rights frameworks, distinguishing between rights holders and duty-bearers at global, national, subnational, and community levels ([Table 3.2](#)).

Mapping actors involved in global gender programmes is a useful first step. However, static mappings or mere lists of stakeholders often fall short. They fail to capture the relational dynamics, shifts in alliances, and changing power configurations that underpin global governance. As [Latour \(2005, p 159\)](#) aptly noted, ‘Why is it so difficult to trace the social? ... there is nothing more difficult to grasp than social ties. It’s traceable only when it’s being modified.’ The goal, therefore, is not just to catalogue actors but rather to trace their movements, relationships, and transformations over time.

To move beyond static stakeholder maps, this section employs SNA and explores digital platforms – specifically Twitter (now X) – as dynamic arenas of knowledge exchange and actor–network formation. Twitter offers a valuable microcosm where global gender programmes, implementing partners, donors, advocates, and activists converge, particularly during peak moments of global mobilization. However, it also exposes the darker side of digital engagement: the same platform used for advocacy and coalition-building is frequently weaponized to spread violence and hate speech against women ([Kumar, Gruz, and Mai, 2021](#)). For instance, a search for the hashtag [#harmfulpractices](#) yields a mix of content – ranging from safety policies and hate speech regulations to grassroots-led initiatives like the Ending Harmful Traditional Practices Network. This juxtaposition underscores the contested terrain in which global gender programmes operate, highlighting how digital spaces increasingly shape, but also complicate, the exchange of knowledge and the formation of transnational networks.

SNA has been described as ‘advanced analytics that is specifically focused on identifying and forecasting connections, relationships, and influence among individuals and groups; it mines transactions, interactions, and other behavioral information that may be sourced from social media’ ([Forrester, 2010, p 1](#)). Yet, the real value of SNA depends on its theoretical anchoring. In this analysis, ANT offers a lens not only to map who the actors are but also to explore how they relate to, influence, and transform each other. Recent scholarship has combined ANT and SNA using Twitter to map the complex interactions of actors and networks coming together online to

Figure 3.6: Global Programme to Address Gender-Biased Sex Selection at a glance



Note: HQ stands for headquarters; CO for country office

Source: Adopted from [Rahm \(2023, p 12\)](#)

Table 3.2: Stakeholder mapping based on human rights-based approaches

Type of stakeholder	Stakeholders	HR roles
Global level		
UN joint programme staff, coordinators, steering committee	Joint programme FGM leadership; agency liaisons; steering committee UNFPA headquarters (executive board, leadership, management, technical advisers) UNICEF headquarters (executive board, leadership, management, technical advisers)	Tertiary duty bearer
UN other (global)	UN system agencies: UN Women, WHO, UNAIDS, UNDP, ILO, IOM, WFP, UNHCR Coordination: RC/HC, OHCHR, UNCTs, GTGs Supervisory bodies CEDAW, CRC, ICPD, GREVIO/COP, CSW Global Joint Programming mechanisms: Global Programme on Child Marriage; Spotlight Initiative; Secretariat/SG International Initiatives (PMNCH)	Tertiary duty bearer
Donors (global)	Bilateral: United Kingdom, Austria, Iceland, Ireland, Italy, Luxembourg, Switzerland, Norway, Sweden, European Union, Finland, Germany Multilateral: EC, OECD	Tertiary duty bearer
Civil society (global)	Civil society organizations, for example, Women's Refugee Commission, Population Council, International Center for Research on Women, EndFGM, AIDOS Building Bridges, Orchid Project, 28 Too Many, Girl Generation, youthSave, Equality Now, CRR, Human Rights Watch, Amnesty International, Centre for Reproductive Rights, Plan International (and affiliated groups for example, Girls Count), World Vision, Save the Children, International Planned Parenthood Federation, IPAS, EngenderHealth, Safe Cities initiatives (UN Habitat, UN Women, UNICEF, Microsoft), BRAC (selected countries), Promundo, MenEngage HERA, DAWN, Women's Global Network for Reproductive Rights	Tertiary duty bearer
Regional level		
UN other (regional)	UNFPA and UNICEF regional offices (leadership, management, technical advisers, coordinating mechanisms)	Tertiary duty bearer

Table 3.2: Stakeholder mapping based on human rights-based approaches (continued)

Type of stakeholder	Stakeholders	HR roles
Regional organizations	African Union, Pan African Parliament Economic Commission for Africa, InterAfrican Committee	Tertiary duty bearer
Country level		
National authorities	Central government – ministries/departments (and/ or regulatory oversight for) Health, gender, youth, education, public works, water, sanitation and hygiene Community development, labour, justice, disaster management, emergency response, statistics Parliamentarians Security forces – local	Tertiary Duty Bearer
Civil society (national level)	Civil society advisory groups – country level (communities of practice; technical committees) National CSOs: National Human Rights Commission, Women's groups	Tertiary duty bearer
Sub-national level		
Sub-national level	Representatives of ministries for example, local representative of Women's Affairs and Ministry of Health. Elected representatives including mayors and councils Appointed leaders, administrators, service providers, medical and health providers Media (all types) Security (Police, military, local 'militia' 'watch committees') Judiciary (lawyers, judges, court structures)	Secondary duty bearer
Implementing partners	As advised by Country Office for each Country Case Study	Secondary duty bearer
Community level		
Community structures	Community structures (other than governmental structures including community level militia) Religious and traditional leaders Traditional institutions (traditional court systems, Sharia courts, rotating savings and credit associations, cultural leaders, local councils) Traditional birth attendants and healers Cutters and ceremonial participants Village level 'enforcement' committees for follow up post declaration to abandon CBOs (associations, chapter organizations, clubs) Youth groups and leadership/theatre or arts groups/ role models	Primary duty bearer (as agents of change, as heads of households and assumed/ traditional decision-makers)

(continued)

Table 3.2: Stakeholder mapping based on human rights-based approaches (continued)

Type of stakeholder	Stakeholders	HR roles
Community members	Women – across the life cycle for example, young women (20–30), adolescent girls (15–20), young adolescent girls (10–15), older women, married, unmarried Men-across the life cycle – young men, adolescent boys, young adolescent boys, older men, married, unmarried	Rights holders

Source: [UNFPA and UNICEF \(2018, pp 8–10\)](#)

share information about topics of mutual interest ([Grover, Kar, and Davies, 2018](#); [Hellsten, Jacobs, and Wonneberger, 2019](#); [Arias, 2020](#); [Hellsten and Leydesdorff, 2020](#); [Kolli and Khajeheian, 2020](#); [Upadhyay et al, 2022](#); [Singh et al, 2023](#)). A common critique of ANT is its tendency to flatten hierarchies, assigning equal agency to all actors. However, scholars such as [Kolli and Khajeheian \(2020\)](#) highlight that an actors significance becomes evident in their relational ties, that stems from their position within the network and the strength of their ties to others. Building on this, our analysis focuses on mediators and attachments. To paraphrase Latour, we are now interested in the mediators (those who tweet) who prompt others mediators to act (whether through retweets, replies, or reshaping messages). Key questions guide this inquiry are: who is connected to whom in global campaigns to end harmful practices? What temporary attachments and alliances emerge, and how do they shift over time?

To visualize these dynamics, I used SozioViz in early 2023 – before Twitter’s API access restrictions – to conduct the social network analysis. SozioViz facilitates the exploration of key SNA measures such as:

- Degree centrality: Identifying the most connected and influential nodes (hubs).
- Betweenness centrality: Pinpointing actors who bridge otherwise disconnected parts of the network.
- Closeness centrality: Assessing actors’ proximity to others, which influences their ability to monitor or control information flow.

Notably, only two of the three global programmes maintain an active presence on Twitter. The Global Programme to Address Gender-Biased Sex Selection attempted engagement but failed to enrol participants – reflecting broader challenges related to visibility and resonance. Therefore, this section focuses

exclusively on the Global Programme to End Child Marriage and the Joint Programme to Eliminate Female Genital Mutilation. By tracking hashtags such as #EndChildMarriage and #EndFGM, along with programme-specific accounts like @gptoendfgm and @gpchildmarriage, we were able to chart how messages circulate and alliances form.

However, several limitations must be acknowledged. First, the analysis offers only static snapshots of networks that are in constant flux. Additionally, Twitter's policy changes in 2023 further restricted data access, complicating longitudinal analysis. Beyond technical constraints, deeper structural questions arise: Who has access to these digital spaces? Whose voices are amplified? And crucially, does increased visibility translate into meaningful grassroots mobilization? Livaha (2024, p 205) addresses these concerns, highlighting the 'intelligibility gap' that continues to marginalize community-led interventions, despite their central role in combating harmful practices.

Despite these limitations, the analysis yields important insights. The findings reveal divergent network structures: while the Global Programme to End Child Marriage emerges as a central knowledge hub, the Joint Programme to Eliminate FGM exhibits a more decentralized, point-to-point configuration. Importantly, both networks experience fluctuations tied to key global events such as International Women's Day and the International Day of Zero Tolerance for FGM, highlighting the temporal nature of mobilization and influence. Ultimately, this section underscores that actor-networks in global gender governance are not static; they are performative, contingent, and continually negotiated. By redistributing the local, we gain new insights into how knowledge, actors, and advocacy coalesce – and at times fragment – across digital and physical spaces.

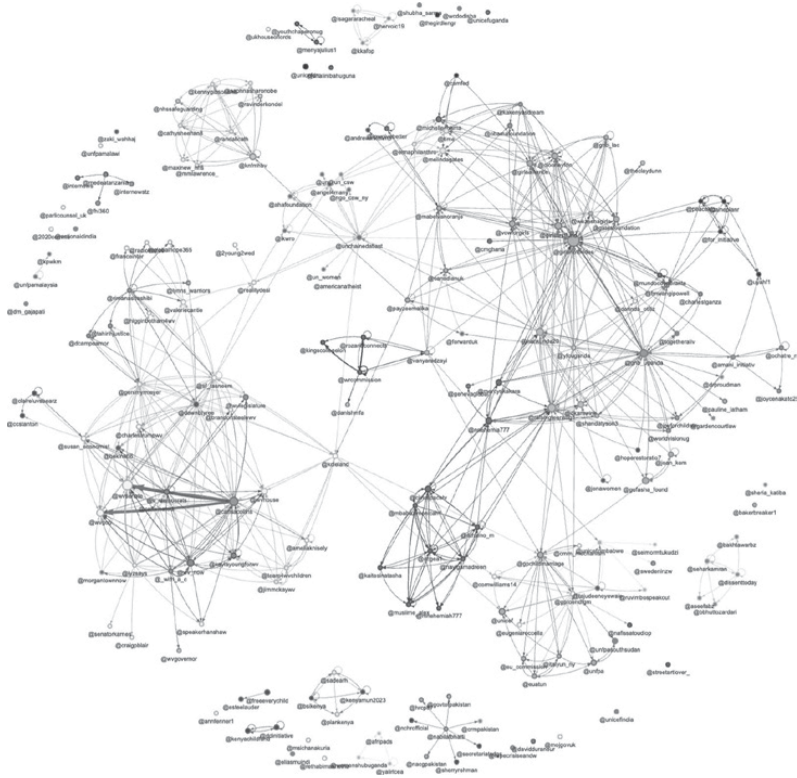
Figure 3.7 visualizes the actor-network structure surrounding the Global Programme to End Child Marriage (@gpchildmarriage) based on retweet and mention data. The central hub-and-spoke pattern highlights the programme's dominant role in shaping discourse and mobilization, with @gpchildmarriage emerging as the most influential node, where knowledge flows outward from the hub but there is a minimal lateral exchange between peripheral actors. This indicates that the Global Programme plays a key role in aggregating and disseminating information. Many smaller nodes (individual accounts, NGOs, donors, or partner organizations) are linked directly to this central hub, retweeting or engaging primarily with the programme's content rather than with each other, even if the Global Programme has fewer followers than partner organizations like @UNFPA, @GirlsNotBrides, or @UNICEFUGanda. Crucially, the network reveals how influence is not solely determined by follower count but by relational positioning. The user @amit_hra, associated with a small feminist NGO called Initiative Foundation, based in Lucknow, India, exhibits the highest betweenness centrality, acting as a strategic bridge between key hubs such as @gpchildmarriage and @GirlsNotBrides, facilitating

Figure 3.8: Global Programme to Eliminate FGM in a loosely integrated network during off-season



dominant hub. Notably, the Founder and Executive Director of Men End FGM Foundation (@TonyMwebia) emerges as a key influencer. His centrality within the network reflects his role in mobilizing youth voices against FGM, exemplified in tweets like: ‘More than 70% of Kenyan population is youth below 35 Yrs, our peers suffer most from #FGM consequences, as a young man I vow to speak and protect my friends from this vice’. The network also shows clear links to the Equality Now International End FGM Campaign (@endingfgm), reinforcing transnational advocacy ties. Additionally, two detached clusters are visible: One around a Kenyan gender activist and UNFPA Youth Advisory Panel member (@OdhiamboOlela), highlighting localized youth engagement. Another cluster from The Gambia, involving national entities such as UNICEF Gambia, UNFPA Gambia, the Ministry of Gender, the Ministry of Justice, the National Human Rights Commission, and the Official Twitter of the Gambian Presidency (@BarrowPresident). This reflects state-level involvement but limited integration with the broader global network. Overall, this network underscores a decentralized mobilization structure with pockets of strong local leadership but fragmented global linkages (Figure 3.8).

Figure 3.10: #EndChildMarriage: two programmes team up, but NGO GirlsNotBrides is the bigger hub



Note: To see a larger version of this figure, please go to: <https://bristoluniversitypress.co.uk/the-global-governance-of-harmful-practices>

of global gender governance, revealing how actor influence and positioning fluctuate in response to strategic mobilization moments (Figure 3.9).

Figure 3.10 visualizes the actor-network around the hashtag #EndChild Marriage during International Women's Day (8 March), a key moment of global advocacy when gender equality campaigns intensify. The network reveals decentralized, multi-hub structure, in which the Global Programme to End Child Marriage (@gpchildmarriage) and the Joint Programme to Eliminate FGM (@gptoendfgm) team up and actively retweet, mention, and engage with each other, strategically aligning their messaging. However, the analysis shows that the NGO Girls Not Brides (@GirlsNotBrides) emerges as the most influential hub in this network, surpassing the two UN-led Global Programmes on Child Marriage and FGM in terms of connectivity and centrality. While these programmes collaborate closely and form interconnected clusters, Girls Not Brides maintains a distinct and dense network, reflecting its strategic autonomy and broad coalition base.

Figure 3.11: #EndFGM: two programmes team up, but NGO Orchid Project and The Girl Generation play a more central role



Note: To see a larger version of this figure, please go to: <https://bristoluniversitypress.co.uk/the-global-governance-of-harmful-practices>

This is noteworthy, as Girls Not Brides is not only an official partner of the Global Programme to End Child Marriage. The NGO was also strategically enrolled in the programme for its extensive global advocacy network. Girls Not Brides is composed of over 1,600 civil society organizations (CSOs) from 100 countries. Their prominent position here reflects their key role as a knowledge broker and amplifier, bridging various actors including local organizations, international agencies, and grassroots advocates. Figure 3.10 shows two areas of activity: one is around Girls Not Brides, and the second is around the interconnected two global programmes. Figure 3.10 underscores how actor influence is situational, tied to events like International Women's Day, and shaped by pre-existing advocacy coalitions and partnerships.

Figure 3.11 also visualizes network activity during International Women's Day (8 March) but focuses on the hashtag #EndFGM. It shows again active collaboration between the two global programmes: the Joint Programme to Eliminate FGM (@gpttoendfgm), positioned centrally, and the Global

Programme to End Child Marriage (@gpchildmarriage), appearing more peripheral. However, the network reveals that two NGOs – Orchid Project (@OrchidProject) and The Girl Generation (@TheGirlGen) – occupy the most influential positions. Both serve as central hubs, reflecting their pivotal roles in civil society mobilization and knowledge dissemination. Their prominence highlights how, during key advocacy moments, well-connected NGOs surpass institutional programmes in shaping the digital conversation. The Orchid Project, with offices in Nairobi and London, supports grassroots organizations leading the fight against FGM globally. Similarly, The Girl Generation, a coalition of over 700 organizations funded by the Human Dignity Foundation, backs community-led initiatives across ten countries. The circled clusters illustrate these dynamics: one around the NGOs, the other linking the two global programmes. Again, this network exemplifies how advocacy coalitions strategically align with influential civil society actors, reinforcing the distributed, multi-actor nature of gender governance (Figure 3.11).

These network analyses reveal the shifting, relational, and event-driven nature of influence within global gender governance. While the Global Programme to End Child Marriage and the Joint Programme to Eliminate FGM shift between central and peripheral positions depending on timing and context, civil society actors consistently emerge as key mobilizers. Notably, organizations such as Girls Not Brides, The Orchid Project, The Girl Generation, and Equality Now demonstrate strong network centrality, reflecting their deep-rooted connections with NGO movements. Their broad coalitions and strong relational ties demonstrate how these mediators possess a greater capacity to influence others. Additionally, over the past years, there has been a noticeable rise in male advocates and campaigns – most visibly through the MenEngage Alliance – who increasingly speak out against harmful practices, particularly FGM. Influencers like Tony Mwebia exemplify this growing male-led activism, which is more pronounced in the anti-FGM space than in efforts to end child marriage. These grassroots actors, including youth activists, community leaders, and male allies, play a pivotal role in shaping discourse and sustaining momentum. Ultimately, these findings underscore that global advocacy networks are not static hierarchies but dynamic, negotiated arenas where knowledge, power, and influence circulate – driven by strategic alliances, local leadership, and timely engagement.

In sum, knowledge transfer in and across global gender programmes is dynamic, multi-scalar, and mediated through a complex web of institutional actors, NGOs, grassroots organizations, and individual advocates, occurring through bite-sized digital artifacts, which circulate rapidly across borders and audiences. It is brokered by key mediators, and periodically reconfigured through global events. This underscores the importance of recognizing not just formal institutional partnerships but the broader constellation of actors – NGOs, local leaders, youth advocates – who play essential roles in translating

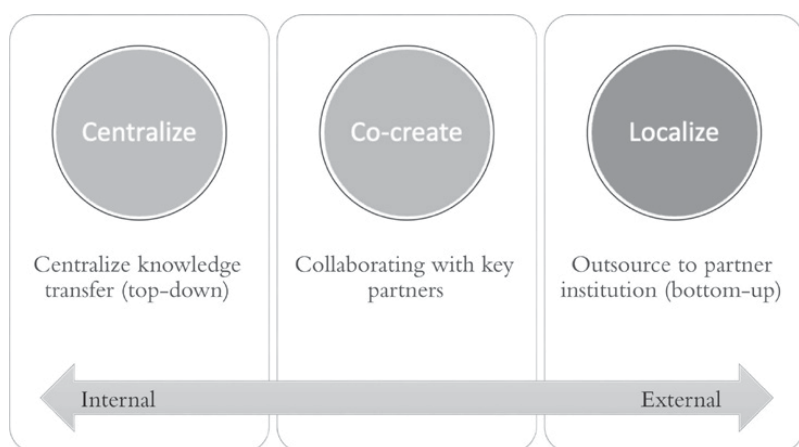
knowledge, building alliances, and sustaining momentum across digital and physical spaces. After [Latour's \(2005\)](#) second step of 'redistributing the local', demonstrated through our Twitter network analysis of shifting alliances and grassroots actors, we now move to his final step: 'connecting sites'. The next section examines how these dispersed actors and knowledge brokers, active across different arenas, come together in so-called knowledge hubs.

Knowledge transfer hubs and hindrance: the three modes of transfer

Effective knowledge transfer is incredibly challenging; it sometimes succeeds, but it frequently fails. ([Røvik, 2023](#), p 1)

Over the past decade, global programmes and alliances have increasingly turned to knowledge hubs as critical sites for promoting evidence-based policies and interventions. These hubs are emblematic of what [Latour \(2005\)](#) describes as *connecting sites*: spaces where knowledge, data, and practices circulate, are translated, or, at times, become bottlenecked. Ideally, such hubs are embedded within broader knowledge management strategies, creating sustained linkages across institutions, regions, and actors. Yet, the reality is far more complex, shaped by competing priorities, resource constraints, and varying degrees of stakeholder engagement.

The previous quote sets the tone for this section, which examines the complexities of knowledge transfer within global gender programmes. Drawing on Latour's third step – connecting sites – we turn our attention to knowledge hubs. These hubs are strategically designed intersections, both technologically mediated and human-driven, that function as boosters – or blockages – for knowledge transfer. From an ANT perspective, knowledge transfer is not a linear process of simple dissemination. Instead, it is a co-creative endeavour involving an interplay between human actors (that is, policy makers, practitioners, and advocates) and non-human actors (that is, digital platforms, data repositories, indicators). Knowledge hubs, as described by [Evers et al \(2011\)](#), typically fulfil three core functions: generating knowledge, transferring knowledge, and educating and training stakeholders. Yet, how these hubs are governed significantly shapes their effectiveness. [Cairney et al \(2022\)](#) provide a useful lens to analyse these governance structures. In their work on public policy to reduce inequalities, the authors identify three modes of governance for policy learning, through which policy or programme designers may seek to: centralize power to maximize effectiveness and accountability, localize to delegate responsibility, or co-create to encourage 'collaborative governance' among many levels and types of actors ([Cairney et al, 2022](#), p 28). These modes through which authorities attempt to steer accountability translate

Figure 3.12: Three modes of governance of knowledge hubs

Source: Inspired by Cairney et al (2022); internal/external added

well to knowledge transfer: centralization, co-creation, and localization (see Figure 3.12). Each mode of governance carries distinct trade-offs in power distribution, stakeholder engagement, and resource demands. Global gender programmes offer concrete illustrations of how these governance models play out in practice, and the empirical evidence from three key programmes reveals the challenges and opportunities embedded within each.

Localization: outsourcing knowledge transfer

The Global Programme to Address Gender-Biased Sex Selection (GBSS) initially adopted a localization strategy for its knowledge transfer efforts, opting to outsource the creation and management of its knowledge hub to a regional NGO partner. The rationale behind this approach was to foster local ownership and ensure contextual relevance by appointing a designated agency to lead knowledge production, dissemination, and capacity-building activities. As outlined in the programme description, the envisioned knowledge hub was intended to serve as an ‘inter-regional research and capacity development centre’, responsible for training multi-stakeholder groups, providing technical assistance, and ensuring quality assurance in research efforts (EU, 2015, p 7). It was also expected to act as a central node for networking across the regions. However, in practice, this strategy encountered significant obstacles. The process of identifying a suitable partner proved very difficult, which caused substantial delays in programme implementation. A former representative of the interregional mechanism (IRM) recalled: ‘We started one and a half years after the beginning of the global programme. Before, UNFPA worked with another

NGO from South Korea. They then changed, so we didn't have enough time' (IN02). Another interviewee involved in the process noted: 'We tried subletting it out to [an NGO in] South Korea. It didn't work. Then we tried with [an NGO in] Turkey. It didn't work that well (either)' (IN14). Despite extensive efforts, the localization approach ultimately faltered, undermined by concerns over partner capacity, quality control, and sustainability. As the founder of the GBSS Programme and former Chief of the Gender and Human Rights Branch at UNFPA reflected: 'We failed when it comes to the knowledge hub mechanism' (IN08). Several underlying concerns explain this failure. There was mistrust in identifying capable partners who could meet expectations. As one former programme manager noted: 'We were not able to identify a partner we would trust to do that. The original idea was to create a [knowledge] platform and find a way of making it available open access' (IN07). Fears over the quality and accountability of the knowledge being shared persisted, alongside worries about sustainability and long-term stewardship. Another interviewee involved with the programme remarked:

We had concerns about the content, the quality, the sustainability of that [knowledge] platform, how it is managed. Content wise, we thought it was not strong enough. We did not want to add a layer when it comes to another webpage. It was also a standalone product. It was outside the UNFPA domain. (IN06)

Another interviewee reflected on the unintended consequence of outsourcing in terms of knowledge loss: 'I still think the knowledge hub function would be really important to have. But I've changed my view about outsourcing it. We tried so hard, but the problem with outsourcing is that you don't keep the knowledge inside the organizations' (IN11). Ultimately, the knowledge hub was dissolved after Phase 1 of the programme. The digital knowledge platform created by the IRM was not collected. Knowledge was indeed lost, and local ties were broken (IN02). By Phase 2, the GBSS Programme pivoted away from localization, opting instead for a centralized knowledge repository – a strategy employed in other global programmes.

Centralization: internalizing knowledge transfer

Informed by the challenges experienced in the GBSS Programme, the Joint Programme to Eliminate Female Genital Mutilation deliberately pursued a different approach to knowledge transfer. Rather than outsourcing, the programme opted to centralize knowledge management by establishing an in-house digital platform – *Data for All* – designed to handle data collection,

reporting, and dissemination directly under UN agency control. As the Programme Manager explained, this decision stemmed from lessons drawn across programmes: ‘It is more a digitalized approach, led by UNFPA or UNICEF, as opposed to subletting it out [outsourcing] to a different agency, because it didn’t work under the GBSS Programme’ (IN14). While centralization ensured quality control and institutional accountability, it came with notable trade-offs. Despite its name, *Data for All* was not truly public-facing. Access remained largely restricted to UN users and selected partner organizations. One interviewee clarified: ‘We have a platform called *Data for All*, which is for specific audiences like country offices, regional offices, selected partners that we work with, so you need to be a member to access it’ (IN16). A UNFPA staff member based in Ethiopia elaborated on its scope: ‘All the countries can share their human stories, results of their interventions, best practices, approaches, and upload all the knowledge products, reports, studies, surveys, whatever, so everybody can have it. But of course, it is a platform that is not for public’ (IN10). The interviewee voiced concerns about this limited accessibility: ‘It’s a huge platform, and a hub for knowledge. But most of it is still internal for the UN and its partners’ (IN10). Similarly, another stakeholder pointed out: ‘You need a special login, but once you access it, it can give you the country situation and analysis, previous annual reports, policy documents, and all of that. But it’s internal’ (IN20). There was a shared sentiment among interviewees that making the data and knowledge products more publicly accessible could enhance uptake and visibility: ‘All we need is a global data hub for FGM. A one-stop shop where someone can just go and get the data on FGM, and the promising practices ... that would be good’ (IN20). Another interviewee noted: ‘We discussed with our communication people, how to make it [Data for all] more public – because it’s a lot of statistics, figures, data, and I believe the public should know and use this data’ (IN10). In addition to accessibility concerns, centralization was recognized as resource-intensive and technically demanding. One interviewee reflected on the internal burden: ‘Setting up a centralized digital repository within UNFPA – it’s a lot of work. It requires highly specialist skills’ (IN14). Unlike GBSS, where knowledge transfer was outsourced, FGM’s knowledge management was deliberately kept in-house, supported by a fully funded headquarters team. Their responsibilities encompassed the production of annual reports, conference proceedings, best practice documents, and the dissemination of relevant materials to regional, sub-regional, and country offices, alongside providing capacity-building and technical assistance (EU, 2015, pp 25–6). Still, concerns remained. One interviewee reflected: ‘Knowledge management should not be centralized. A lot of times, it’s centralized in just one setting in a institution. It’s important that people see it as part of their day-to-day work’ (IN26). This comment reflects broader concerns

about ensuring that knowledge systems remain dynamic, participatory, and embedded within everyday programming, rather than confined to a small circle of institutional actors. Ultimately, the FGM Programme's centralized model underscored the inherent trade-offs of internalizing knowledge transfer: while it strengthens control and quality assurance, it demands significant resources and risks limited visibility and engagement outside the immediate UN system.

Co-creation: collaboration with key partners

In contrast to earlier models, the Global Programme to End Child Marriage embraced a co-creation approach to knowledge transfer. This strategy aimed to bridge the gap between ownership and openness by partnering with key stakeholders to jointly develop and manage knowledge hubs. As one interviewee summarized, the goal was to 'cover the gamut of production, better quality production, and dissemination' (IN21). The co-creation model emerged after a clear learning curve. In the programme's first phase, over 150 knowledge products were produced, but much of it leaned heavily toward formative research. Recognizing the need for higher-quality, policy-relevant studies, the programme shifted in Phase 2 toward more evaluative work. This shift materialized through two flagship initiatives. The first one was the co-creation of the Child Marriage Research to Action Network (CRANK) developed together with Girls Not Brides. CRANK leveraged the NGO's vast advocacy network, while also integrating researchers, policy makers, and practitioners. As a UNICEF knowledge manager explained: 'Girls Not Brides, they are a big player. They have a huge network ... that works in partnership with the Global Programme to focus on the exchange and transfer of knowledge' (IN31). This partnership is institutionalized: Girls Not Brides is a member of the programme's Partnership Advisory Group, while UNICEF sits on Girls Not Brides' advisory board, ensuring ongoing coordination, strategic guidance, and shared learning (European Union, 2015). The second initiative was the creation of the Strategic Technical Assistance for Research (STAR) Initiative – co-developed with UNICEF Innocenti. STAR focuses on enhancing research quality and ensuring uptake by offering tailored guidance in evidence generation and uptake to country offices involved in the Global Programme to End Child Marriage and the Joint Programme to Eliminate FGM. The initiative links international evaluation experts directly to country offices, offering hands-on technical assistance and streamlining knowledge production processes. One interviewee reflected: 'We already have an international consultant in the STAR initiative. She guides the national consultant. Secondly, each international consultant is linked with one of the countries, so they are hands-on and part of key meetings. This

has really worked’ (IN12). Another justified the approach noting: ‘If the research isn’t good quality, there will be no uptake. And if policy makers aren’t engaged since the conceptualization phase, there will be no uptake. It’s the evidence users who need to be demanding the evidence’ (IN31). The co-creation model was seen as a viable means to bridge research and practice. As one interviewee pointed out: ‘Advocacy people are not researchers by training. They may mix up evidence, especially when talking about causality versus correlation. That’s why researchers and advocacy people need to work together’ (IN31). By distributing power and accountability, co-creation fostered shared responsibility and leveraged complementary capacities. It offers to some extent a more inclusive, sustainable, and scalable approach, combining cost-sharing, technical expertise, and broad stakeholder engagement.

However, one can question the extent to which knowledge hubs genuinely embody co-creation. In other sectors – such as healthcare – patients and patient associations actively contribute to data collection, mobilize resources, and even co-author scientific publications (Rabeharisoa and Callon, 2004). Are communities similarly engaged in generating knowledge on how to best eradicate harmful practices? While global programmes bring together a diverse array of public and private actors to foster creative problem-solving, the degree to which marginalized voices are meaningfully included warrants closer examination. Co-creation holds significant potential to enhance programme effectiveness and sustainability by distributing power, fostering ownership, and leveraging complementary expertise. Yet, as Livaha (2024) notes, challenges persist – particularly in ensuring the involvement of grassroots actors and community mobilizations, whose insights are often underrepresented.

Trade-offs and governance dilemmas

These three cases reveal the broader governance dilemmas at play in shaping knowledge hubs. Centralizing knowledge transfer, as seen in the FGM Programme, concentrates power and accountability within UN agencies, but requires substantial internal capacity and often limits stakeholder engagement. Outsourcing knowledge transfer, as the GBSS Programme initially attempted, can enhance stakeholder engagement but sacrifices control and raises concerns about quality and sustainability. Co-creation, exemplified by the Child Marriage Programme, distributes power and accountability more evenly and fosters high engagement, but requires careful coordination and trust-building among diverse actors. The inherent trade-offs of these approaches are summarized in Table 3.3.

Framing these approaches through a ‘Knowledge Transfer Traffic Light’, one could observe: outsourcing (localization) proved ineffective in the GBSS

Table 3.3: Trade-offs across three modes of governance of knowledge hubs

Mode of governance	Power and accountability of global programmes	Stakeholder engagement	Capacity and resources
Localization (outsourcing)	Low	High	Requires external capacity and co-funding
Centralization (in-house)	High	Low	Resource-intensive, requires internal capacity
Co-creation (partnerships)	Shared	High	Cost-sharing, complementary capacities

Source: Compiled by the author

case (red light); centralization ensured control but limited accessibility in the FGM Programme (yellow light); and co-creation fostered productive collaboration in the child marriage context (green light). Importantly, this traffic light framework emerged inductively from the empirical data and is not intended to rigidly classify one model as universally superior. Each approach offers distinct advantages and limitations, shaped by the programme's objectives, institutional strengths, and political context. As one key informant aptly summarized, 'I don't think any of the programmes has cracked this, because the way we all use knowledge is just so ad hoc and unstructured' (IN11). Yet, co-creation appears to hold the greatest promise for building and maintaining knowledge hubs. In practice, many UN agencies adopt blended strategies, combining elements of centralization, localization, and co-creation to adapt to evolving circumstances and capacities. There is also a notable push to make knowledge available to the broader public (see [Box 3.6](#) for further examples).

Box 3.6: Knowledge hubs as connecting sites

Several examples of knowledge hubs are listed below:

- UNICEF recently launched an E-Learning Course on Harmful Practices Data, presented during the 2025 CSW69 as a 'global hub for learning'. This self-paced, publicly accessible course is designed to build capacity among practitioners in data collection, interpretation, and visualization. The course is available at: <https://agora.unicef.org>. While open to UN staff, implementing partners, and interested individuals, its technocratic focus may limit accessibility for grassroots actors. Tellingly, its title evokes the metaphor of the 'global agora' coined by [Stone \(2013\)](#) – a public sphere of knowledge exchange that, in practice, often remains gated or highly specialized.

- UNFPA's kNowVAWdata initiative, co-created with the University of Melbourne, includes a dedicated knowledge hub with open access resources for strengthening regional and national capacity to measure violence against women in Asia and the Pacific (<https://knowvawdata.com/>). UNFPA also strongly invests in localizing knowledge. This is highlighted in the 2023 Annual Report of the Joint Programme to Eliminate FGM, which emphasizes addressing global challenges with local solutions by engaging women-led grassroots initiatives (UNFPA, 2024), as well as in UNFPA's 2022–25 Strategic Plan (UNFPA, 2022).
- UNESCO hosts the Teacher Task Force (TTF), a global initiative with over 170 partners, including member states, UN agencies, and international NGOs. It offers a publicly accessible knowledge hub where members cocreate content following agreed-upon curation guidelines.
- UNODC, under the Global Programme to End Violence Against Children, supports data and evidence collection while tailoring knowledge sharing to local specificities, taking into account security concerns and confidentiality.
- The Global Alliance for Social and Behaviour Change – which includes UNICEF, UNFPA, and other development partners – invested in a comprehensive, web-based impact database to facilitate internal knowledge sharing on rigorously evaluated social and behaviour change initiatives worldwide. Originally developed by Johns Hopkins University, the platform proved to be resource-intensive and faced challenges in long-term maintenance and regular updates.

Source: Compiled by the author

These examples illustrate three prominent ways of ‘governing’ knowledge transfer:

1. Localization: Regional or local hubs foster ownership but may struggle with quality assurance and sustainability.
2. Centralization: Internal, agency-led hubs provide structured knowledge management but are resource-intensive and can limit public accessibility.
3. Co-creation: Collaborative models developed with key partners tend to be more effective in promoting knowledge uptake and long-term engagement.

In all their varied forms, these knowledge hubs represent contested spaces – connecting sites in Latourian terms – where power, accountability, and participation are continuously negotiated. Their success depends not only on technical design but also on balancing control with openness, and institutional objectives with the diverse needs of knowledge users. Ultimately, these connecting sites become useful, when they effectively enrol and mobilize members to put their knowledge into practice.

Global programme comparison: six ‘success’ factors

This section offers a comparative analysis of the three global gender programmes under investigation: Global Programme to End Child Marriage, the Joint Programme to Eliminate FGM, and the Global Programme to Address Gender-Biased Sex Selection. While these initiatives share common objectives and frameworks, their operationalization, governance, and sustainability differ significantly. Later in the chapter, we present key determining factors of international development networks, here adapted to the specific context of global programmes. These factors – *goals, actors, steering effects, interaction, benefits, and sustainability* – are cornerstones for the strategic orientation of such programmes, and serve as what Longmuss (2014, p 3) calls ‘success factors’. They offer a structured framework for understanding the evolution and effectiveness of complex, multi-actor initiatives. Global programmes vary widely in their developmental maturity and composition, which in turn shapes their strategic orientation and performance. As such, the application of these six critical factors varies across cases.

1. **Goals:** The starting point is *what the global programmes aim to achieve*. This encompasses both overarching normative principles and the specific objectives pursued by different actors within the network. Aligning these levels of ambition is crucial for coherence and direction.
2. **Actors:** Next is the question, ‘*Are the right people and organizations involved?*’ The programme’s success depends on the participation and integration of all relevant stakeholders required to achieve the stated goals.
3. **Steering effects:** Effective and attentive *programme management* is a third pillar. This goes beyond routine coordination and includes strategic leadership capable of navigating political complexity, fostering collaboration, and adapting to change.
4. **Interaction:** A fourth factor relates to *how well actors work together*. Constructive and goal-oriented collaboration shapes the internal dynamics of the programme – its culture, trust, and collective problem-solving capacity.
5. **Benefits:** The fifth dimension examines *whether the intended outcomes are being achieved*. While anticipated benefits initially shape the programme’s size, reach, and funding, it is crucial that the programme subsequently provides evidence – through monitoring and evaluation (M&E) – of its social and political impacts, as well as the tangible benefits delivered to the target populations.
6. **Sustainability:** Finally, a key element is *whether the programme can operate in the long term*. Sustainability reflects both institutional stability and the enduring relevance of the programme’s objectives.

Ultimately, these six factors are interlinked, and knowledge transfer plays a key role in each of them. In the following part, we review each of these six pillars in the context of the selected global programmes. We explore commonalities and divergences across cases and demonstrate how the interplay between these factors has contributed to relative success – or revealed critical shortcomings.

Goals: a common vision of gender equality

At the heart of all three global programmes lies a unified commitment to advancing gender equality through the elimination of harmful practices. Despite their varying operational contexts, and resources, these programmes converge around a common strategic vision: tackling the root causes of gender-based discrimination by targeting social norms and behaviours that sustain practices such as child marriage, female genital mutilation, and gender-biased sex selection. As one interviewee summarized: ‘We are all working towards a goal, which is eliminating these harmful practices. You cannot separate them from each other. It has to do with the social norms, either child marriage, FGM, or son preference. Unfortunately, all of them fall in one package’ (IN10). What unites the programmes is their emphasis on social and behaviour change. This shared focus on shifting gendered norms is central to the theory of change that underpins each initiative (UNICEF and UNFPA, 2022a, 2023). Another interviewee reflected: ‘Social norms, and behaviour change – we all are working on eradicating the inequality, the behaviour, the ideas, the reasons behind harmful practices that we have, which is common to all programmes’ (IN12). In practical terms, this shared goal translates into similar strategic interventions. Each programme, within its capacity, directs resources toward knowledge production, advocacy, and multi-level stakeholder engagement. They prioritize evidence-based policies and interventions, operate through multi-stakeholder partnerships, and apply comparable frameworks for addressing social norms. Core activities across all three programmes reflect these common goals (UNFPA, 2020a; UNFPA and UNICEF, 2021). They include:

- promoting legal and policy reforms;
- supporting community-based education and dialogue initiatives;
- strengthening links between harmful practice prevention and sexual and reproductive health services, as well as child protection systems;
- launching mass communication efforts to reshape societal expectations;
- implementing targeted interventions with girls, adolescents, youth, men and boys;
- facilitating technical exchanges with governments, NGOs, service providers, and local leaders;

- participating in regional political initiatives to galvanize momentum against harmful practices.

Moreover, the programmes share a common understanding of the risks involved in working within the sensitive terrain of gender norms. A key concern across the programmes is the risk of backlash, particularly when legal reforms outpace societal acceptance. As one expert warned: ‘Laws drive practices underground, and when legislation changes before norms, then you set up tension that can have powerful consequences. In that sense, bans are similar across the three interventions’ (IN11). To navigate these risks, the programmes have adopted human-rights-based approaches that prioritize the lived experiences and needs of women and girls. As one interviewee explained: ‘The reason for framing these [practices] as a gender issue is from a human rights-based approach’ (IN06). This framing enables a more community-anchored mode of engagement, moving beyond legal instruments alone. During my interviews, I encountered passionate human rights advocates from across the globe who are deeply committed to advancing this shared vision. One advocate and Joint Programme representative from Yemen shared:

Most women [in my country] are illiterate. I know what knowledge means for people who don’t know about it, or who have never heard about the issue. It makes a big difference. It is like a light in the dark. I’d like to be that candle for some people, by spreading and disseminating knowledge – not just for FGM, but for all harmful practices that undermine or violate the human rights of girls and women around the globe. (IN10)

This common vision across programmes is grounded in a collective recognition of the structural nature of harmful practices and the necessity for long-term, norm-shifting, and community-centred strategies to eliminate them.

Actors: maturity and mobilization

The three global programmes demonstrate significant variation in their actor constellations, maturity, and the extent to which they have successfully mobilized stakeholders. These differences have had a marked impact on each programme’s ability to generate momentum, secure legitimacy, and drive change. In terms of institutional maturity, the Joint Programme to Eliminate FGM was generally perceived as more established, benefiting from a longer history of engagement. The Global Programme to Address Gender-Biased Sex Selection, by contrast, was the least mature, as it relied

exclusively on UNFPA's support and faced greater challenges in building a broad coalition of partners: 'The FGM Programme was much more mature. The Child Marriage Programme was born almost at the same time [as the GBSS Programme]. But UNICEF had a much stronger role to play ... Regarding sex selection, we [UNFPA] were the only agency working on that' (IN08). The depth and breadth of actor mobilization also differ sharply across programmes. Both the FGM and Child Marriage Programmes benefit from long-standing research agendas, active academic networks, and well-established NGOs advocating for the elimination of these practices. This contrasts with the GBSS Programme, which had to build its partner ecosystem 'from scratch' and struggled with low engagement due to the politically sensitive association with abortion: 'You have much stronger NGOs [for FGM and child marriage]. In the case of sex selection, it was extremely difficult to find the researchers. [...] We had to build from scratch the whole thing' (IN08). 'You can't get anybody else to work on GBSS seriously because of abortion' (IN11).

Interviewees consistently noted that the enrolment of countries into global programmes was primarily driven by *prevalence data* – that is, the number of women and girls affected by a particular harmful practice (IN11, IN12, IN13, IN14, IN15). However, in practice, inclusion was not always straightforward. Political sensitivities and differing interpretations of risk sometimes complicated country participation, revealing how geopolitical and institutional dynamics shape programme compositions. For example, Indonesia's initial exclusion from the Joint Programme to Eliminate FGM illustrates how politics can override epidemiological logic (Indonesia has the third highest rate of FGM after Egypt and Ethiopia). Despite documentation of FGM (Dawson et al, 2020), Indonesia and Malaysia resisted inclusion, objecting to being associated with African nations where the practice is more widely recognized. As one interviewee explained: 'Indonesia and Malaysia do not accept. They do not want to be compared to Africa' (IN11). The respondent continued: 'Indonesia refused to be included in the FGM Programme, and UNFPA had to work very, very carefully in Indonesia to address it' (IN11). The Joint Programme documented this 'careful work' in a recent publication titled *One Decade of Indonesia's Efforts in Eradication of the Practice of FGM/C: The Experience of UNFPA's Working Partners* (Marcoes, 2023).

Indonesia's eventual decision to join the programme in 2024 marked a turning point – both symbolically and strategically. It signalled the expansion of what was previously seen as an Africa- and Middle East-focused initiative into Asia, enhancing the programme's visibility and legitimacy as a *global* effort. In contrast, the inclusion of Bangladesh in the Global Programme to Address Gender-Biased Sex Selection (GBSS) sparked debate. Unlike other participating countries, Bangladesh is not widely recognized as

having a significant issue with sex selection. One interviewee described this decision as the result of ‘different interpretations’ of the problem and an attempt to include ‘at-risk countries’, raising questions about consistency in country selection: ‘Bangladesh in the GBSS Programme is an accident of different interpretations ... perhaps an approach we’ve been taking in GBSS to look at the at-risk countries’ (IN11). Knowledge production played a pivotal role in justifying Bangladesh’s inclusion. As another interviewee explained:

In Bangladesh, we didn’t know if the practice was established. We had some indicators, we had some information, but it hadn’t necessarily been validated through the production of knowledge. Bangladesh was part of the programme in terms of conducting the research to find out if the practice was there. That was a prerequisite to becoming a full member of the programme. (IN08)

This contrast reveals a key tension in global gender programming: while prevalence data often guides decisions about country inclusion, it may be overridden – or complicated – by donor strategies, anticipatory governance approaches, or broader political considerations. These cases illustrate that country enrolment is not a purely technical process based on data but a negotiated one shaped by political will, institutional narratives, and strategic priorities.

Interaction: a balancing act

Interaction within and across the three global programmes reveals important dynamics about how partnerships are formed and maintained. While all programmes involve multiple actors working toward a shared goal, the *depth* and *quality* of interaction differ considerably – both between agencies and within the broader actor landscape. The Global Programme to End Child Marriage and the Joint Programme to Eliminate FGM are joint initiatives between UNFPA and UNICEF. However, the institutional setup differed across agencies. At UNICEF, both programmes are managed by the same staff member, which facilitates stronger internal coordination: ‘You can really see that the links are much stronger between the Global Programme to End Child Marriage and the Joint Programme to Eliminate FGM within UNICEF, than they are within UNFPA’ (IN13). Coordination extends to implementation at the country level, where shared personnel enable synergies: ‘In many countries, it is the same staff implementing both Global Programmes. The two programmes are very close’ (IN14). Beyond the UN system, both programmes benefit from active networks of CSOs. These actors – often with long-standing mandates and deep-rooted

community ties – engage with the global programmes at strategic points while maintaining their autonomy: ‘CSO partners have their own entities and life. That is much beyond us, which is the way it should be. You have separate constituencies that come together at certain points’ (IN21). This independence was also visible in the social network analysis presented earlier.

In contrast, the Global Programme to Address Gender-Biased Sex Selection (GBSS) faced greater challenges in building and sustaining collaborative structures. Moreover, the topic lacked internal visibility and institutional support within UNFPA: ‘We should invest more in building internal capacity at the UNFPA headquarters itself’ (IN06). These challenges were compounded by a smaller team, limited budget (discussed later), and a lack of senior-level advocates for the programme within the organization. While the programme eventually partnered with an NGO in Turkey for South–South and Triangular Cooperation, this process was delayed and tensions emerged within coordination mechanisms. One member of the IRM described persistent friction with the global programme coordinator: ‘It was very difficult to work with that person, to understand the requests ... sometimes they also fight with each other. And sometimes as the interregional mechanism, we are caught in the middle’ (IN02).

Some of these tensions go beyond personal frictions and reflect the complexity of transnational cooperation. Differences in cultural and linguistic backgrounds can create misunderstandings and hinder collaboration. Language, in particular, was cited as a recurring barrier: ‘Language is a big one. We have countries that primarily speak Portuguese, French, or Arabic ... Communication with everyone is really important’ (IN31). Moreover, in sensitive contexts, language must be carefully calibrated. For example: ‘In the FGM Programme ... in the MENA region, we cannot really talk about bodily autonomy and sexual empowerment, or anything that can be interpreted in a language that might not align with the culture’ (IN16). Effective communication also plays a crucial role in knowledge sharing and visibility. Programmes with greater institutional backing are more likely to produce high-quality outputs. As one interviewee explained:

The FGM and Child Marriage Programme have a lot of people. When they produce a report, they produce a report to be published ... We need to be accountable for donors, but we don’t really have the capacity right now to make the report into something that can be published. (IN07)

Ironically, the Global Programme to End Child Marriage (and to a lesser extent the Joint Programme to Eliminate FGM) faced a different challenge – communication overload. Regular newsletters and updates were appreciated

but occasionally overwhelming: ‘Sometimes it’s too much, but we do get a newsletter and an email which summarizes the information. That has really worked, because I don’t have the time’ (IN12). Time constraints limit the capacity to absorb knowledge:

There is a lack of time and attention to read and absorb knowledge. The production of knowledge goes very fast, particularly in the US, with a strong competition between universities, and also UN agencies and INGOs. And unfortunately, there is not enough time to take stock, reflect and translate it into action. (IN24)

Striking the right balance in interaction, coordination, and communication remains a persistent challenge. Time pressures affect the ability to absorb and genuinely ‘learn’ from knowledge being disseminated. The two bigger Global Programmes benefited from stronger and more consistent interaction structures, while the Global Programme to Address GBSS illustrated how interpersonal dynamics and institutional investment critically shape transnational cooperation.

Steering effects: management, monitoring, and documentation

Effective steering – understood as the structures, mechanisms, and practices through which programmes are managed, monitored, and held accountable – is a critical determinant of their strategic direction and institutional credibility. Among the three global programmes examined, clear differences emerge in the robustness of their steering effects, particularly in relation to management structures, monitoring and evaluation (M&E) practices, and donor engagement. Unsurprisingly, the more established programmes (FGM and child marriage) exhibit more advanced management systems and formalized governance structures. Both programmes benefit from long-standing coordination between UNFPA and UNICEF, which has helped institutionalize regular steering committee meetings, annual reporting cycles, and accountability mechanisms to donors and implementing partners: ‘The Joint Programme to Eliminate FGM ... had the steering committee, and it was very organized [with] meetings twice a year. It has a much broader donor base and it needs to report back to them and engage them with field visits as needed’ (IN13).

In contrast, the Global Programme to Address GBSS was slower to develop similar mechanisms. Initially operating without a formal steering committee, it lacked structured engagement with donors and missed opportunities to build momentum through strategic visibility: ‘The GBSS Programme has never, for example, organized the round table of donors to present the information, to get the reaction. The two other programmes are doing that

at least two or three times a year' (IN24). The respondent continued, 'The steering committee of the GBSS – it's when I came on board that I created that' (IN24). In the absence of the steering committee, it was the management structure at UNFPA headquarters that 'had the decision-making authority, whereas within the Joint Programme to Eliminate FGM [...] there was a wider structure and accountability' (IN13).

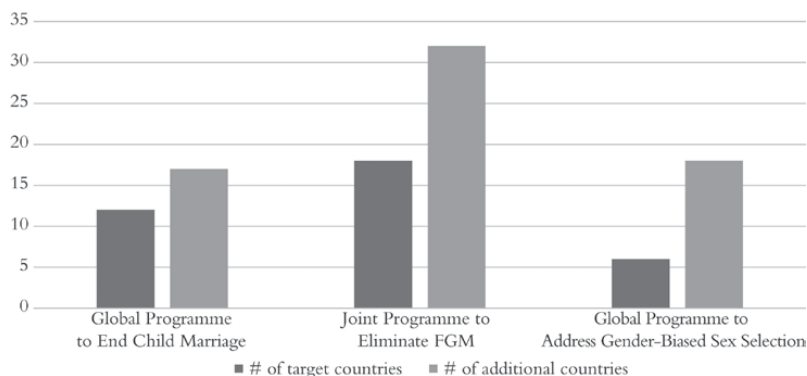
Monitoring and evaluation systems further illustrate the divergence in steering effects. Independent evaluators have noted that the FGM and Child Marriage Programmes possess more rigorous and structured M&E processes. These systems not only support internal learning and donor reporting but also contribute to a growing evidence base about what works – and what does not – when it comes to tackling harmful practices. By contrast, the Global Programme to Address GBSS struggled to generate comparable evidence: 'We have varying degrees of evidence for what works in the three global programmes. I think the evidence is best in child marriage, mixed for FGM, and not strong enough for GBSS' (IN11). Ultimately, the contrast in steering effects across the programmes points to broader issues of accountability. While the FGM and Child Marriage Programmes have built stronger foundations for coordinated management and evidence-based decision-making, the Global Programme to Address Gender-Biased Sex Selection remained in a phase of institutional catch-up, which ultimately linked back to its size and funding.

Benefits: size, reach, funds

Who 'benefits' from these global programmes determines the programme size. Programme size – including geographic reach, staffing, financial resources, and reporting infrastructure – has emerged as a critical factor influencing the implementation and impact of global programmes addressing harmful practices. [Figure 3.13](#) shows the number of target countries and additional countries of reach and influence across the three programmes. A programme's size not only determines operational capacity, but also affects visibility, credibility, and the ability to attract and sustain funding. The Global Programme to Address Gender-Biased Sex Selection is 'obviously the smallest programme of all three harmful practices, and it occurs in fewer countries' (IN13). Unlike FGM and child marriage, which are recognized as widespread issues across multiple regions, sex selection is concentrated in a smaller number of countries. Notably, the two countries with the highest prevalence – China and India – are not part of the programme: 'That makes the whole thing different. The two countries where so much work has happened are still peripheral to the programme' (IN11).

This absence is largely due to donor preferences: many funders, including the EU and Norway, have been unwilling to allocate resources to countries

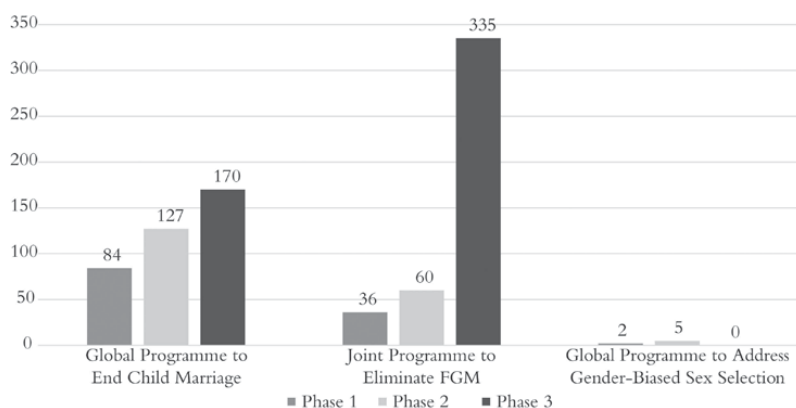
Figure 3.13: Global gender programme target countries and additional countries of influence



they believe should self-finance such efforts. ‘Donors don’t want to give money to China and India. ... That was the position of the EU’ (IN11). In contrast, the other two programmes have significantly broader reach and deeper engagement in high-prevalence countries. While the Child Marriage Programme operates in fewer countries than FGM, it addresses what is the most prevalent of the three harmful practices. The FGM Programme spans with 18 target countries and 32 countries of influence the widest geographical area (see [Figure 3.13](#)).

The vast disparity in funding across the three Global Programmes (see [Figure 3.14](#)) is directly reflected in their institutional capacity, scope, and performance. With cumulative funding of \$431 million across three phases, the Joint Programme to Eliminate FGM leads by a wide margin, followed by the Global Programme to End Child Marriage, which has budgeted \$381 million across its phases. In stark contrast, the Global Programme to Address Gender-Biased Sex Selection has operated with a mere \$7 million in total – spread thinly over two phases. This funding gap has critical implications. The bigger programmes are able to support larger, better-resourced teams at both headquarters and country levels, with established structures for monitoring, evaluation, and reporting (IN07). As a result, they could produce professionally curated reports and communications materials suitable for external publication, advocacy, and donor support. By contrast, the Global Programme to Address GBSS has struggled with limited staff capacity and insufficient resources to meet comparable standards (IN07). [Figure 3.14](#) highlights not just stark funding differences across the three initiatives but also the structural disparities in how harmful practices are prioritized and addressed on the global stage.

In order to show that global programmes reap benefits M&E becomes vital. Yet, evaluation presents a resource-intensive challenge. Especially for

Figure 3.14: Funding across programmes and phases, in million USD

Note: Phases periods differ across programmes. See also [Table 3.1](#).

Source: Compiled by author

small programmes, the cost of rigorous M&E – estimated at 10 per cent of the programme’s overall budget – poses a significant burden: ‘It’s very expensive to do proper monitoring and evaluation. ... That’s a lot. I think the cost is something we face’ (IN07). At the same time, some interviewees pointed out that smaller size can bring certain advantages. With only six implementing countries formally participating in GBSS, the programme has established a relatively clear results framework and country-level M&E systems that contribute to centralized tracking and learning: ‘There’s a system, a structure in place for understanding what’s happening in any given country. ... In many ways, I feel like GBSS is much less challenging’ (IN09).

The small scale comes at a cost: *visibility*. Unlike FGM and child marriage, which benefit from long-standing international attention, GBSS remains a lesser-known issue – due in part to its omission from the SDGs and conceptual complexity: ‘It probably hasn’t had a very high level of visibility... GBSS is more recent. FGM and child marriage are much easier to see’ (IN09). ‘It’s just a tougher sell. ... Low literacy on GBSS, low public awareness, low ability to sell it to public, low funding – thus less work on it’ (IN21). Ultimately, size shapes every aspect of a global programme’s functioning – from partner engagement and donor interest to M&E practices and public perception. While the smaller footprint of GBSS offers certain operational benefits, it also limits the programme’s global presence and hinders its potential to scale.

Sustainability: time horizons, stability, and continuity

Sustainability – defined here as the long-term viability, stability, and institutional anchoring of global programmes – is a critical measure of

success. It encompasses not only the availability of financial resources but also programme planning horizons, staff continuity, and alignment with broader policy frameworks such as the SDGs. Among the three Global Programmes examined, sustainability emerged as a key differentiator in programme performance and strategic planning. FGM and child marriage are issue areas aligned with SDG target 5.3, which calls for the elimination of harmful practices by 2030. This alignment has been instrumental in mobilizing multi-year funding, building long-term strategies, and securing donor confidence. Both programmes are currently funded through 2030 and are embedded within broader global development agendas, giving them greater institutional weight and predictability.

In contrast, the Global Programme to Address Gender-Biased Sex Selection faced repeated challenges regarding its long-term sustainability. Its shorter programme cycles – three years per phase – generated uncertainty among implementers and hindered strategic planning: ‘For GBSS, we didn’t even know whether or not there would be a second phase when the first was ongoing... Compared to the Child Marriage Programme, which had a 12-year plan, the security and comfort we have [in child marriage] is because we know there’s a next phase’ (IN12). *Financial stability* was a persistent concern for stakeholders involved in the Global Programme to Address GBSS. Without guaranteed long-term funding, programmes were unable to hire permanent staff or plan beyond short-term cycles. ‘There was no stability in the funding, and no sustainability ... You’re not sure if next year you’ll have funding to support that staff’ (IN24). In contrast, the FGM and Child Marriage Programmes offered a more stable institutional environment, which allowed for stronger staffing, programme continuity, and long-term planning. Sustainability across the programmes is closely tied to long-term funding commitments, integration into global development agendas, and institutional stability. While the FGM and Child Marriage cases exhibit strong foundations in this regard, the GBSS Programme illustrates the risks of underinvestment, short funding cycles, and fragmented planning – particularly for emerging or politically sensitive issues that lack the same global recognition or donor appeal.

The analysis of the six success factors – goals, actors, interaction, steering, size, and sustainability – reveals how deeply interconnected these dimensions are in shaping the trajectory of global programmes. Programmes with clearly defined goals, a wide ranging actor base, robust interaction mechanisms, and strong steering structures were more likely to attract sustained funding, extend their reach, and maintain institutional continuity. In contrast, where actor-networks were limited, funding scarce, and internal coordination weak, these constraints compounded over time, leading to lower visibility, reduced influence, and ultimately, programmatic discontinuation. The dynamics across these factors underscore a self-reinforcing cycle. The visibility and global attention enjoyed by the FGM and Child Marriage

Programmes – reinforced through SDG 5.3 framing – has generated greater political support, more resources, stronger internal capacity, and sustained investments in research and knowledge uptake.

Conversely, a lack of scale, visibility, or donor interest can hinder programme sustainability. While the three programmes share overarching objectives and face common challenges inherent in shifting harmful norms, their distinct trajectories in terms of governance, partnerships, funding, and knowledge systems offer critical lessons. Understanding how these factors interact – how visibility, resources, and institutional design shape the effectiveness and sustainability of global gender programmes – is essential for future programme design and knowledge transfer strategies.

Conclusion: a web of attachments

This chapter began with the words of UNFPA Executive Director Dr Natalia Kanem, who reminds us that it takes knowledge, international norms, and collective will to challenge and ultimately dismantle harmful practices. But what does it mean to be ‘armed with knowledge’? This chapter investigated that question through a deep dive into the architecture of global gender programmes – how knowledge is produced, translated, shared, and institutionalized across transnational actor-networks.

Drawing on ANT, we analysed the formation, stabilization, and fragility of global programmes addressing child marriage, female genital mutilation, and gender-biased sex selection. In line with Latour’s (2005) *sociology of associations*, these networks are not composed solely of people and institutions, but of heterogeneous ‘actants’ – including data systems, digital platforms, funding flows, legal frameworks, and political discourses. We followed Latour’s three moves of localizing the global, redistributing the local, and connecting sites. In localizing the global, the chapter highlighted the role of the translation process (Callon, 1984) in shaping global programmes: from constructing global *problems*, creating *interest* through best practices, *enrolling* stakeholders, to *mobilizing* collective knowledge to sustain initiatives. It examined contestations – particularly around abortion – and traced how certain forms of knowledge can become dominant, politicized, and competitive over time and across programmes. In redistributing the local, we identified diverse actors engaged in transnational knowledge transfer and illustrated shifting local redistributions, drawing from social network analysis. In connecting sites, we analysed governance structures around knowledge transfer – localization, centralization, and co-creation – and investigated factors that facilitate or hinder transfer, paying particular attention to the ‘knowledge hubs’. Finally, the chapter compared the three global programmes.

The comparative analysis of the three global programmes revealed key differences in how they build and sustain actor-networks. The FGM and

Child Marriage Programmes benefitted from broader reach, more consistent funding, larger teams, and stronger institutional memory. These attributes allowed them to develop more resilient and far-reaching knowledge and governance structures. By contrast, the GBSS Programme, smaller in scale and more politically sensitive, struggled to form enduring attachments. Its limited funding, narrow country presence, and weak donor engagement made it harder to mobilize knowledge, generate visibility, and sustain momentum. As the ‘slime glue’ metaphor suggests, global programmes are held together not by rigid structures but by a flexible and sticky web of attachments. The more an actor is connected – to policies, communities, financial flows, legal instruments, and data systems – the more durable and influential the network becomes. This fragility–resilience spectrum was evident across all six success factors discussed in this chapter: shared goals, actor mobilization, interaction, steering, size and reach, and sustainability. These dimensions do not function in isolation but form a tightly interwoven system. Strong programme goals attracted actors and funding. Broader actor-networks fostered better coordination and richer knowledge flows. Larger scale enabled stronger governance and long-term planning. Conversely, when one element was weak – such as limited funding or narrow partnerships – other pillars began to falter, often resulting in fragmentation or discontinuation, as seen in the case of GBSS. Crucially, this analysis highlights the role of knowledge not only as a tool for implementation but as a political resource. The ways in which knowledge is generated, framed, and shared influence which issues receive funding, who is included in decision-making, and which interventions are seen as legitimate or urgent.

Applying ANT to the analysis of global gender programmes offers valuable insights into the actors, networks, and governance structures shaping knowledge transfer in a globalized world. First, ANT’s science and technology lens allows us to account for both human and non-human actors – UN agencies, NGOs, digital platforms, data, and indicators – thereby, ‘rethinking agency’ (Braun, Schindler, and Wille, 2019). It enables what Sismondo (2010, p 85) calls ‘a dramatic expansion of the social world’ into new alignments of forces (see also Latour, 1999). Second, ANT’s empirical strength lies in its tradition of ‘empirically dense qualitative case studies’ (Passoth and Rowland, 2010, p 826) and its openness for diverse research methods. Third, as Peucker (2010) and Bueger and Stockbruegger (2018) emphasize, ANT traces how actor-networks are formed, stabilized, and dissolve over time – in our case this offered a detailed understanding into knowledge flows and blockages. Finally, this chapter situates these findings within broader scholarly debates on knowledge production and transfer in international organizations (Evers, Gerke, and Menkhoff, 2010; Littoz-Monnet, 2017). It offers fresh insights into the mechanics and politics of transnational knowledge transfer going beyond the prevailing models (Svenson, 2016).

Monitoring and Evaluation (M&E) becomes paramount – not only as a tool for accountability but as a strategic mechanism for making the case for continuation, adaptation, and scaling. As one interviewee put it: ‘There’s so much funding that goes into these programmes. But then, there’s also high expectations’ (IN31). The [next chapter](#) turns to M&E practices across the global programmes to explore to what extent evaluation supports institutional learning, enables cross-programmatic synergies, and ultimately helps global programmes steer toward their goal of eliminating harmful practices.

Measuring the Immeasurable? Global Efforts to Evaluate Harm

Global programmes play a crucial role in addressing transnational issues and establishing common norms and policy agendas for delivering global public goods (Stone and Ladi, 2015; Kaul, 2016; Ocampo, 2016; Stone and Moloney, 2019). These programmes, characterized by their multi-stakeholder, multi-level, and multi-sectoral nature, hold great promise (Glasbergen, Biermann, and Mol, 2007). However, their effectiveness in achieving their goals remains a key question (McQueen and Jones, 2007; Andonova, Faul, and Piselli, 2022). Previous studies have highlighted the need for comprehensive evaluations of these programmes (Heymann et al, 2019; Wessal and Wescott, 2019). This chapter aims to address this gap by examining the monitoring and evaluation of global programmes, focusing on three case studies of gender programmes implemented by the United Nations Population Fund (UNFPA) and the United Nations Children's Fund (UNICEF) that seek to eliminate harmful practices by 2030 in line with the Sustainable Development Agenda (SDG, target 5.3). While ambitious in scope and often well-resourced, these programmes face a recurring challenge – their ability to demonstrate clear, measurable added value. Are they delivering on their promise of ending harmful practices, or are they falling short? As Wessal and Wescott (2019, p 529) observed, ‘addressing M&E is important for understanding the overlapping jurisdictions, unclear delegation chains, and the challenges of mediating between different stakeholders that characterize these evolving examples of global policy making and transnational administration’. Despite the proliferation of indicators, frameworks, and evaluation efforts, much ambiguity persists regarding the performance¹ of global programmes.

¹ Lall (2017, p 257) offers a useful lens to assess the performance of international organization, proposing a framework based on three dimensions: ‘(1) the achievement of

Several factors have contributed to the knowledge gap in academic literature. First, the inclination towards ‘methodological nationalism’ has led to research focus on specific contexts within national boundaries (Stone, 2019), overlooking large-scale transnational programmes. Additionally, obtaining comprehensive, reliable, and timely data from multiple countries poses a challenge. While there is a noticeable rise in the use of indicators as evaluation ‘tools’ and ‘technologies of global governance’ (Davis, Kingsbury, and Merry, 2012), concerns about data availability, quality, and comparability across regions hinder assessments (Cookson et al, 2026). The complexity inherent in global programmes, with their multiple actors, levels, sectors, and interdependencies, further compounds the conceptual, theoretical, and methodological challenges of such evaluation (Edwards Jr, 2018; Zelli, Gerrits, and Möller, 2020). Lastly, conducting evaluations at a global scale requires significant time, funding, and collaboration among researchers, policy makers, and implementing organizations.

Although academic literature has relatively neglected global programme evaluations, they are routinely conducted by international organizations, development agencies, and partners as part of the evidence-based approach to international development. Four waves in the use of evidence in international development have been identified (White, 2019): the rise of results frameworks in the 1990s, the growing demand for impact evaluations (including randomized controlled trials) since the 2000s, the proliferation of systematic reviews (outside health domain) after 2008, and more recently the push for knowledge translation or knowledge brokering (White, 2019; see also Stone et al, 2020). However, rigorous impact evaluations, particularly in gender programming, remain rare.

In 2023, halfway to the 2030 Sustainable Development Goals, the Evaluation Offices of several United Nations (UN) agencies jointly conducted an inter-agency synthesis of UN system-wide evaluations related to SDG 5 Gender Equality (UN Women, 2024a). I had the opportunity to form part of the reference group of the evaluation synthesis team. The mapping report identified a total of 549 (out of a pool of approx. 11,700) evaluations in databases of 54 UN agencies. Of these, 80 evaluations had a global focus, 77 covered harmful practices (SDG 5.3), and only 6 were impact evaluations ‘with scientific designs including counterfactuals ... limiting the rigour of the evidence available to draw conclusions about intervention impact’ (UN Women, 2024a, p 18). Indeed, the effectiveness

stated objectives; (2) cost-effectiveness; and (3) responsiveness to a wide range of (public and private) stakeholders’. Although developed in relation to international organizations, this framework provides a compelling way to interrogate global programmes: Do they reach their goals in a cost-efficient manner, while remaining attentive to the diverse actors involved?

of interventions to prevent harmful practices remains poorly understood (Rahm, 2019a; Malhotra and Elnakib, 2021; Plesons et al, 2021; Matanda and Lwanga-Walgwe, 2022; Matanda et al, 2023).

This raises important questions: how are global gender programmes evaluated? What are the related pitfalls in assessing their impact? The chapter addresses these questions to identify key challenges in evaluating global programmes by focusing on three case studies of global programmes implemented by UNFPA and UNICEF to prevent harmful practices. It provides insights into the accountability mechanism of global programmes. By exploring the functioning and efficacy of global programmes, this research aims to contribute to a broader understanding of global governance and transnational policy processes (Stone and Ladi, 2015; Stone and Moloney, 2019).

The chapter addresses not only the technical architecture of monitoring and evaluation systems but also the deeper conceptual and methodological issues that undermine attribution and accountability. The remainder of this chapter is organized as follows. First, it reviews the key global frameworks and indicators developed to monitor and evaluate progress. Second, it examines the inherent difficulty of isolating causal links between global programmes and observed reductions in harmful practices. We theorize how the complexity of actors and levels, dynamic interactions and spillover effects, contextual factors, and time lags complicate clear attribution of outcomes. To illustrate the proposed model, we draw on insights from in-depth interviews. Third, we present an empirical difference-in-difference analysis of the Global Programme to End Child Marriage, illustrating one methodological approach to addressing the attribution problem – along with its inherent limitations. Finally, we situate current M&E findings in the broader socio-political landscape, considering how overlapping crises – ranging from conflicts, climate change, COVID-19 pandemic – threaten to reverse progress and expose the fragility of gains achieved. The chapter argues that without strengthening evaluation mechanisms and addressing systemic challenges, the promise of ending harmful practices will remain elusive. Evaluation, as Duflo (2004, p 342) coined it, is not just an accountability tool but a strategic investment for international agencies, ‘an opportunity to leverage the impact of their programs well beyond their ability to finance them’.

Global M&E frameworks on child marriage, FGM, and gender-biased sex selection

All three global programmes – despite their different histories, sizes, and resource levels – have made efforts to strengthen their M&E systems (Rahm, 2019b; UNICEF and UNFPA, 2022a, 2023). This typically begins with

formative research or situational analysis, which provides the foundational context and justifies the programme's strategic focus. As co-financed instruments of international development cooperation, the programmes rely on detailed planning documents outlining the national or regional situation of harmful practices. These early assessments are essential for generating donor commitment and tailoring interventions to the socio-cultural, economic, and political specificities of implementation settings, including those affected by conflict or humanitarian crises (European Union, 2015a, 2015b, 2015c). The next step is the development of a theory of change (ToC). These ToCs articulate the expected pathways of change – how shifts in knowledge, attitudes, and behaviours related to harmful practices will lead to longer-term impacts. They make explicit the causal assumptions that underpin the intervention at each stage from the individual, household, community, national, regional, and global levels, explaining 'how and why a program or policy is thought to work' (Lawless et al, 2017, p 512). Crucially, these theories guide programme implementation and M&E design, informing the results framework (logframe) matrices that align goals, indicators, and methods of measurement. Box 4.1 illustrates how the Joint Programme to Eliminate FGM articulates its ToC.

Box 4.1: Theory of change of Phase IV of the Joint Programme to Eliminate FGM

The Joint Programme's theory of change (ToC) for the 2022–30 period is anchored in the global commitment to end female genital mutilation (FGM) by 2030. It envisions the 'emergence of new and more equitable social norms transforming all harmful practices that drive FGM and gender inequality' (UNICEF and UNFPA, 2022a, p 43). This vision is aligned with the Sustainable Development Goals (SDGs), particularly SDG 5 on gender equality, with a specific focus on targets 5.2 (eliminating violence against women and girls), 5.3 (eliminating harmful practices), 5.6 (ensuring universal access to sexual and reproductive health and rights), and 5.c (adopting and strengthening sound policies and enforceable legislation for gender equality). At its core, the ToC identifies a series of interconnected outcomes across short-, medium-, and long-term horizons. The desired long-term outcome is the transformation of harmful social norms and the establishment of equitable alternatives that support girls' and women's rights and bodily autonomy. This outcome rests on a set of medium-term changes, including the empowerment of women and girls to claim their rights, the availability of comprehensive, high-quality, and inclusive services, and increased accountability from governments and other duty bearers in the resourcing and implementation of multisectoral responses to FGM. In the short term, the ToC emphasizes the need for increased knowledge, agency, and voice among women and girls, alongside stronger family and community engagement to shift social norms, and more responsive and integrated service systems across health,

education, social protection, child protection, and justice sectors. To achieve these outcomes, the Joint Programme outlines six strategic pillars. First, it seeks to expand opportunities for women's and girls' agency, by replicating and scaling evidence-based interventions and by leveraging multi-stakeholder interventions. Second, it aims to promote enabling family and community environments, through awareness-raising campaigns and community dialogues. Third, it emphasizes movement building by strengthening alliances and networks across local, national, and global levels, and bridging the humanitarian-development-peace nexus. Fourth, the Programme focuses on strengthening governance through legal reform, policy development, financing, and inclusive accountability mechanisms. Fifth, it prioritizes capacity building among both rights holders and duty bearers, including health and social service providers, through social and behaviour change communication and digital tools. Finally, it underscores the importance of knowledge generation and sharing, supporting governments and civil society in co-creating evidence, generating and using quality data to inform evidence-based planning, policies and programming. The ToC also addresses the underlying structural and contextual factors that drive FGM. These include deeply entrenched gender inequalities, social and cultural norms that normalize the practice, unbalanced power dynamics, weak legal enforcement, and the increasing medicalization of FGM. Compounding these issues are external shocks such as conflict, displacement, and public health crises like the COVID-19 pandemic, which disrupt service delivery and increase girls' vulnerability. Furthermore, women and girls often lack access to information, services, and platforms to exercise voice and decision-making power, particularly in contexts where their rights to bodily integrity are not fully recognized or respected. As such, the Joint Programme's ToC not only identifies the desired impact and outcomes, but also the anticipated pathways, partnerships, and preconditions necessary to achieve them. The ToC serves as both a planning and accountability tool, helping to steer coordinated global efforts toward the elimination of FGM by 2030 (UNICEF and UNFPA, 2022a).

Monitoring and evaluation tools are then designed to support and operationalize the ToC. This includes defining evaluation questions, selecting methodologies, and identifying indicators across different levels of results: outputs, outcomes, and impacts. The Joint Programme to Eliminate FGM developed a compendium of FGM indicators, one of which tracks the number of knowledge-brokering events with policy makers as an indication of whether the produced evidence reaches policy makers (UNFPA and UNICEF, 2020). The Joint Programme also developed in collaboration with Drexel University Dornsife School of Public Policy an M&E framework for measuring social norms change: the so-called ACT Framework (Sood, Kostizak et al, 2020). A stands for *assessing* knowledge, attitudes, and practices and *ascertaining* normative factors; C stands for *considering* context, gender

and power asymmetries, and *collecting* information on social networks and support systems; T stands for *tracking* and *triangulating* data (Sood et al, 2020). Meanwhile, the Global Programme to End Child Marriage followed a more institutional approach to monitoring and evidence uptake by establishing two key mechanisms: (1) the Child Marriage Research to Action Network (CRANK), designed as a ‘knowledge management mechanism’ to track ongoing and upcoming research, monitor trends, and identify persistent and emerging evidence gaps; and (2) the Child Marriage Monitoring Mechanism, aimed at enhancing access to relevant statistical data across multiple indicators and promoting the ‘effective utilization’ of this information for policy and programming (Chalasani et al, 2021, pp 6–7).

Table 4.1 illustrates the performance of output indicators during Phase II (2020–22) of the Global Programme to End Child Marriage. The data reveal remarkable achievements in some areas: For example, Indicator 1211 tracks the number of boys and men, participating in group education/dialogues that address masculinities and gender norms. Results exceeded its target by 409 per cent, with over 11.5 million men and boys engaged, compared to a target of 2.8 million. This suggests a growing mobilization of male allies in the efforts against child marriage. Another example is Indicator 1223: the number of local actors (for example, traditional, religious and community leaders) that participated in dialogues and consensus-building to end child marriage surpassed expectations by 451 per cent, reflecting a growing trend of ‘localization’ and engagement strategies with key community influencers. Meanwhile, Indicator 1222 tracks individuals reached by mass media messaging on child marriage and adolescent rights achieved 177 per cent of its target, reaching nearly 290 million people and highlighting the scale of communication campaigns of global programmes. Lastly, Indicator 2211 assesses the number of partnerships (both formal and informal) established to deliver adolescent-responsive social protection, poverty reduction, and economic empowerment programmes and services. It was reported to have reached 247 per cent of its target. This illustrates the programme’s emphasis on coordination and multi-sectoral collaboration. By contrast, indicators related to school enrolment (Indicator 1121) and civil society mobilization (Indicator 1231) reached only 47 per cent and 54 per cent of their targets, respectively, underscoring the challenges of engagement during the COVID-19 pandemic. Interestingly, the indicators tied to evidence and knowledge generation (Indicators 3211 and 3212) also fell short of their targets, at 72 per cent achievement each. In Actor–Network Theory terms, these numbers become important players for the ‘enactment of accountability policies’ (Piattoeva, 2021, p 511). Adolescents who participate in workshops and men who attend gender equality dialogues become data points. These numbers are not just metrics; they are actants that mobilize further funding, legitimize programme strategies, and enrol new partners.

Table 4.1: Phase II output indicator performance, Global Programme to End Child Marriage (2020–22)

Indicator	Target	Result	Per cent achieved
Indicator 1111: Number of adolescent girls (aged 10–19) who actively participated in life skills or comprehensive sexuality education interventions in programme areas.	13,527,986	13,004,882	96%
Indicator 1121: Number of girls (aged 10–19) supported by the programme to enrol and/or remain in primary or secondary school.	972,713	457,670	47%
Indicator 1211: Number of boys and men actively participating in group education/dialogues that address harmful masculinities and gender norms.	2,829,999	11,573,784	409%
Indicator 1221: Number of individuals (boys, girls, women and men) who participate in group education/dialogue sessions on consequences of and alternatives to child marriage, the rights of adolescent girls, and gender equality.	34,289,195	52,569,918	153%
Indicator 1222: Number of individuals (boys, girls, women and men) reached by mass media (traditional and social media) messaging on child marriage, the rights of adolescent girls and gender equality.	163,178,858	289,296,077	177%
Indicator 1223: Number of local actors (for example, traditional, religious and community leaders) with meaningful participation in dialogues and consensus-building to end child marriage.	261,965	1,182,109	451%
Indicator 1231: Number of civil society organizations newly mobilized in support of challenging social norms and promoting gender equality by the Global Programme.	687	374	54%
Indicator 2121: Number of primary/secondary/non-formal schools in programme areas providing quality gender-friendly education that meets minimum standards.	2,626	4,648	177%
Indicator 2131: Number of service delivery points in programme areas providing quality adolescent-responsive services (health, child protection/gender-based violence) that meet minimum standards.	13,005	15,065	116%
Indicator 2211: Number of partnerships (both formal and informal) established to deliver adolescent-responsive social protection, poverty reduction, and economic empowerment programmes and services.	225	556	247%

Table 4.1: Phase II output indicator performance, Global Programme to End Child Marriage (2020–22) (continued)

Indicator	Target	Result	Per cent achieved
Indicator 3111: Number of policies or legal instruments addressing child marriage drafted, proposed or adopted at national and subnational level with Global Programme support.	211	167	79%
Indicator 3211: Number of [pieces of] generated evidence and knowledge that focus on what works to end child marriage.	137	98	72%
Indicator 3212: Number of generated evidence and knowledge that apply a gender analysis.	121	87	72%
Indicator 3221: Number of South-to-South cooperation (conferences, expert visits, peer consultations, study tours, communities of practice) supported.	44	47	107%

Source: [UNICEF and UNFPA \(2023\)](#), p 39

While output indicators – such as the number of community workshops held or partnerships formed – are more directly attributable to programme activities, evaluating outcomes and impacts introduces greater complexity, particularly around social norm change. It becomes vital to assess whether programmes are being implemented as intended, using a combination of routine monitoring, formal reporting systems, and external evaluations.

Each programme phase is typically followed by a (semi-)independent external evaluation combining qualitative and quantitative data, obtained through remote desk reviews, case studies, field research, in-country consultations, focus group discussions, key informant interviews, direct observations, and global online surveys ([UN ECOSOC, 2024](#)). These evaluations provide important insights into the functioning and efficacy of the global programmes ([UNFPA Evaluation Office, 2017](#); [UNFPA and UNICEF, 2019b, 2021](#); [UNFPA and Impact Ready, 2020](#)). However, besides concerns about the independence of external evaluators ([Weaver, 2010](#); [Coicaud, 2016](#)), practitioners and evaluators alike have highlighted the temporal disconnect between evaluation findings and programme cycles ([Rahm, 2023](#)). Evaluations often take up to a year, and findings frequently arrive after the next programme phase has already begun – limiting their use for timely adaptation. This challenge is particularly pronounced in smaller programmes with fewer resources, such as the GBSS programme. Here, the global M&E framework was only developed at the end of Phase I ([Rahm, 2019b](#)), and rolled out to national partners during Phase II – just as the programme was being discontinued. In contrast,

larger and more established programmes like the UNFPA–UNICEF Joint Programme to Eliminate FGM could strengthen M&E systems over time. By Phase III, the Joint Programme had developed more robust monitoring, reporting, and learning systems at global, regional, and national levels, supporting both government partners and civil society actors. During the COVID-19 pandemic, adaptive monitoring systems were introduced to maintain data collection. M&E methodologies such as Outcome Harvesting, Outcome Mapping, and the Most Significant Change technique have been integrated into these frameworks to capture changes in behaviour, norms, and implementation processes – particularly in dynamic and complex environments. These participatory methods enable the Joint Programme to monitor shifts in knowledge and practices that may not be immediately quantifiable, while building capacity through qualitative M&E platforms and training (Davies and Dart, 2005; Laytham and Nordehn, 2019; UNICEF and UNFPA, 2022b).

Despite these efforts, persistent challenges continue to undermine monitoring and evaluation. Among them are ongoing constraints in the availability of timely and accurate data. Currently, only 51.1 per cent of the data needed to monitor SDG 5 is available since the adoption of the 2030 Agenda. As a result, 5 out of 19 indicators and sub-indicators cannot be fully assessed at the global level (Cookson et al, 2026). Moreover, trend data – crucial for assessing progress over time – exist for only three SDG 5 indicators and remain unavailable to track harmful practices (Cookson et al, 2026). Another key barrier is the chronic underfunding of M&E systems. Stakeholder interviews revealed that in some instances, rigorous monitoring and evaluation – particularly at sub-national levels – was discouraged or deprioritized due to limited budgets, political sensitivities, or a reluctance to deviate from pre-existing programme models. Yet, among these challenges, one issue emerged most consistently across interviews as a fundamental and unresolved tension: the attribution problem. The next sections are dedicated to this recurring concern. Together, these challenges create critical blind spots. Potential adverse or unintended effects can easily go undetected, ultimately weakening the core principles of accountability, learning, and safety that M&E mechanisms of violence against women prevention programmes are meant to ensure (UN Women and WHO, 2020).

Attribution problem: the ‘Achilles’ heel’ of global programmes

This section examines the persistent challenge of attribution – referred to by one key informant as the ‘Achilles’ heel’ of global programmes. We begin by conceptually situating the attribution problem before turning to an empirical analysis of its manifestation across the three case studies. The attribution

problem – more precisely, the challenge of causal attribution, which involves linking changes in outcomes to specific social policies or programmes – has long been a central concern in the evaluation field, particularly in complex settings and international development (Iverson, 2003; Mayne, 2011; Bovaird, 2014; Copestake, 2025). Our analysis is grounded in 35 in-depth interviews with global programme managers and associates, complemented by a thematic analysis of external evaluations and evaluation guidelines from the three case studies, covering the years 2017 to 2022 (UNFPA Evaluation Office, 2017; UNFPA and UNICEF, 2019b; UNFPA and Impact Ready, 2020; UNFPA and UNICEF, 2021a; Rahm, 2019b).

The conceptual model draws on the impact evaluation literature in international development (Gertler et al, 2016; White and Raitzer, 2017; Glewwe and Todd, 2022). It is also influenced by Peng's (2011) work, which emphasizes the significance of situating policies and programmes within the broader socio-cultural, demographic, political, and economic contexts they are interacting with. Measuring effectiveness cannot be reduced to a simple causal relationship between the programme and observed outcomes. In the context of global programmes aimed at eradicating harmful practices such as child marriage, female genital mutilation, and gender-biased sex selection, a reductionist view on prevalence rates is insufficient, as the analysis must consider the socio-cultural and political environments in which these programmes operate. The model seeks to explain the complexities involved when evaluating global programmes, which operate at global, regional, and national levels in collaboration with diverse actors:

1. Global Programme Intervention (X) represents a specific global programme being evaluated that addresses a pressing global issue. It operates across multiple jurisdictions, involving a plethora of actors.
2. Observed Outcomes (Y) represents the actual outcomes and impacts observed because of the global programme intervention. These outcomes can manifest at the global, regional, and national levels, and can encompass changes in policies, practices, behaviours, norms, and socio-demographic indicators.
3. Attribution Problem (AP) refers to the challenge of establishing a causal relationship between the global programme intervention (X) and the observed outcomes (Y). To establish causality requires a counterfactual scenario (Y0), the hypothetical situation of what would have occurred in the absence of (X). A baseline against which the impacts of the intervention are assessed (see Figure 4.1). The attribution problem in the context of global programmes is influenced by the following factors:
 - a. Complexity of actors and levels: The involvement of diverse actors, including IGOs, governments, NGOs, community leaders, youth, influencers, and researchers, operating at different levels. The

- complexity of interactions and collaborations among these actors (often organized in further institutions and networks) complicates the attribution of specific outcomes solely to the programme.
- b. Interactions and spillover effects: Global programmes intentionally engage in knowledge transfer, resource pooling, and collaborative efforts, which leads to spillover effects that extend beyond the target population or intended outcomes.
 - c. Contextual factors: The influence of contextual factors, such as political, economic, social, and cultural dynamics. These factors interact with the intervention (X) and can shape the observed outcomes (Y), with important feedback loops, making it challenging to isolate the independent effects of the programme.
 - d. Time lag and long-term impacts: The time delay between the implementation of the intervention (X) and the emergence of outcomes (Y). The effects of global programmes may unfold gradually and manifest over the long term. Time lags also relate to global programming/funding cycles, data collection, and other programming effects.

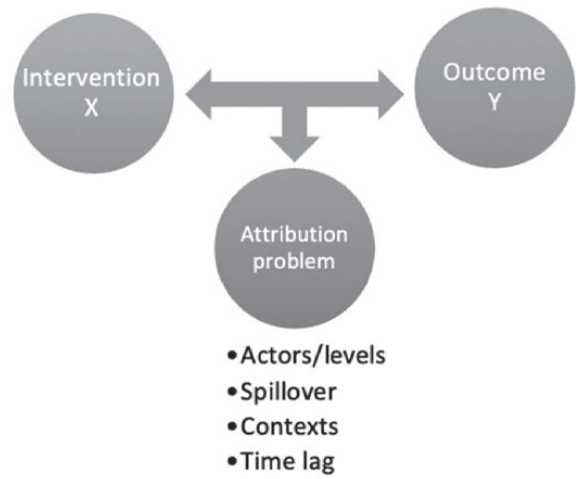
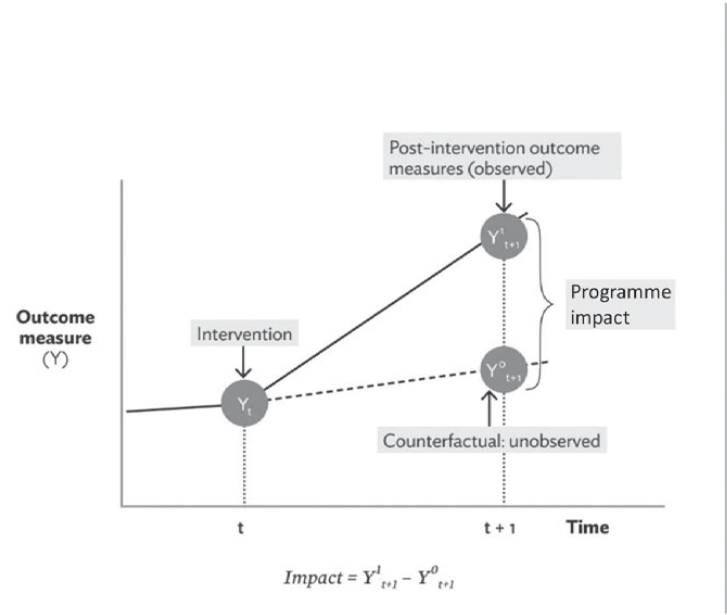
This conceptual model highlights the challenges associated with the attribution problem in the evaluation of global programmes. It recognizes the complexity of actors, the interactions and spillover effects, the influence of contextual factors, and the consideration of time lag and long-term impacts. Evaluation requires careful analysis and methodological approaches that account for these factors to establish a credible causal link between (X) and (Y) (see [Figure 4.1](#)).

Building on this conceptual framework, we now turn to the empirical findings from the three case studies, with a particular focus on identifying common barriers to the evaluation of global programmes. While certain barriers had varying degrees of influence depending on the specific research context, most of them were consistently present across all case studies.

Global programme interventions

In all three case studies, interventions are guided by the programme's theory of change (ToC). It defines the problem, its causes and drivers, programmatic strategies and inputs, outputs, immediate and intermediate outcomes, and impacts for the elimination of harmful practices ([UNFPA and UNICEF, 2019a](#)). ToCs are developed at the global level with the support of epistemic communities, practitioners, and academia: 'For monitoring and evaluation of the Joint Programme at the global level ... we work with academics and global practitioners to develop a methodology and tools to be able to measure social norm change' (IN15). To ensure adaptability, ToCs are adjusted to

Figure 4.1: Conceptual model: impact evaluation and attribution problem



MEASURING THE IMMEASURABLE?

Source: Left adapted from [White and Raitzer \(2017, p 32\)](#); right drawn by the author

the regional and country levels through stakeholder consultations. ‘We customized the global theory of change for South Asia; we made sure that all the changes we made were grounded in evidence from the region ... using a participatory process. We had a two-day workshop with the UNICEF and UNFPA colleagues from the countries in the region’ (IN11). In recent years, there has been an increased emphasis on monitoring and evaluation to enhance accountability and facilitate transnational transfer and learning. Interviewees report being accountable to donors (IN4, IN7, IN13) but also to their strategic plans: ‘We hold ourselves accountable to our strategic plan with three transformative goals, the outcomes, the indicators. We have a M&E framework to hold us accountable to deliver on this framework and the strategic plan’ (IN14). In terms of learning, respondents stress: ‘Evidence generation is very central to our programme development, it enables us to track, understand, and evidence the change better. Also, to share learning widely, to integrate what has been learned, or what works best, within existing programming, and to share with others’ (IN26).

Global gender programmes have implemented various mechanisms for capacity building in monitoring and evaluation. According to one official associated with the Joint Programme to Eliminate FGM and the Global Programme to End Child Marriage: ‘We provide a lot of capacity support when it comes to monitoring and evaluation. You have a full UN evaluation team that supports every M&E programme, integrates M&E into every programme run by the global programme’ (IN31). Regular stocktaking exercises and the utilization of epistemic power are employed to strengthen these processes (see, for example, [Plesons et al, 2021](#); [Matanda and Lwanga-Walgwe, 2022](#)). At the end of each programme phase, formal evaluations are conducted by external evaluation teams with evaluation recommendations and proposed action points ([UNFPA and UNICEF, 2019b, 2021](#); [UNFPA and Impact Ready, 2020](#)). The management of global programmes systematically responds to evaluation findings by indicating whether recommendations are accepted, partially accepted, or rejected, and by outlining how these findings will inform subsequent programming cycles. The Management Response of the Joint Programme to Eliminate FGM provides one example of such reporting ([UNFPA, 2019b](#)).

Observed outcomes

Prevalence data remains the most closely monitored indicator of progress across the global programmes. This emphasis is reflected in initiatives such as the Child Marriage Monitoring Mechanism and reiterated by multiple interviewees: ‘For harmful practices, the focus has been largely on prevalence’ (IN11). Another explained the methodological approach: ‘We use national prevalence data – like the Demographic and Health Survey and the MICS

[Multiple Indicator Cluster Surveys]. We draw from many different data sources and bring them together to assess country-level progress against national and international goals and targets’ (IN20). Evaluation reports confirm that the programmes have contributed to policy change and increased efforts aligned with the 2030 Agenda, including shifts in social norms aimed at eliminating harmful practices (UNFPA and UNICEF, 2019b, 2021; UNFPA and *Impact Ready*, 2020). Interviewees pointed to observable declines in prevalence rates; however, they emphasized that the pace of progress remains uneven across countries and regions – and insufficient to meet global targets. ‘We’re seeing, globally, a decline in the practice of FGM. In some countries faster than others ... Because of the SDG targets, we know which countries are on track to meet the target of FGM elimination by 2030. Almost none of them; I think only two countries are’ (IN20). Respondents reported routinely consulting the UN SDG Gender Equality tracker and relevant academic literature, which support the observation of declining prevalence, while highlighting persistent regional disparities (Koski and Heymann, 2017; Chao et al, 2021; UNICEF, 2021a; Farouki et al, 2022). A further complexity arises from demographic trends: in many programme countries, rapid population growth means that while the rate of harmful practices may decline, the absolute number of girls affected continues to rise. As one interviewee explained: ‘Most of the countries where these practices occur – especially FGM and child marriage – are experiencing accelerated population growth. In relative terms, things are improving. But in absolute terms, the number of girls affected is increasing’ (IN8). This disconnect between relative and absolute progress generates frustration among both programme implementers and donors. The ambiguity complicates messaging, accountability, and resource mobilization:

Data creates a positive dynamic, but also a negative one. Countries or donors – everyone feels frustrated. On one hand, we can say, ‘yes, the practice has declined’. But on the other, we still need more resources, more political will. It’s ambiguous, and not easy to manage. To me, that has been a major challenge. (IN8)

Attribution problem

To what extent can observed demographic changes and social norm shifts be attributed to global programmes? Across the three case studies, the attribution problem emerges as a central, unresolved challenge. Despite the substantial scope and ambition of these programmes, stakeholders consistently reported difficulties in demonstrating the impact of interventions, particularly when it comes to complex social phenomena such as gender-biased sex selection, child marriage, and female genital mutilation (see also [Box 4.2](#)).

Box 4.2: Tapping in the dark: excerpts from global programme evaluation reports

Global Programme to End Child Marriage (GPECM)

'Country offices have significantly expanded community outreach and the GPECM shows signs of scaling up, reaching approximately 11.5 million individuals with information related to ending child marriage in the first half of 2018, significantly more than in 2016 and 2017 combined. Evidence of scaling up is occurring in the *absence of a sound evidence base on the impact* of interventions and this requires immediate attention ... A lack of focus on impacts is particularly evident'. (UNFPA and UNICEF, 2019b, p 8)

Global Programme to Address Gender-Biased Sex Selection

'Delay to monitoring and evaluation guidance meant that this could not be sufficiently rolled out within the programme' (UNFPA and Impact Ready, 2020, p 41). 'A rigorous monitoring and evaluation system should be included within any future programme which enables *learning about the effectiveness and impact* of the interventions of the programme, including progress markers towards social norms change'. (UNFPA and Impact Ready, 2020, p 85)

Joint Programme to Eliminate Female Genital Mutilation

'Country-level programming still struggles with gender-transformative social norm change with regard to understanding changes in knowledge, attitude, and practice around gender norms and this is compounded by the fact that *measuring FGM gender norm change remains elusive*'. (UNICEF and UNFPA, 2022a, p 54)

Source: External evaluations. Emphasis added.

Interviewees frequently identified the attribution problem as the single greatest obstacle to robust impact assessment. One informant put it bluntly: 'You know who was Achilles? He died because he was shot in the heel ... Our Achilles heel is our inability to measure the impact of our interventions' (IN33). This challenge was especially acute in relation to demographic indicators: 'We cannot say what specific intervention has contributed how much to that decrease [in sex ratios at birth]' (IN33). Several respondents emphasized the blurred lines between contribution and attribution, especially

in the context of social norm change. As one interviewee noted, ‘Attribution versus contribution is an issue. And obviously, female genital mutilation and gender-biased sex selection – they’re so complex in terms of social norm change’ (IN13). Another added:

This goes back to the social norm change work that we do. There is a problem of contribution versus attribution because a lot of the work is contributing to the general goal. We always struggle with actual attribution – to say this specific intervention led to that specific impact. That’s something we lack in our assessment frameworks at every level. (IN18)

This concern was echoed in evaluation documents, which pointed to persistent shortcomings in data availability and methodological tools for impact-level analysis. For instance:

- ‘Limitations identified by the evaluation team included limited data was available for outcome-level tracking combined with attribution issues at the outcome/impact level’ (UNFPA and UNICEF, 2019b, p 44).
- ‘It is only possible to attribute changes to a programme if evaluators can demonstrate a direct causal link between the action and the results. This is often easy to do at an output level, and plausible at outcome level. However, it is very difficult to do this at impact level’ (Rahm, 2019b, p 25).
- ‘The main limitations of the evaluation design included no assessment of attribution to impacts using statistical techniques’ (UNFPA Evaluation Office, 2017, p 12).

The gap between intervention and demonstrable impact is not only a technical issue – it also signals a broader knowledge deficit at the heart of global programme evaluation. Without reliable methods to assess causality, programmes remain vulnerable to claims of ineffectiveness, even where real change may be occurring.

Lack of counterfactual and baseline data

Closely tied to the attribution problem is the persistent lack of counterfactuals, which significantly undermines the ability to conduct rigorous impact evaluations. Without a valid comparison group – one that shares similar characteristics with programme beneficiaries but has not received the intervention – it becomes difficult to isolate and measure the effects of global programmes. In the absence of counterfactuals, programme implementers often lack a clear orientation for assessing effectiveness and are left to interpret

demographic changes without a reliable benchmark. As one interviewee described, this uncertainty compels practitioners to rely more on intuition than evidence-based decision-making.

We are not able to have experiments that have counterfactual groups, that you can compare and say, ‘this works this much. This doesn’t work’. We are forced, in a sense, to go blindly and just to listen to our senses. If we see in next year that the ratio goes down, we say, ‘okay, we are probably on the right path’. (IN33)

Going ‘blindly’ into the future and forming loose assumptions based on annual demographic changes is particularly problematic, since such trends often undergo random fluctuations and may not reflect underlying shifts in norms or behaviours. Scholars involved with the Global Programme to Address Gender-Biased Sex Selection (GBSS) have tried to circumvent the lack of counterfactual by contrasting highly targeted programme countries to non-intervention countries over time, before and after the inception of the global programme. The puzzling effect is that the selected countries in this ‘natural’ experiment showed remarkably similar demographic trajectories, as interviewees noted. ‘I remember very well ... that in countries where you have heavy interventions, likewise in countries without any intervention, anyway, you are going to have the same sex ratio at birth’ (I33). Baseline data are essential for counterfactual comparisons. Interviewees acknowledge that another barrier evaluators face is the lack of baseline data: ‘One of the biggest problems is the non-existent baseline, because we don’t have anything to compare to. Specifically, to the global programme, we don’t have any baseline. That’s the biggest challenge evaluators face’ (IN18). Evaluation reports also highlight this issue, noting that early phases of programming were hindered by incomplete or missing baseline data: ‘The decision may be made at the highest level to omit tracking at the outcome and impact level for Phase I (given the lack of baselines and incomplete data) and to focus efforts on design for Phase II’ (UNFPA and UNICEF, 2019b, p 11). Together, the absence of counterfactuals and baseline data represents a major hurdle in evaluating the effectiveness of global programmes. It limits not only the ability to measure impact but also the capacity to learn, adapt, and scale interventions based on robust evidence.

Complexity of actors and levels

Another challenge for external evaluators lies in navigating the complex architecture of actors and governance levels embedded within global programmes. As one interviewee put it: ‘Global programmes involve a broad range of different stakeholders working at different levels at the

same time’ (IN7). This multi-level and multi-actor landscape complicates evaluation design, particularly in terms of sampling and data collection. ‘One of the many challenges evaluators face is the multiplicity of stakeholders. I mean, it’s a lot. You really have to sample case studies and carefully select interviewees’ (IN4). To manage this complexity, large consultancy firms are often commissioned to conduct external evaluations. An evaluator from a UK-based firm, involved in assessments of the Global Programme on FGM and Gender-Biased Sex Selection, described the layered structure that evaluators must account for:

The FGM Programme did a lot for global knowledge at the global level. They had a Community of Practice on FGM, with members from different sectors. At the country level, there were coordination meetings ... They did quarterly meetings with external stakeholders – though the frequency varied across countries. At the thematic level, they facilitated knowledge exchanges across countries, but again, the value and extent of these varied across regions. (IN13)

To address these challenges, evaluations often adopt purposive sampling and mixed-methods approaches. However, the picture becomes increasingly blurred due to the decentralized nature of implementation. While coordination and advocacy are typically handled at the global level, the actual programme activities are primarily implemented at the national level, often through local partners. As one interviewee clarified: ‘The Joint Programme is not directly implementing most of the activities. What we do directly is high-level policy dialogue and advocacy. The key activities are implemented at the country level’ (IN15). Another added: ‘We fund and work with partners who are responsible for implementing activities on the ground’ (IN20). These implementing partners vary widely in their institutional capacity, which poses further challenges for monitoring and evaluation.

Given that many of the countries supported by the Joint Programme are developing countries – and also face weaknesses in data collection, human resources, and infrastructure – this remains one of the key challenges for the programme in terms of M&E. There are limitations in the available evidence. We do not yet have, as much as we need, robust evaluations of interventions. (IN15)

Furthermore, the high attrition rates common in international development – particularly among project staff and implementing partners – can adversely affect evaluation continuity. As one observer noted: ‘There is a whole dynamic of people moving between development partners and within UN organizations such as UNFPA’ (IN7). This turnover may result in institutional

memory loss and a lack of follow-through: ‘Sometimes by the end of the project, there is no more interest in knowing what exactly happened – especially when some of the project managers have moved to another country or another project’ (IN3). These findings illustrate the layered complexity evaluators must navigate – spanning multiple actors, levels of intervention, institutional capacities, and attrition – all of which shape the evaluability and accountability of global programmes.

Interactions and spillover effects

A further set of challenges in evaluating global programmes stems from the complex web of interactions and spillover effects. Robust impact assessments typically require the isolation of variables in order to establish clear causal links. Evaluators of global programmes can adopt quasi-experimental approaches – such as difference-in-difference designs – by comparing programme countries to non-programme countries before and after the intervention. However, in practice, this becomes increasingly difficult due to spillover effects that extend beyond the originally targeted contexts. As global programmes expand their reach and influence, their effects often diffuse across borders, unintentionally influencing outcomes in neighbouring or non-target countries. In addition, the programmes themselves – and the harmful practices they seek to address – are deeply interlinked. For instance, in many communities, practices such as FGM and child marriage are sequentially connected. As one evaluation report noted: ‘In most communities where we support interventions, FGM is a precursor to child marriage, so we have been indirectly addressing issues of child marriage as well’ (UNFPA and UNICEF, 2021a, p 31).

Interviewees confirmed these overlaps:

There are very visible interlinkages between child marriage and FGM. When it comes to son preference, the linkage is not as visible. However, there are new efforts to join all these linkages, because they all stem from the value of the woman, social and gender norms, and how we think of those. (IN16)

Indeed, the three global programmes examined all address deeply entrenched discriminatory norms that negatively impact women’s and girls’ sexual and reproductive health and rights. As one informant put it: ‘When it comes to son preference, gender-biased sex selection, FGM, or child marriage, what makes them unique compared to other global programmes, is that they address deeply entrenched discriminatory norms that control women’s and girls’ sexuality and reproductive choices’ (IN24). Recognizing these overlaps, programme stakeholders have increasingly sought to strengthen

cross-programme learning and tool-sharing. A key example is the development of a common framework for social norm change: ‘Linkages are so apparent that we have to learn. A very good example of some linkages that are now apparent across all the different harmful practices programming that we are undertaking is the social norm change framework we’ve developed at UNFPA’ (IN14). However, these interactions also raise questions about responsibility, coordination, and evaluative scope. As programmes grow more interconnected, the need for systemic, integrated evaluations becomes more urgent. ‘How do we hold those programmes to account? What do those linkages look like? How effective and sustainable are these programmes? There is a need for strong, systematic evaluations to see how we are actually shifting harmful masculinities’ (IN9). Evaluative tensions thus arise when programmes operate across overlapping domains of influence. While integration creates opportunities for learning and synergy, it also complicates attribution, accountability, and impact measurement – requiring more holistic and coordinated evaluation approaches.

How context matters

Evaluating the effectiveness of global programmes is further complicated by the diversity of contexts in which they are implemented. Interviewees repeatedly emphasized that contextual variation plays a critical role in shaping both programme outcomes and the evaluability of interventions. A key concern is the global community’s limited understanding of the specific social, political, economic, and cultural environments in which harmful practices persist. As one respondent noted: It is vital ‘getting a better understanding of the different contexts that we’re working in, as a global community working within this space’ (IN19). The challenge lies not only in designing context-sensitive interventions, but also in accounting for contextual factors when attempting to assess impact. Several interviewees highlighted the knowledge gap surrounding whether observed changes can truly be attributed to the programme itself, or whether they are the result of broader, external developments. ‘There is a knowledge gap – how specific policies or programmes affect the situation, or whether changes have been rather due to other (contextual) factors’ (IN1). For example, one interviewee pointed to the decline in child marriage rates in India over the past decade – not as a direct outcome of programme interventions, but rather as the result of broader structural transformations:

In India, over the past 10 years, child marriage has dropped by 20 per cent. Did the UN have everything to do with it? I hardly think so. Did CSOs have much to do with it? I hardly think so. It has more to do with development, and change, and urbanization; girls in education,

labour force participation, opportunity – a sense of possibility for which people are willing to postpone marriage and childbearing. (IN21)

Cultural differences also play a crucial role, particularly when it comes to adapting and scaling up interventions across regions. Programmes that may resonate in one context may not translate effectively into another. As one respondent explained: ‘The context is different. You have cultural differences from place to place, so it is difficult to evaluate what’s obtained in East Africa, and bring it to West Africa. It might not resonate with the people’ (IN23). Despite these contextual challenges, interviewees expressed a strong sense of perseverance and shared purpose in their work. While recognizing the complexity of context-specific dynamics, they maintained optimism about the long-term goal of eliminating harmful practices: ‘You have a lot of complexity. We just work hoping that we’ll get there one day’ (IN23). Another respondent added: ‘Irrespective of the culture or the context, you would always find a similar context. Irrespective of the diversity, there is still a convergent point, which is to eliminate FGM’ (IN17). Interviewees saw this complexity as a necessary condition for adaptive learning, underscoring the importance of localized knowledge and grounded approaches within global efforts to end harmful practices.

When timelines collide: short-term programmes vs generational change

Global programmes are often structured around the strategic planning cycles of intergovernmental organizations, typically spanning three to four years. While this alignment serves organizational planning and funding processes, it presents limitations for monitoring and evaluation, particularly in areas concerned with shifting deeply embedded social norms and behaviours. The compressed timeframe limits opportunities for generating evidence. As one interviewee observed:

The short time frame is probably the biggest hindrance to the effectiveness of global programmes and knowledge production within them. Monitoring and evaluation – especially in certain areas of work – requires a longer time frame than the project duration. Gathering such data is almost impossible in my experience, and that is a significant hindrance to the effectiveness of these systems. (IN5)

This concern was echoed by multiple respondents, who emphasized that attempting to measure change in social norms – often shaped by centuries of structural discrimination – requires a significantly longer horizon than current programme cycles allow. ‘The timeframe of the programme is an issue, especially because we are working on social norm change’ (IN7).

Another interviewee added bluntly: ‘You cannot hope to change or overturn centuries of discrimination and patriarchy through a three-to-four-year programmatic cycle. It’s impossible’ (IN14).

Evaluations conducted after short implementation periods struggle to capture shifts in knowledge, attitudes, and practices. As one evaluator explained:

For evaluators to assess the impact on a specific issue related to social norms, the timing is very short. Most of the programmes within the global programme last for two years, maximum three. It’s not enough time to measure significant change. And evaluations are typically conducted after the programme has ended, which means every two years, more or less. The programme’s duration itself poses a challenge for evaluators to effectively monitor it. (IN18)

Compounding the challenge of limited timeframes is the issue of underfunded M&E efforts, particularly in the gender and human rights sectors. Respondents noted that the proportion of programme budgets allocated to M&E is often far below recommended levels.

There is inadequate funding put into monitoring and evaluation. You’re seeing that in the [programme] cycle itself. They’ll tell you that you need to put about 20 per cent of your budget into the overall monitoring and evaluation to get good data. If you then put in very little money – about 1 per cent of your funding – into monitoring and evaluation, you won’t be able to do the rigorous data collection. That means that we are not able to rigorously assess, and that has been a problem. (IN26)

This underinvestment reflects broader structural challenges facing the field. As one interviewee noted, ‘These are huge programmes that we have in the world right now. But this particular sector that we’re working in – if you compare it to the health and education sectors – is almost in its infancy’ (IN19). The mismatch between short-term programme cycles and the long-term nature of social transformation presents a serious constraint on the capacity of global programmes to demonstrate impact. Without longer timelines and adequate resources for sustained monitoring, efforts to evaluate effectiveness risk remaining superficial, failing to capture changes in entrenched gender inequalities.

In sum, this section examined the challenges associated with evaluating global programmes, drawing on the case studies of three global gender initiatives aimed at eliminating female genital mutilation, child marriage, and gender-biased sex selection. Following a presentation of the conceptual

framework, the section synthesized empirical findings from in-depth interviews with key stakeholders and complemented these insights with evidence from external evaluation reports. Together, these sources helped identify common barriers to effective monitoring and evaluation across the programmes. At the heart of these challenges lies the attribution problem – described by interviewees as the ‘Achilles’ heel’ of global programmes. This refers to the inability to causally connect (global) policy to (demographic) outcomes. The analysis revealed that this core issue is shaped and compounded by several interrelated factors: the absence of counterfactuals and baseline data; the complexity of multi-level governance involving numerous actors; interactions and spillover effects between programmes; varying contextual conditions; short programme cycles misaligned with long-term impacts; and chronic underfunding of monitoring and evaluation – particularly in the gender and human rights sectors. This section has focused primarily on diagnosing the challenges, rather than proposing solutions. The next section will explore how these barriers – particularly the attribution problem – might be addressed through quasi-experimental evaluation designs.

Is a difference-in-difference analysis a feasible option to overcome the attribution problem?

The challenge of establishing causality in complex policy environments has long occupied scholars of evaluation, policy, and development. One of the earliest and most iconic attempts dates back to [John Snow’s \(1849\)](#) cholera study, in which Snow combined observational data with geographic mapping to trace the source of a public health crisis – laying the groundwork for modern causal inference. Since then, evaluation methods have evolved significantly, giving rise to increasingly sophisticated approaches aimed at ‘demystifying causal inference’ ([Dayal and Murugesan, 2023](#)) and ‘unpacking the black box of causality’ ([Imai et al, 2011](#)). At the same time, the policy landscape itself has grown more complex, with global programmes now operating across multiple countries, actors, and levels of governance. This raises a crucial methodological question: how can we identify causal effects in large-scale, multi-site interventions such as the Global Programme to End Child Marriage?

One school of thought advocates for granular, context-sensitive evaluation – disaggregating global programmes into their local components and analysing their effects across time and space. If such localized interventions demonstrate measurable impact, one might infer the effectiveness of the broader programme (personal conversation with Jaromir Harmáček). This perspective emphasizes that development interventions are inherently context-dependent and that what ‘works’ in one setting may not translate elsewhere ([Pritchett and Sandefur, 2014](#)). It aligns closely with realist evaluation ([Pawson and](#)

Tilley, 1997; Van Belle et al, 2024). Realist evaluation focuses on how contextual factors influence outcomes and ‘aspires to produce middle-range theories that will facilitate the transfer of the knowledge produced on the intervention under study to other contexts or other interventions of the same type’ (Louart et al, 2023, p 1).

A second approach centres on the use of experimental and quasi-experimental methods, particularly randomized evaluations, to derive credible impact estimates. Esther Duflo and Abhijit Banerjee – whose work has shaped the field of development economics and earned them the Nobel Prize – have demonstrated the power of randomized and natural experiments to rigorously assess the effects of social policies and programmes (Banerjee and Duflo, 2012, 2019). While acknowledging the ‘many messy details’ of real-world interventions (Banerjee, 2007, p 162), they argue that randomized controlled trials (RCTs) remain among the most transparent and credible tools for measuring impact, especially at the local level (Duflo, 2004). Yet, as Duflo’s early work on Indonesian school construction illustrates, randomization is not always feasible (Duflo, 2001). This is particularly the case in the context of UN-led global multi-stakeholder programmes. In such cases, quasi-experimental designs, such as the difference-in-difference (DiD) method, might offer a pragmatic alternative. DiD allows evaluators to estimate the net effect of an intervention by comparing changes over time between a treatment group (programme countries) and a comparison group (non-programme countries), assuming both would have followed parallel trends in the absence of the intervention. This approach has been employed in multi-country analysis before, for example to assess the impact of policies on maternal and child health outcomes in Africa (Ravit et al, 2018; Dietler et al, 2021).

This section applies a DiD framework to assess the Global Programme to End Child Marriage, focusing on both its performance within intervention countries and relative to neighbouring, non-intervention countries. The study employs a basic DiD design – without conducting a formal statistical test for the parallel trends assumption, performing post-hoc verification, or adjusting for potential confounding variables. Clarifying these methodological choices is essential for delineating the scope of the causal claims and enhancing the transparency of the research approach. The section then reflects on the inherent limitations of applying DiD in global evaluation settings, explores alternative strategies, and identifies ways forward for building more context-sensitive and participatory evaluation practices in transnational policy environments.

Evaluating the impact of the Global Programme to End Child Marriage

To explore whether the Global Programme achieved its intended impact, we turn to its core objective at the inception of Phase I (2016–20): a 10 per cent

reduction in the percentage of women aged 20–24 who were married or in union before age 18 across the 12 target countries by the end of 2020, relative to 2015 baseline levels (European Union, 2015b, p 3). We focus on two core evaluation questions:

- Did the programme countries meet the 10 per cent reduction target?
- Did programme countries outperform comparable non-programme countries over the same period?

A DiD approach offers a useful quasi-experimental framework for estimating the net impact of the programme. By comparing pre- and post-intervention trends in programme countries against those in non-intervention countries, we can approximate the counterfactual – that is, what would have happened in the absence of the intervention.

Data availability and country selection

We first assessed the availability of reliable, comparable data across the 12 programme countries. Computation of progress toward the target was only possible in six countries where at least two data points were available between 2015 and 2020 (Table 4.2). Yemen was excluded for two reasons:

1. Data were drawn from different survey instruments (DHS vs MICS), and
2. the most recent MICS (2022–23) had data gaps, with 41 out of 880 enumeration areas inaccessible due to conflict-related insecurity. The remaining countries included in the analysis were Bangladesh, India, and Nepal in Asia, and Ghana, Sierra Leone, and Zambia in Africa.

Methodology

We used SDG Indicator 5.3.1 – the percentage of women aged 20–24 who were married before age 18 – as the core outcome measure. For each country, we calculated the baseline (2015) and endline (2020) values, using observed or estimated data points under the assumption of exponential reduction. Based on these calculations, we established target values (10 per cent reduction by 2020) and compared them with actual endline figures (observed or estimated), alongside estimates of the average annual rate of reduction (see Table 4.3).

The results suggest that five out of six programme countries with available data met or exceeded the 10 per cent reduction target within the first five years of implementation. The exception was Nepal, which narrowly missed the target. Sierra Leone showed the most significant progress, reducing child marriage prevalence from 35.5 per cent (2015) to 28.3 per cent

Table 4.2: Percentage of women 20–24 married before age 18 in target countries of the Global Programme to End Child Marriage, by country, time, and source

Indicator SDG 5.3.1 Percentage of women 20–24 years married before age 18 in 12 programme countries, latest available data and data source			
Country	Time	Per cent	Source
Bangladesh	2019	51.4	MICS 2019
	2014	57.3	MICS 2014
Burkina Faso	2015	51.3	EMDS 2015
Ethiopia	2016	40.3	DHS 2016
	2011	41.2	DHS 2011
Ghana	2022	16.1	DHS 2022
	2014	20.7	DHS 2014
India	2020	23.3	NFHS 2019–21
	2015	26.8	NFHS 2015–16
	2005	47.4	NFHS 2005–06
Mozambique	2015	52.9	AIS 2015
Nepal	2022	34.9	DHS 2022
	2016	39.5	DHS 2016
Niger	2012	76.3	DHS 2012
Sierra Leone	2019	29.6	DHS 2019
	2013	38.9	DHS 2013
Uganda	2016	34	DHS 2016
Yemen	2023	29.6	MICS 2022–23*
	2013	31.9	DHS 2013
Zambia	2018	29	DHS 2018
	2013	32.4	DHS 2013–14

Note: *41 out of the 880 selected enumeration areas could not be visited because they were inaccessible due to security and safety reasons during the fieldwork period.

Source: SDG Indicator database, DHS database

(2020) – 3.7 percentage points lower than the targeted figure. Bangladesh, India, Ghana, and Zambia all met or slightly exceeded the 10 per cent reduction threshold. Nepal saw a decrease from 40 per cent (2015) to 36.8 per cent (2020), slightly above the projected target of 36.0 per cent. Taking into account the timing of the 2016 DHS survey (June 2016–January 2017), Nepal would have had until early 2021 to meet its 2020 goal. Extrapolating modest continued progress, the country likely would have reached its target

Table 4.3: Estimated vs target child marriage prevalence (% of women 20–24 married before 18)

Country	Baseline (2015)	Target (2020)	Observed/Est. (2020)	Difference	Av. annual reduction
Bangladesh	56.1	50.5	50.3	–0.2	–0.02
India	26.8	24.1	23.3	–0.8	–0.03
Nepal	40.0	36.0	36.8	+0.8	–0.02
Ghana	20.1	18.1	17.1	–0.9	–0.03
Sierra Leone	35.5	32.0	28.3	–3.7	–0.05
Zambia	31.0	27.9	27.7	–0.2	–0.02

Source: SDG Indicator database, DHS database. Computed by the author.

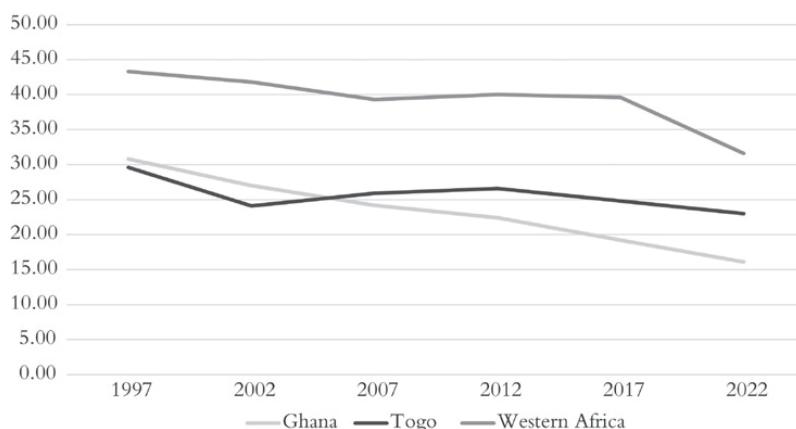
within that extended timeframe. While these findings are encouraging, they rest on the assumption of stable trends and do not account for external shocks, such as the COVID-19 pandemic, which has temporarily reversed gains by disrupting education and increasing girls' exposure to child marriage risk – a dynamic explored in later sections. Based on limited available data, we can cautiously conclude that the Global Programme met its stated Phase I target in five out of six countries assessed, with Nepal showing progress just shy of the threshold. While this analysis alone does not confirm causality, it provides preliminary evidence that the programme reached its stated objective by the end of Phase I. The next step is to compare these results against changes in non-programme countries over the same period to estimate the net effect of the intervention.

Did programme countries perform better than their non-intervention neighbours?

To estimate the net impact of the Global Programme to End Child Marriage, we compare programme countries to geographically proximate non-intervention countries, as well as regional averages. This comparison allows us to assess whether participating countries experienced greater improvements in reducing child marriage prevalence than what might have occurred in the absence of the programme.

Ghana vs Togo and Western Africa

The first comparison examines Ghana (a Global Programme country) alongside Togo (a non-intervention country) and Western Africa as a

Figure 4.2: Child marriage prevalence in Ghana, Togo, Western Africa, 1997–2022

Source: Computed by author based on [UNICEF \(2025\)](#)

regional benchmark ([Figure 4.2](#)). Between 1997 and 2022, all three observed a long-term decline in the prevalence of child marriage among women aged 20–24. However, the pace of progress varies: Ghana began with a prevalence rate of close to 31 per cent in 1997 and halved this over the course of 25 years, reaching a level of 16 per cent. In contrast, Togo’s progress has been marginal, with the prevalence rate decreasing only slightly from 30 per cent in 1997 – to the 23 per cent over two decades later, suggesting a stagnant trend. Meanwhile, the Western Africa regional average remained relatively stable from 1997 to 2017, hovering around 40–43 per cent, before experiencing a more rapid decline post-2017, reaching just above 30 per cent in 2022. This comparison points to Ghana as an outlier in terms of accelerated progress, particularly when benchmarked against both Togo and the regional average. Notably, the decline in Ghana began well before the Global Programme to End Child Marriage was introduced in 2015, suggesting that pre-existing national momentum ([WiLDAF Ghana, 2014](#)). However, the continuation and deepening of this downward trend post-2015 – unlike in Togo – suggests that Global Programme interventions may have contributed to sustaining and scaling progress.

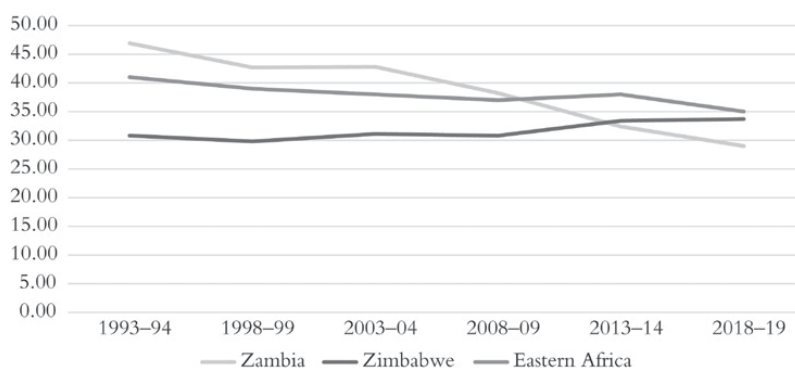
Ghana’s participation in the Global Programme likely reinforced existing efforts by mobilizing additional technical and financial resources, supporting data systems and advocacy, and strengthening cross-sectoral coordination between ministries, civil society, and local leaders. Several national initiatives fall in this post-2015 period. In 2017, the Ministry of Gender, Children and Social Protection launched the National Strategic Framework on Ending

Child Marriage (2017–26), accompanied by a two-year work plan to operationalize the strategy at national, regional, and district levels. By 2018, the government had allocated 3 per cent of its recurrent budget to support the coordination and implementation of the strategy – demonstrating political and financial commitment to addressing the issue. In 2021, the government also launched a Child Marriage Information Portal to enhance data sharing and coordination among stakeholders working to prevent child marriage and combat domestic and sexual gender-based violence ([Republic of Ghana, 2022](#)).

Zambia vs Zimbabwe and Eastern Africa

The comparison between Zambia (a Global Programme intervention country), Zimbabwe (a non-intervention country), and the Eastern Africa regional average provides another case for examining patterns of change in child marriage prevalence and potential programme influence ([Figure 4.3](#)). In the early 1990s, Zambia recorded a high prevalence of child marriage, with over 45 per cent of women aged 20–24 reporting marriage before age 18. Zimbabwe and the Eastern Africa regional average followed slightly lower but relatively stable trajectories, with prevalence ranging between 30 and 40 per cent over the same period. The data show a notable and sustained decline in Zambia, which began prior to the Global Programme to End Child Marriage but continued at a steady pace throughout the intervention period. By 2018–19, Zambia had reduced child marriage prevalence to under 30 per cent, outperforming both Zimbabwe and the regional average. In contrast, Zimbabwe’s trend plateaued, with minimal progress between 1993 and 2019. Although starting at a lower prevalence

Figure 4.3: Child marriage prevalence in Zambia, Zimbabwe, Eastern Africa, 1993–2019



Source: Computed by author based on [UNICEF \(2025\)](#)

rate than Zambia, Zimbabwe has seen only a marginal decline of a few percentage points over two decades. Similarly, the Eastern Africa average has shown modest, largely stagnant progress, hovering around 35 per cent throughout the period (see [Figure 4.3](#)).

From an evaluation perspective, the relative acceleration of progress in Zambia, compared with a stalled trajectory in Zimbabwe and the broader region, suggests a possible positive contribution from the Global Programme to End Child Marriage. While causality cannot be definitively established – given the absence of a robust counterfactual and the complex interaction of other factors such as legal reforms, civil society activism, and education policy – the comparative data indicate that Zambia’s decline is not simply part of a regional trend, but distinctive in pace and trajectory. However, it is critical to acknowledge that attribution remains partial. Zambia’s improvements may reflect synergistic effects between the Global Programme and other domestic reforms or donor initiatives. Moreover, progress preceded the programme’s launch, indicating that pre-existing momentum was already in place. The intervention may have amplified or consolidated ongoing national efforts rather than initiated them.

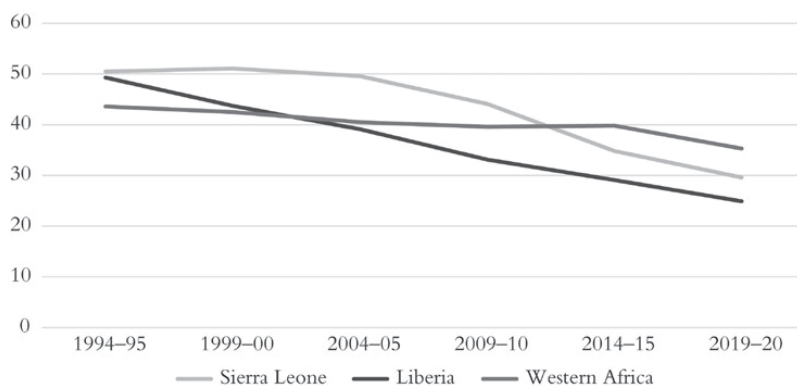
Indeed, Zambia has shown a long-standing commitment to gender equality and the rights of children through the ratification of international human rights instruments in the 1980s and 1990s, yet the pace and depth of reform have notably accelerated since 2005. The country ratified the African Charter on Human and People’s Rights on the Rights of Women in Africa (commonly known as the Maputo Protocol) in 2006. Between 2013 and 2022, the country consistently co-sponsored Human Rights Council and UN General Assembly resolutions on child, early, and forced marriage. In 2014, Zambia signed the Girl Summit Charter, committing to end child marriage by 2020. It co-hosted the first African Girls’ Summit with the African Union (AU) in 2015 and later hosted a review of the AU Campaign to End Child Marriage in 2016 – positioning itself as a regional hub for mobilization, just when the Global Programme was launched. Domestically, the Zambian government initiated a series of policy and legislative efforts to align national frameworks with international commitments, such as the National Strategy on Ending Child Marriage ([Republic of Zambia, 2020](#)). The most recent legislative change was the 2022 enactment of the Children’s Code Act No. 12, which formally criminalized child marriage and codified protections against harmful practices. Section 18(2)(a) of the Act makes child marriage a punishable offense under Zambian law. However, challenges persist. The UN Committee on the Rights of the Child (CRC), while acknowledging progress, expressed concerns over legal inconsistencies – especially the coexistence of customary marriage practices that still permit marriage once puberty is reached ([United Nations, 2022](#)). The Committee urged

full harmonization of the legal framework and stronger enforcement mechanisms, including resourcing the National Strategy and engaging traditional and religious leaders.

Sierra Leone vs Liberia and Western Africa

The comparative analysis of child marriage prevalence between Sierra Leone (a Global Programme intervention country) and Liberia (a non-intervention country), alongside the regional trend for Western Africa, offers further insights into both the pace and timing of change across different contexts (Figure 4.4). In 1994–95, Sierra Leone and Liberia reported similar prevalence levels, with approximately 50 per cent of women aged 20–24 having been married before the age of 18. However, their trajectories diverged over time. By 2020, Liberia had achieved a reduction to approximately 25 per cent, while Sierra Leone reduced to around 30 per cent. What is particularly notable is the timing and pattern of decline: Liberia experienced a more consistent and steeper decline over the 25-year period, outperforming both Sierra Leone and the regional average. Sierra Leone's progress accelerated post-2005, with a marked reduction from 50 per cent in 2005 to approximately 35 per cent by 2015, and a further decline to 30 per cent by 2020. However, this steep decline began before the launch of the Global Programme to End Child Marriage, suggesting that major progress in Sierra Leone predates the intervention, and the rate of reduction slowed during the implementation period. From an evaluation standpoint, this raises important questions about programme attribution. The fact that a non-intervention country (Liberia) achieved

Figure 4.4: Child marriage prevalence in Sierra Leone, Liberia, Western Africa, 1994–2020



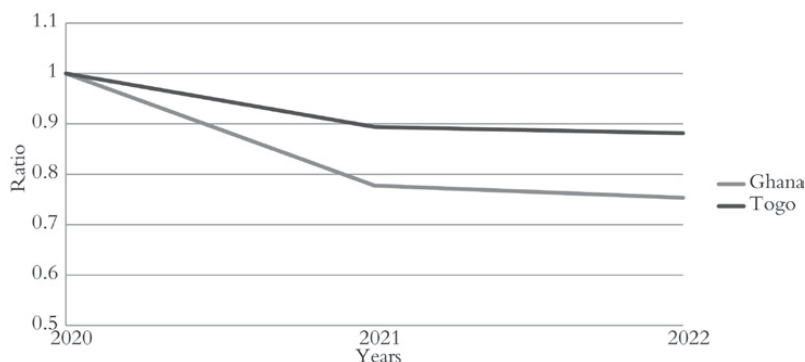
Source: Computed by author based on [UNICEF \(2025\)](#)

greater and more sustained reductions than the intervention country (Sierra Leone) calls into question the specific contribution of the Global Programme in accelerating progress. While it cannot be concluded that the programme had no effect, the absence of a clear divergence in favour of the intervention country weakens any causal claims. Contextual factors certainly matter. Despite not being part of the Global Programme, Liberia ratified key international legal instruments – including the Convention on Consent to Marriage and the Maputo Protocol – and established a legal minimum age of marriage at 18. According to [Svanemyr et al \(2013\)](#), Liberia was assessed to have a strong legal and normative framework against child marriage, which might have contributed to the observed reductions. This points to the importance of policy coherence, legal reforms, and domestic ownership, beyond programme affiliation. In sum, while Sierra Leone made measurable progress, the trend data suggest that its achievements cannot be solely attributed to the Global Programme. Liberia's stronger performance in the absence of direct programme support underscores the importance of broader enabling environments, including legislative action, societal commitment, and institutional capacity – factors that may prove as decisive rather than programme participation alone.

Quantifying the difference: a post-intervention ratio of improvement

To further assess the programme's contribution, we computed a ratio of improvement in child marriage prevalence for the intervention country compared to its non-intervention neighbour ([Figure 4.5](#)). This ratio contrasts post-Phase I outcomes (after 2020) with the pre-intervention baseline period (2012–14), enabling a DiD-inspired comparison. By measuring the 'double difference' – that is, changes in prevalence in both treatment and comparison groups before and after the intervention – we approximate the programme's net effect. [Figure 4.5](#) illustrates the results for Ghana (a Global Programme country) and Togo (a non-intervention neighbour). The ratio captures relative progress, with lower values indicating greater improvement over time. The results show a steeper decline in Ghana, particularly between 2020 and 2021, suggesting a more pronounced reduction in child marriage prevalence compared to Togo, where improvements have largely plateaued. Notably, the rate of improvement begins to flatten after 2021 in both countries – a trend likely influenced by the effects of the COVID-19 pandemic, which disrupted education and increased vulnerabilities to early marriage. This dynamic is explored in greater detail in the next section. Despite these external shocks and data limitations – particularly the lack of post-2020 survey data for several other programme countries – our analysis supports two main conclusions: (1) Most programme countries with available data met or

Figure 4.5: Ratio of improvement: comparing Ghana and Togo in pre- and post-intervention periods



Source: Computed by author based on [UNICEF \(2025\)](#)

exceeded the 10 per cent reduction target during the first five years of operation; and (2) in two of three cases programme countries outperformed non-intervention neighbours, with more rapid reductions in child marriage prevalence. Looking ahead, future research could expand this analysis by estimating the number of child marriages averted as a result of the intervention, further strengthening the case for impact through modelling techniques and microsimulation approaches.

Limitations: can quantitative methods capture complex change?

The DiD approach offers a useful quasi-experimental framework for estimating causal effects. It can be applied ‘under the simplest setting with two groups and two time periods’ ([Imai and Kim, 2021](#), p 405). In this study, the method was employed in its most basic form, reflecting the constraints of limited data availability. While this enhances transparency and clearly defines the scope of the causal claims, it also highlights areas for further methodological refinement. Future studies are encouraged to build on this work by incorporating additional analyses – such as statistical tests for the parallel trends assumption, post-hoc verification, and adjustments for potential confounding variables – to enhance the robustness of the findings. Moreover, integrating qualitative insights alongside quantitative methods could provide a more comprehensive understanding of programme effects across diverse implementation contexts. Nevertheless, the use of DiD in evaluating global programmes entails important limitations. Applying this approach to large-scale, transnational interventions introduces several methodological and contextual challenges that warrant careful consideration:

1. **Parallel trend assumption:** A key assumption of DiD is that in the absence of the intervention, treatment and control groups would have followed similar trajectories over time. In this study, we attempt to satisfy this condition by selecting neighbouring countries that exhibited comparable pre-programme trends in child marriage prevalence. While this improves plausibility, the assumption remains untestable beyond the pre-intervention period, and small deviations in trajectories can bias results – particularly when trend lines are nonlinear or influenced by unobserved shocks.
2. **Comparability of countries:** Efforts were made to select neighbouring countries within the same region to control for structural similarities (for example, cultural norms, economic development, and health system capacity). However, arguing that two neighbouring countries are sufficiently comparable remains problematic. Even within regions, countries differ in governance structures, policy environments, and implementation capacities – all of which may influence child marriage trends independently of programme participation.
3. **Spillover and contamination effects:** DiD assumes that the control group remains unaffected by the treatment. However, spillover effects are inherent to global programmes, particularly those that involve regional advocacy campaigns, cross-border media coverage, or multi-country technical assistance. In fact, ‘ignoring interference may lead to biased policy evaluation and ineffective learned policies’ (Zhang and Imai, 2023, p 1). As discussed earlier, these programmes are designed to encourage knowledge sharing and norm diffusion across countries. As such, contamination of control areas – especially neighbouring non-intervention countries – is not only possible but likely, and may result in underestimated programme effects.
4. **Short time frame:** The period between the programme baseline (2015) and the target year (2020) is relatively short for detecting significant changes in deep-rooted social norms such as child marriage. In addition, the delay and irregularity in national survey schedules further restrict the capacity to observe consistent and timely outcomes. Evaluations with limited timeframes risk conflating programme effects with short-term fluctuations or external shocks, such as the COVID-19 pandemic, which affected both programme and comparison countries during the final phase.
5. **Data availability and consistency:** Data constraints – including data availability, quality, comparability, accessibility, and timeliness – pose a significant challenge for conducting any impact evaluations. In this study, such limitations meant that only 6 out of the 12 programme countries could be assessed for whether they met the target of a 10 per cent reduction in child marriage prevalence. Of those, only three

countries had sufficient and comparable data to allow for intervention vs. non-intervention comparisons, and just one country (Ghana) had available data to compute the ratio of improvement, contrasting pre- and post-intervention periods. This lack of data not only limits the depth of analysis but also impedes timely feedback loops – hindering the ability of programme managers and policy makers to make evidence-informed adjustments during the programme cycle. Moreover, measurement consistency is critical in DiD designs. While this study relies primarily on DHS and MICS data, variation across survey rounds and instruments may introduce inconsistencies in how indicators are defined or measured. This is especially relevant when comparing across countries or using different survey types (for example, DHS vs national household surveys). As an alternative, scholars have used single survey rounds with different age cohorts to assess programme exposure and outcomes, which may enhance internal consistency.

Alternative evaluation methods

Available evidence suggests that programme countries with available data met or closely approached their goal of a 10 per cent reduction in child marriage prevalence during the first five years of operation. In two of three cases, programme countries outperformed their non-intervention neighbours and regional averages over the same timeframe, indicating a likely contribution of the Child Marriage Global Programme to observed improvements. While limitations remain in isolating definitive causal effects, the triangulated evidence from DiD comparisons, target achievement, and contextual trends supports a plausible contribution claim: the Global Programme has had a meaningful impact in accelerating progress to end child marriage in participating countries.

While DiD offers a valuable approach for estimating causal effects, it is not without limitations – particularly when applied to the complexity of global programmes. Alternative quasi-experimental methods such as propensity score matching and regression discontinuity designs provide additional tools for causal inference, yet face similar challenges, including the selection of appropriate comparison groups, assumptions about parallel trends, and difficulties in accounting for contextual externalities.

Faced with these constraints, global programmes have increasingly turned to theory-driven evaluation approaches including theory of change, contribution analysis, and process tracing, to trace pathways of change in complex and non-linear environments (Mayne, 2011). These theory-driven evaluations were developed to deal with the ‘complexity of multi-level governance’ and ‘have helped open the ‘black box’ of programmes’ (Stame, 2004, p 58). But can they *really* deal with complexity – especially where

social norm transformation is the goal (Wazir, 2023)? Mixed-methods designs, incorporating case-based analysis, key informant interviews, and participatory tools alongside quantitative analysis, have also emerged as suitable alternatives for evaluating multi-level, multi-country programmes. However, these approaches often fall short of delivering robust assessments at the impact level.

Recent shifts toward local capacity-building and decentralized monitoring and evaluation (M&E) are promising steps forward. By empowering national and local partners to take the lead in evaluation design and implementation, global programmes can ensure greater contextual relevance and reduce reliance on external consultants. Participatory and feminist evaluation methods – which emphasize inclusive processes and the empowerment of stakeholders – are especially well-suited for evaluating sensitive areas such as gender norms and behaviour change, while simultaneously fostering transformation through the evaluation process itself. These approaches are increasingly recognized and supported by transnational actors, such as through the Global Evaluation Initiative’s GLOCAL Evaluation Week, which fosters bottom-up knowledge exchange and capacity-building in M&E.

In recognition of the inherent limitations of causal attribution in transnational policy environments, international organizations and scholars alike are moving toward a contribution-focused perspective – emphasizing plausible contribution, alignment with outcomes, and collective impact (Panjwani et al, 2023). Rather than attempting to isolate a singular causal pathway, this approach acknowledges the complexity of systems change, where interventions are interdependent, dynamic, and deeply embedded in context. It calls for moving beyond linear models of impact and embracing a culture of adaptive learning, iteration, and co-creation. As Duflo (2020, p 1964) reflects from her own field experience, scaling effective policies and programmes requires persistence and partnership: ‘One lesson is that it takes many experiments. Another clear lesson is that the researcher’s role is not restricted to giving advice from some sort of a pedestal. Along with the government, researchers jointly try and err. They co-create’.

Finally, innovations in data triangulation and adaptive learning offer a pragmatic way forward. Institutions such as the French Institut de Recherche pour le Développement (IRD) illustrate how combining diverse data sources – such as national surveys, hospital records, and qualitative insights – can produce more credible, context-sensitive evaluations, particularly in settings with limited or unreliable data (personal conversation with Marion Ravit). Such approaches allow for the development of adaptive M&E frameworks that support real-time learning and course correction, which is essential for navigating the dynamic and evolving landscapes of global development.

The end of harmful practices in sight? Backlashes due to polycrisis

Over the past decades, a notable decline in harmful practices has occurred. These positive trends coincide with growing awareness, multisectoral mobilization, and policy action at local, national, regional, and global levels. The commitment towards Sustainable Development Goal (SDG) 5 on gender equality is one testament. Yet, this progress is uneven and fragile. Recent years have seen troubling signs of stagnation and even backsliding in specific regions and populations, largely due to the compounded impact of multiple, overlapping crises coined as a ‘polycrisis’ (Fornalé, 2023). Humanitarian emergencies, climate- and war-related displacement, geopolitical instability, and global health shocks such as the COVID-19 pandemic have disrupted communities across the world, weakened protection mechanisms, and exacerbated existing gender inequalities. These crises have also heightened the risk of harmful practices being used as coping strategies, especially among the most vulnerable households. This section synthesizes the latest data on the prevalence and dynamics of harmful practices, focusing on child marriage, FGM and gender-biased sex selection. Drawing on global datasets, regional snapshots, and emerging evidence from UN reports and peer-reviewed research, it examines not only promising signs in declining prevalence but also how intersecting crises are undermining progress toward the elimination of harmful practices.

Promising signs in declining prevalence

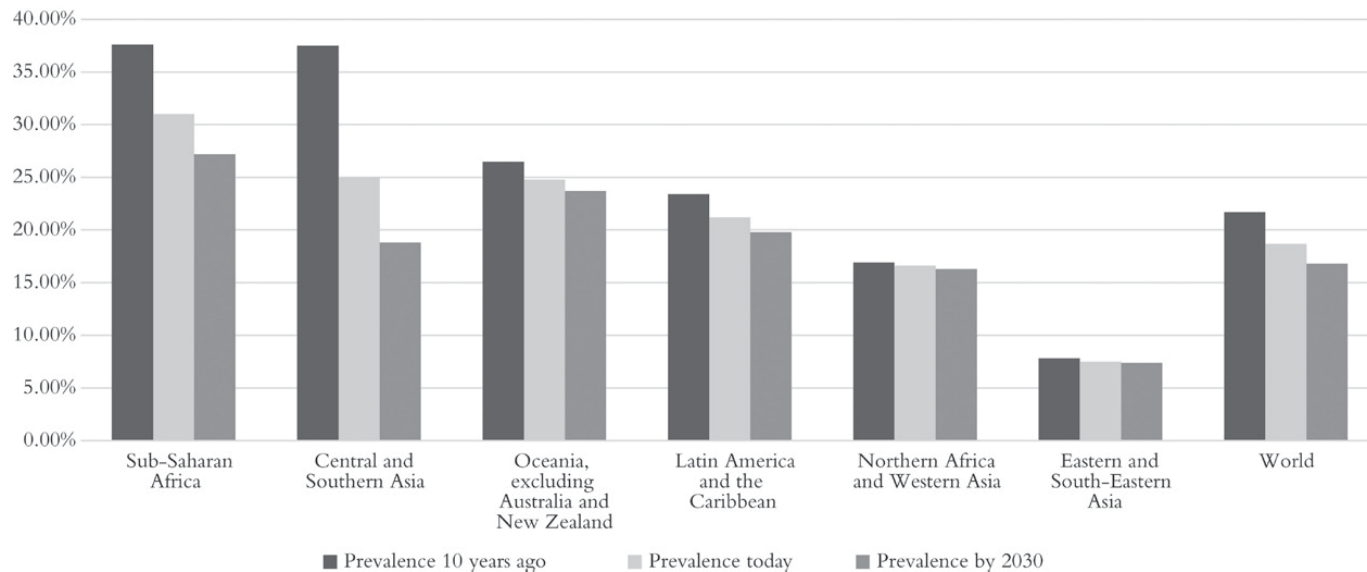
Child marriage: Over the past decade, the global prevalence of child marriage has dropped from 23 per cent to 19 per cent (UNICEF, 2025). However, the pace of progress remains insufficient to meet the SDG target of ending child marriage by 2030. According to UNICEF projections, if current trends persist, the estimated global prevalence in 2030 will stand at 16.8 per cent (UNICEF, 2025). At this rate, it would take an estimated 300 years to fully eliminate the practice (UNICEF, 2023). Progress is highly uneven both within and across countries and regions, often masked by national averages. Girls from richer socio-economic backgrounds have recorded the steepest decline in child marriage. In contrast, girls from the poorest households have seen the least progress, and in some cases, even regression. South Asia accounts for the largest share of the global burden despite significant reductions in prevalence. Nearly 45 per cent of all women who were married before the age of 18 live in South Asia, with one-third in India alone (UNICEF, 2023). India’s contribution to the global decline is substantial. According to a recent Lancet article, the prevalence of child marriage among girls in India dropped from 49.4 per cent to 22.3 per cent

between 1993 and 2021, while the prevalence among boys decreased from 7.1 per cent to 2.2 per cent (Gausman et al, 2024). The sharpest declines occurred between 2006 and 2016 (before the launch of the global programme), though between 2016 and 2021, a reversal was noted in several Indian states, with rising prevalence among both girls and boys in specific regions. As of 2021, approximately 13.5 million women and 1.5 million men aged 20–24 in India were estimated to have been married as children (Gausman et al, 2024). In contrast, in other parts of the world, progress remains slow or stagnant. In Sub-Saharan Africa, the average rate stands at 31 per cent, while in Oceania and LAC, it is 25 per cent and 21 per cent, respectively (see Figure 4.6).

Notably, seven of the ten countries with the highest child marriage prevalence are located in West and Central Africa, where protracted crises and poverty exacerbate risks (UNICEF, 2023). In the Sahel region, prevalence has remained stable over the past 25 years, with over half of young women in the Sahel married in childhood, 95 per cent of married girls out of school, and 9 in 10 giving birth before age 20 (UNICEF, 2020a). In Northern Africa and Western Asia and East and South-East Asia rates are below the global average, but progress is equally slow (see Figure 4.6). A systematic review of 34 prevalence studies and 14 trend studies, analysing data from 127,945 participants, confirms that child marriage is declining in most contexts. Key individual-level factors include girls' education and employment, while interpersonal factors – such as the education and occupation of parents and husbands – also play a significant role (Pourtaheri et al, 2023). At the community level, socio-economic status, ethnicity, religion, rural/urban residence, and regional norms influence risk. To accelerate reductions in child marriage, evidence calls for investments in girls' education (including through cash or in-kind transfers), as well as broader policies aimed at reducing poverty and structural inequalities (Hahn et al, 2018; Paul, 2019; Chalasani et al, 2021; Malhotra and Elnakib, 2021; Dietrich et al, 2022; Pourtaheri et al, 2023).

Female genital mutilation: Evidence suggests that the global prevalence of FGM is slowly declining (Koski and Heymann, 2017; Kandala et al, 2018; Matanda et al, 2020; Farouki et al, 2022; Ayenew et al, 2024; UNICEF, 2024b). However, progress is highly uneven across countries and regions, and data gaps continue to obscure the full extent of the issue. A study by Farouki et al (2022) observed large variations in FGM prevalence between countries, with encouraging declines in many contexts. Yet, the authors caution that current estimates likely understate the actual global prevalence, due to noncomparable denominators, outdated or missing surveys, and limited data coverage in several countries where the practice remains widespread. Long-term trend data reinforce this mixed picture. A comparative study of 22 countries found that while the prevalence of FGM/C is declining

Figure 4.6: Child marriage prevalence by region, in 1915, 2025, and 2030



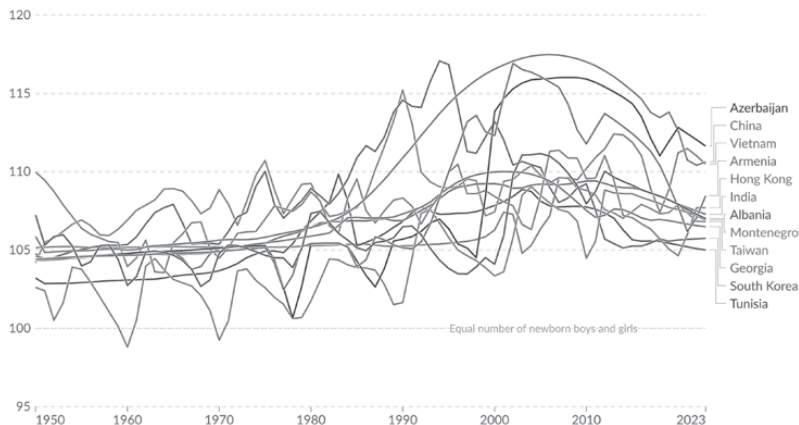
Source: [UNICEF \(2025\)](#)

overall, it remains pervasive in several high-burden settings. In fact, more than half of women in 7 of the 22 countries included in the analysis had still undergone the procedure (Koski and Heymann, 2017). A recent UNICEF publication (2024b) categorizes countries into groups based on progress toward eliminating FGM. Countries with the sharpest declines include Sierra Leone, Burkina Faso, Ethiopia, Liberia, Maldives, Nigeria, Kenya, Benin, Tanzania, and Iraq. Countries such as Egypt, Eritrea, Djibouti, Guinea, Mauritania, and Sudan, among others, have witnessed some decline. However, no measurable progress has been made in countries like Somalia, Mali, Gambia, Guinea-Bissau, and Senegal, suggesting pockets of resistance (UNICEF, 2024b).

Gender-biased sex selection: Chao et al (2019) have identified a dozen countries mainly in Asia, the Caucasus, Eastern Europe and North Africa with skewed sex ratios at birth in favour of males. Figure 4.7 shows the trajectory of sex ratios at birth (the number of males per 100 female births) between 1950 in 2023 in these 12 countries of prevalence: Albania, Armenia, Azerbaijan, China, Georgia, Hong Kong, India, Montenegro, South Korea, Taiwan, Tunisia, and Vietnam.

Whereas the biological sex ratio at birth (SRB) tends to fluctuate around 105 male births per 100 female births, these countries have witnessed rising levels of birth masculinization since the 1980s, facilitated by the spread of ultrasound and sex-selective abortions (Guilmoto, 2009, 2015b; Rahm, 2019a). Some countries have moderate levels of sex imbalances with as SRB of around 110 (for example, Albania and Montenegro), while other countries record much higher levels of sex imbalances reaching 115 and

Figure 4.7: Sex ratio at birth, 1950–2023, selected countries



Note: It's considered that 105 is the biologically expected sex ratio at birth.

Source: UN, World Population Prospects (2024)

above (for example, Azerbaijan and China). In several countries the SRB has improved over the past decades and is already back to its natural levels after years of imbalances. A well-documented case is South Korea, where the rise and fall of sex imbalances at birth have been thoroughly verified using extensive and reliable birth registration data (Cho, 1994; Chun and Das Gupta, 2009, 2022; Yoo, Hayford, and Agadjanian, 2017; Rahm, 2019a). Other, less prominent examples of a complete sex ratio transition – such as Georgia, Singapore, and Tunisia – demonstrate that this demographic shift has occurred across diverse political and economic settings and in the absence of targeted interventions (Guilmoto and Rahm, 2021). Chao et al (2021) projected SRB trends through 2030 and beyond under two scenarios: S1, involving countries with strong evidence of SRB inflation, and S2, which includes additional countries at risk. In both scenarios, the global SRB is expected to return to normal levels (~1.05) by 2030. Under S1, convergence is expected around 2030, particularly for the three major contributors to global SRB imbalances – China, India, and Vietnam – with China showing the most rapid decline from its peak SRB in 2010. Under S2, new regions – including North and sub-Saharan Africa, the Caucasus, Central Asia, and South Asia – are projected to experience rising SRBs, with inflation in sub-Saharan Africa expected primarily in the second half of the century. The study also estimates the cumulative number of missing female births (CMFB) from 2018 to 2100: 8.1 million [2.3–19.6] under S1 and 24.8 million [13.1–44.1] under S2 (Chao et al, 2021).

While these are promising signs, momentum toward ending harmful practices is faltering in today's volatile global landscape. The United Nations has warned the convergence of multiple, overlapping crises – ranging from armed conflict to climate change – is putting the achievement of Sustainable Development Goals, including SDG 5.3, at serious risk (UN, 2024). The next sections turn to the available evidence related to these intersecting challenges of crisis and conflict, climate change, and COVID-19.

Crisis, conflicts, and backlash on gender equality

Armed conflicts, humanitarian crises, and a growing backlash against women's rights are reversing 'hard-won' gains and weakening the foundations of global gender programmes (UNICEF and UNFPA, 2023; UN Women, 2024a, 2025). According to the United Nations (2023) two billion people – one in four globally – now live in conflict-affected areas, marking the highest levels since the end of World War II. The ACLED Conflict Index (2024) reports that the number of violent conflicts worldwide has doubled over the past five years – impacting the majority of countries where global gender programmes are active. Between 1 January 2019 and 31 December 2024, a total of 323,696 conflict-related fatalities were recorded across

the 30 countries in which global gender programmes operate (ACLED, 2024). The highest death tolls were recorded in countries targeted by the Joint Programme to Eliminate FGM: Yemen (76,301), Nigeria (54,505), Sudan (37,328), Ethiopia (35,241), Somalia (33,135), and Mali (19,782). In these conflict-ridden settings, gender-based violence, harmful practices, and violations of women's rights intensify as protection systems collapse and impunity prevails (Bellizzi et al, 2020; UNICEF and UNFPA, 2023). In Sudan, ongoing conflict has led to a reported doubling of gender-based violence cases. Over 2.5 million school-aged girls – 74 per cent – are out of school, increasing their exposure to harmful practices such as child marriage and FGM (UN Women, 2024b). In Ethiopia, currently 9 million children are denied schooling due to conflict, violence, and displacement (UNICEF, 2024a). Evidence shows that humanitarian settings heighten vulnerabilities while reducing visibility. Research by Elnakib and Metzler (2022) highlights major evidence gaps on FGM in crisis contexts. Most existing studies focus on migrant populations in high-income countries, while the experiences of displaced women and girls in lower-income regions remain underexamined. Harmful practices are often sidelined in emergencies, seen as 'social issues' secondary to food, shelter, and health – making them even harder to address. Similarly, child marriage is most prevalent in fragile settings: nine of the ten countries with the highest rates are classified as fragile or extremely fragile (Mazurana and Marshak, 2019).

The UNFPA–UNICEF Global Programme to End Child Marriage identifies these interconnected challenges confronting its efforts (UNICEF and UNFPA, 2023). Especially armed conflicts and humanitarian crises are widening inequalities. The war in Ukraine has disrupted global food and energy markets, fuelling inflation, hunger, and poverty – each of which is a well-documented driver of child marriage and FGM. In response, central banks raised interest rates, increasing the value of the US dollar and reducing access to external financing for low- and middle-income countries. This has significantly eroded fiscal space for gender-responsive public investment, further weakening the enabling environment for transformative change. Moreover, a growing backlash against gender equality, fuelled by the weakening of democratic institutions, is actively undermining progress (see also Box 4.3). According to UN Women (2025), one in four countries reported that a backlash on gender equality is hampering the implementation of the Beijing Platform for Action. Around the world, gender-transformative laws and programmes face rising resistance – from the blocking of legislation to ban child marriage, to efforts that criminalize adolescent sexuality, restrict access to contraception and reproductive health services, and curtail comprehensive sexuality education. The defunding of international commitments, including by the US, threatens to trigger imitation effects and ripple across global partnerships – jeopardizing resources for tackling

Box 4.3: UN Secretary-General António Guterres on the global gender backlash

Instead of mainstreaming equal rights, we're seeing the mainstreaming of misogyny. We must fight these outrages and keep working to level the playing field for women and girls.

A. Guterres (2025a) for International Women's Day, March 2025

A surge in misogyny, and a furious kickback against equality threaten to slam on the brakes, and push progress into reverse ... Stripping women of their rights ... Rolling back progress ... And causing leaders to drop equality like a stone. My warning to leaders of all kinds is simple: Do not sacrifice equality for false expediency. It is a miscalculation; a misunderstanding of how societies thrive.

A. Guterres (2025b) for CSW69, March 2025

harmful practices and weakening multilateral cooperation. Budgetary cuts from traditional donors in a shifting international landscape strain both implementing partners on the ground and the UN agencies that coordinate global gender programmes. These cuts curb operational capacity, forcing agencies to restructure, downsize, and relocate staff. For instance, UNICEF anticipates a 27 per cent decline in its 2026–29 resources compared with the 2022–25 period. As part of the UN 80 restructuring plan, major institutional changes take place, including a merger of UNFPA and UN Women and the relocation of staff from New York to other regions. In theory, such consolidation could streamline operations and enhance coherence. Yet, given the highly contested nature of sexual and reproductive health and rights (SRHR), there is a real risk that UNFPA's mandate could become significantly diluted in the process.

Climate change and harmful practices

Climate change is increasingly recognized as one of the most profound structural threats of the 21st century, with far-reaching consequences for health, livelihoods, migration, and inequality (Dryzek, Norgaard, and Schlosberg, 2011). Among its lesser-explored yet increasingly visible dimensions is its gendered impact. According to UN Women (2025), climate-related environmental degradation disproportionately affects women and girls – deepening poverty, worsening food insecurity, and heightening the risks of gender-based violence and harmful practices. These gendered vulnerabilities are particularly evident in the intensification of child marriage,

female genital mutilation, and other forms of gender-based violence. As the global climate crisis intensifies, a growing body of empirical evidence underscores the critical need to examine and respond to the intersection of climate vulnerability and gender-based harms.

Recent literature has investigated the pathways through which climate change worsens the structural drivers of harmful practices. [Pope et al \(2022\)](#) conducted a scoping review demonstrating how environmental crises – through the loss of household income, displacement, educational disruption, and increased risks of sexual violence – exacerbate known triggers of child marriage. These pressures are further mediated by local socio-cultural norms, such as the exchange of bride price or dowry, which may turn child marriage into a perceived strategy of adaptation or survival. Similarly, [Arunda et al \(2024\)](#) identify a growing yet uneven evidence base on the link between climate change and harmful practices in low- and middle-income countries. Their scoping review found that extreme weather events, such as droughts, heatwaves, and storms, are associated with increases in forced marriages and FGM, particularly in sub-Saharan Africa and South-East Asia. While most studies found a positive correlation, one study noted a temporary decline in child marriage during droughts – suggesting context-specific dynamics that warrant further exploration ([Arunda et al, 2024](#)).

The Population Council's evidence gap map in sub-Saharan Africa further highlights the fragmentation of climate research intersecting with sexual and reproductive health and rights (SRHR), noting that while droughts and floods are moderately covered, climate events such as wildfires, tropical cyclones, and saltwater intrusion remain critically under-researched ([Amadi et al, 2025](#)). This fragmented understanding constrains efforts to build climate-resilient gender programming and integrate SRHR into national climate adaptation plans. The increase in climate-induced displacement – which surpassed conflict as the leading driver of internal displacement globally in 2023 – represents another key mechanism through which harmful practices are exacerbated ([Bellizzi, Darwish, and Elnakib, 2025](#)). Displaced women and girls face compounded vulnerabilities due to limited access to resources, weakened protection systems, and breakdowns in community-based accountability mechanisms. The example of Kenya's severe 2022 drought is illustrative: in affected regions, women experienced higher rates of malnutrition and dehydration, alongside surges in FGM, child marriage, and gender-based violence ([Bellizzi, Darwish, and Elnakib, 2025](#)).

Case studies offer further nuance. Research among the Maasai in Kenya found that the collapse of livestock-based livelihoods due to climate change undermined the community's economic base and social fabric ([Esho et al, 2022](#)). In response, families increasingly turned to child marriage and FGM as coping mechanisms – perceived as avenues to secure dowry, reduce

economic burden, or conform to intensified patriarchal expectations. These practices function as gendered strategies of adaptation to environmental crisis – yet carry devastating long-term consequences for girls’ rights and well-being. In a study of Kenya’s Garissa and Isiolo counties, [Mubaiwa and Chilo \(2025\)](#) found that drought and food insecurity not only intensified harmful practices but also diverted attention and resources away from prevention efforts. The complexity of addressing FGM under conditions of environmental stress is further compounded by entrenched cultural beliefs, education disruption, and weak institutional infrastructure. The authors advocate for mobile education units, community-based empowerment programmes, and culturally sensitive engagement with local leaders as part of a sustainable strategy to confront the dual challenges of climate vulnerability and harmful practices.

At the global level, international law and climate policy frameworks have yet to adequately recognize or respond to the gendered consequences of climate change, particularly in relation to sexual and gender-based violence (SGBV) and harmful practices. As [Desai and Mandal \(2021\)](#) argue, the absence of dedicated legal instruments addressing SGBV in climate-induced disasters leaves women and girls exposed to severe physical and psychological harm without adequate protection or redress. The authors call for a reframing of climate law and policy to incorporate gender-specific vulnerabilities and commit to preventing SGBV and harmful practices as part of climate resilience strategies. Together, this growing body of research signals the urgent need to mainstream gender and SRHR into climate policy and programming. Harmful practices must be recognized not only as cultural or legal challenges but also as climate justice issues. As climate change exacerbates poverty, displacement, food insecurity, and gender inequality, it increases the likelihood that families will resort to early marriage or FGM as strategies of last resort – particularly in fragile or resource-poor settings.

COVID-19 and harmful practices

The global outbreak of coronavirus disease 2019 (COVID-19) has caused unprecedented disruptions around the globe, triggering a large-scale public health emergency with profound economic, social, and institutional consequences ([The Lancet Public Health, 2020](#)). While COVID-19 mortality has been higher among men, the social and economic consequences of the pandemic have fallen disproportionately on women and girls ([Wenham et al, 2020](#)). As a result, much progress in advancing gender equality, particularly under Sustainable Development Goal 5, has been stalled or reversed ([Azcona, Bhatt, and Davies, 2020; Bhatt et al, 2024a](#)). COVID-19 intensified existing structural disparities and catalysed what UN agencies and scholars have termed a ‘shadow pandemic’ – a dramatic increase in gender-based violence

and harmful practices (Guidorzi, 2020; UNFPA, 2020a; UNICEF, 2020b; UN Women, 2020). Evidence from multiple studies points to a marked uptick in the prevalence of FGM and child marriage during the pandemic (Bellizzi et al, 2020; Akrofi, Mahama, and Nevo, 2021; Esho et al, 2022; Mahtab and Fariha, 2022; Mubaiwa, Bradley, and Meme, 2022). This surge is driven primarily by the interruption of prevention programmes, the reallocation of public health resources, and economic hardship. UNFPA projected that a two-year delay in programming could lead to two million additional cases of FGM and 13 million additional child marriages over the next decade, that otherwise would have been averted (The Lancet Global Health, 2020; UNFPA, 2020b).

The pandemic also undermined access to essential sexual and reproductive health services, with consequences for both individual agency and demographic outcomes. As health systems redirected resources to crisis response and non-emergency services were suspended, many women and girls were unable to access contraceptives, safe abortion services, or maternal care. Despite the designation of these services as ‘essential’ in several countries (for example, India and Nepal), lockdowns, travel restrictions, and fear of infection kept many from seeking care (Nepal and Aryal, 2020). According to UNFPA (2020), 47 million women in low- and middle-income countries lost access to modern contraception during the pandemic, resulting in 7 million unintended pregnancies in a matter of months. Meanwhile, Riley et al (2020) estimated that a 10 per cent proportional decline in the use of sexual and reproductive healthcare services resulting from COVID-19-related disruptions in 132 low- and middle-income countries could trigger up to 15.4 million additional unintended pregnancies. In Asia, in particular, observers raised concerns about a spike in unwanted pregnancies (Saikia and Kumar Bora, 2020), which force women to seek unsafe abortions or give birth to unwanted children.

The unwantedness of daughters, particularly in patriarchal societies where son preference is strong, is a known driver of gender-biased sex selection and postnatal discrimination. In the short term, COVID-19 exacerbated risks through service disruptions and economic shocks. In the medium to long term, the economic strain can intensify gendered family preferences, as families seek to maximize limited resources by investing more in sons than daughters. Historically, large-scale economic disruptions have been linked to rising levels of sex imbalances. For example, following the collapse of the Soviet Union, the Caucasus region experienced a rise in SRB (Duthé et al, 2012), while in South Korea, the Asian Financial Crisis was associated with a spike in sex-selective practices (Lee and Orsini, 2018). It is therefore plausible that the economic fallout of COVID-19 triggered increased resort to discriminatory practices – particularly in settings with entrenched son preference and weak social safety nets (Tafuro, 2020). Although a systematic

review found mixed and inconclusive evidence on changes to the SRB during the pandemic – with some countries showing increases, others decreases, and some no change (Fontanesi et al, 2024) – no comparable studies have yet been conducted in countries with high baseline levels of son preference. The available literature highlights growing violence against women during the pandemic in patriarchal countries like India (Mukhopadhyay and Roy, 2022), but has yet to explore potential links between economic vulnerability, reproductive coercion, and gender-biased sex selection.

In sum, the overlapping crisis linked to conflict, climate change, and the lingering effects of COVID-19 erode gender equality and deepen the consequences of harmful practices. As evidenced in global trend data, the rate of decline in harmful practices – particularly child marriage and female genital mutilation – remains insufficient to meet the 2030 targets. Progress to date has also been highly uneven, disproportionately benefitting girls in wealthier, urban, and more educated households, while leaving behind the poorest, most marginalized, and rural populations. Together, these mounting challenges threaten not only the sustainability of existing gains but also the foundational SDG principle of ‘leaving no one behind’ (United Nations, 2015). Without renewed political will, equitable investment, and robust local mobilization, efforts to eliminate harmful practices risk stalling – or even reversing – in the years ahead.

Conclusion: reimagining systems change

This chapter has critically assessed the role of monitoring and evaluation in global programmes aimed at eliminating harmful practices. While global initiatives invest heavily in results frameworks, logframes, and performance indicators to demonstrate progress, they often fall short in grappling with the real complexities of change. The deeper question is not only whether programmes work, but how, why, and under what conditions – and what kind of systems transformation they are catalysing, if any. We reviewed the global architecture of M&E and presented a conceptual model that exposes the limitations of linear thinking in highly dynamic, multi-actor, multi-level systems, which applies well beyond the three case studies, to global governance in general. The difference-in-differences analysis of the Global Programme to End Child Marriage illustrates the methodological promise – and the boundaries – of impact evaluation in global contexts. Besides persistent data gaps, the analysis has shown that Global Programme to End Child Marriage met its goal of 10 per cent decrease in prevalence in the first 5 years of operation in 5 out of 6 programme countries with available data. Moreover, the programme countries outperformed non-intervention countries in two out of three cases. Nevertheless, current methods struggle to account for spillover effects, feedback loops, contextual

variation, and time lags – all hallmarks of systems change. In reviewing the latest trends in child marriage, FGM/C, and GBSS, we highlighted how shocks and crises – conflict, climate change, pandemics – can abruptly reverse progress, revealing the fragility of gains and the limits of technocratic responses. Indeed, global programmes are increasingly under pressure to attest results: how many girls reached, how many policies influenced, how many marriages prevented. Yet the further we move along the results chain – from inputs and outputs to outcomes and impacts – the more uncertain are causal patterns. Attribution becomes less about evidence and more about narration, where numbers become powerful actors to mobilize funds and legitimate action. This is not a flaw of design, but a signal that we may be asking the wrong question. Rather than seeking to attribute isolated impacts to individual programmes, we need to ask how global interventions contribute to long-term, structural change.

This calls for a paradigm shift in evaluation – from attribution to contribution, from control to complexity, from measurement to meaning (Mayne, 2011; Zappalà, 2020; Apgar and Levine, 2024). It requires embracing systems thinking, recognizing that social norms, power relations, and institutional practices interact in non-linear, emergent ways. Evaluations then become tools for learning and adaptation, not just accounting and compliance. Critically, the politics of evaluation cannot be ignored. Evaluations are often commissioned not to learn, but to signal legitimacy to donors, governments, and the public. As Welfens and Bonjour (2023) argue in their study of the EU Trust Fund for Africa, M&E frequently functions less as a generator of evidence and more as a mechanism of legitimation – for policies, institutions, and entire governance regimes. Indicators, too, carry power (Haas, 1997; Kelley and Simmons, 2015), shaping what is seen, what is funded, and what is prioritized. Moreover, the evaluation industry – comprising large firms, boutique consultancies, and freelance experts – has its own incentives. External evaluators are not always independent, and their work is often shaped by donor preferences, tight timelines, and pre-set logics. As such, even external evaluations can be embedded in systems of influence, limiting their critical potential. Against this backdrop, we must also confront a deeper concern: for whom are evaluations conducted, and to what end? Do they benefit recipients? Influence policy makers? Guide implementers? Or are they primarily produced to satisfy donor reporting cycles and organizational strategies? As Bovens (2009) notes, accountability is relational, the relationship between the actor and the forum in which the actor has to justify his or her actions.

To move forward, global programme evaluation must become more participatory, reflexive, and transformative. Co-creation is essential – not only to improve data quality but to ensure that evaluation questions reflect the priorities of those most affected. The goal must shift from proving isolated

success to understanding system dynamics: What reinforces harmful norms? What disrupts them? What coalitions sustain change across time and space? Furthermore, we need more research on the unintended consequences of global gender programmes. As Karl [Popper \(1971\)](#) reminds us, it is the moral responsibility of social scientists to explain not only outcomes but also the unintended effects of intervention. Are we inadvertently fuelling backlash? Are we changing norms – or just shifting practices underground? Finally, there is a pressing need to connect global programme evaluation to the broader performance frameworks of international organizations ([Lall, 2017](#)). These systems do not exist in isolation: they are deeply entangled in transnational networks, political agendas, and institutional logics of international organizations. As [Duflo \(2004\)](#) noted, evaluation is not merely an accountability tool. It is a strategic investment – an opportunity to amplify impact far beyond any one programme’s funding envelope. For that, we need to reimagine what it means to foster systems change, challenge dominant logics, and make the invisible visible – especially for those most marginalized. Without this reorientation, the global ambition to end harmful practices will remain unfulfilled.

Rethinking the Future: Knowledge, Power, and the Politics of Ending Harm

This concluding chapter revisits the book's main findings and reflects on the future of global governance for promoting gender equality and ending harmful practices at a moment of profound – if not tectonic – shift in international development cooperation. At the time of writing, the withdrawal of the United States from international organizations, conventions, and treaties deemed incompatible with national interests by the Trump administration has directly affected numerous UN entities, including UN Women, UNFPA, UNDESA, and the Office of the Special Representative of the Secretary-General on Violence Against Children. The resulting financial and political devaluation of multilateral institutions – alongside growing attacks on international partnerships and the rule of law – raises fundamental questions about the viability, legitimacy, and sustainability of global programmes as instruments of transnational governance.

In this turbulent context, what future role can global programmes play? From a pessimistic perspective, the current backlash against multilateralism and gender equality may signal the gradual erosion, if not the end, of *global* programmes. As ANT reminds us, networks survive only insofar as they are able to maintain connections and continuously enrol actors; the loss of relational ties constitutes a form of institutional death. The trajectory of the Global Programme to Address Gender-Biased Sex Selection illustrates this dynamic: declining political salience, shrinking funding, and difficulties in sustaining cross-sectoral and multi-level enrolment ultimately led to its dissolution. Similar risks now confront other initiatives, as financial pressures intensify, donor priorities shift away from gender and development, and resources are increasingly redirected toward militarization and geopolitical conflict – threatening to undo hard-won progress in addressing harmful practices.

Yet an alternative, more optimistic reading is also possible. Precisely because global programmes operate through dense, multi-actor and multi-scalar networks, they may display greater resilience to geopolitical shocks than more centralized governance arrangements. Empirically, these programmes have already demonstrated an ability to operate under extreme conditions, including in conflict-affected settings such as Yemen, and may function as institutional ‘backdoors’ through which gender equality work can persist during periods of political backlash. From this perspective, the sustainability of global programmes will depend less on formal institutional stability than on their capacity to sustain relational infrastructures through collaborative, bottom-up knowledge production, and continuous processes of actor enrolment. It is under these conditions that global programmes act as ‘connecting sites’ – not only linking policy domains and governance levels, but also fostering adaptive and resilient forms of collective action against harm.

The remainder of the chapter is organized as follows. First, it synthesizes the book’s main findings by revisiting the central research question and hypotheses, evaluating them in light of the empirical and theoretical analysis, and reflecting on the limitations of the study and the methodological and analytical challenges of researching global gender programmes, particularly where deeply embedded social norms intersect with multi-actor and multi-level governance structures in volatile political environments. Second, building on insights from ANT, the chapter explores how socio-technical innovations – driven by both human and non-human actors – can promote health over harm, while also acknowledging the constraints and political challenges of scaling such interventions. Third, the chapter examines how knowledge transfer in global gender programming can be strengthened through co-creative and participatory approaches that incorporate plural and situated forms of knowledge as a basis for actor enrolment and network sustainability. Finally, the chapter closes with broader reflections on reclaiming the politics of knowledge and regrounding power for inclusive and resilient forms of global gender governance.

Synthesis of knowledge in motion: summary of the book

This book explored the global governance of harmful practices through an interdisciplinary lens, drawing on insights from political demography, global governance, cultural anthropology, sociology, gender studies, and science and technology studies. At its core, the book examined how global gender programmes – particularly those targeting the elimination of female genital mutilation, child marriage, and gender-biased sex selection – shape knowledge production, knowledge transfer, and policy change. Using ANT

as its conceptual anchor, the book mapped how both human and non-human actors – individuals, technologies, evidence, financial resources, regulations, and institutions – interact to co-produce global governance responses to harmful practices. The inquiry was guided by several questions: How is knowledge generated, processed, and transferred through global programmes and across governance levels? Who are the actors and networks involved in the translation of knowledge into policy? What roles do knowledge hubs play in mediating this transfer? And what factors help or hinder the translation of knowledge into global, national, and local policy action? To address these questions, the research employed a mixed-methods approach, combining key informant interviews, participant observation, social network analysis (SNA), with secondary demographic data analysis.

Harmful practices were examined through a global governance framework, applying the 3-M model – motives, methods, magnitudes – to unpack their similarities and differences (Rahm, 2019a, 2021). Although distinct, female genital mutilation (FGM), child marriage, and gender-biased sex selection share common structural drivers rooted in gender inequality, socio-cultural norms, sexual morals, marriageability, political factors, religious beliefs, and economic rationales. Their methods range from traditional rituals to medicalized or high-tech procedures, evolving across time and place. While often associated with the Global South, parallel forms of harmful practices persist in the Global North. The book also traced the evolution of global responses, from colonial interventions to international human rights regimes, to the emergence of transnational gender programmes. These programmes, while anchored in the normative framework of Sustainable Development Goal (SDG) 5.3, function not merely as global policy instruments but as ‘mobile technologies’ that circulate across spaces and institutional boundaries. They do not simply travel intact; rather, they are constantly (re)assembled and adapted through negotiations with diverse human and non-human actors. Their efficacy hinges on their ability to enrol and stabilize heterogeneous actor-networks – including governments, civil society, experts, and local communities – while aligning with situated knowledges, institutional logics, and political dynamics. In this sense, their capacity to influence policy is contingent, relational, and embedded in context-specific processes of translation, mediation, and contestation.

At the heart of this analysis has been the ANT, bridging insights from Science and Technology Studies (STS) and global governance – two fields rarely combined in the study of transnational policy making. STS foregrounds how technologies, material artifacts, and knowledge production shape governance structures in an era defined by transnational socio-technical processes (Mayer and Acuto, 2015), though it has been critiqued for its limited engagement with power (Jepsen, 2017). Conversely, global

governance scholarship emphasizes power asymmetries, institutional legitimacy, and regulatory authority (Zürn, 2018), but often overlooks the role of technologies and infrastructures. This book merges the two to offer a more holistic framework, bringing attention to the materiality of governance, while providing tools to interrogate accountability. Through the lens of ANT, the study examined three European Union-funded, United Nations led programmes targeting female genital mutilation, child marriage, and gender-biased sex selection. ANT repositions governance as a network of constantly shifting associations, where agency is distributed among both human and non-human actors. This materialist and relational perspective shifts focus from static institutions to dynamic processes. The analysis drew on Latour's three moves – *localizing the global*, *redistributing the local*, and *connecting sites* – to trace how global programmes mobilize knowledge, actors, and influence (Latour, 2005). In Latour's words:

Instead of having to chose [sic] between the local and the global view, the notion of network allows us to think of a global entity – a highly connected one – which remains nevertheless continuously local ... Instead of opposing the individual level to the mass, or the agency to the structure, we simply follow how a given element becomes strategic through the number of connections it commands and how does it lose its importance when losing its connections. (Latour, 1997, p 6)

In *localizing the global*, we examined the role of knowledge in how global programmes are constructed and contested, applying an anti-foundational lens in the making of gender programmes. We saw that knowledge is strategically mobilized at different stages of the translation process. The process of translation (in ANT terms) unfolds in four interrelated steps: (1) problematization – defining harmful practices as global problems and breaking taboos through transnational demographic evidence and human rights discourse, creating the need for a coordinated response; (2) intersement – identifying 'scalable' solutions and 'best practices', involving diverse actors and aligning their interests with the proposed interventions; (3) enrolment – convincing actors to formally align themselves with the goals of the global programmes and take on specific roles within the network; (4) mobilization – sustaining commitment and knowledge flows through ongoing engagement, adaptability, and the mediation of diverse needs and interests. Not all programmes succeed in maintaining actor-networks. The Global Programme to Address Gender-Biased Sex Selection, for example, faced significant resistance due to its intersection with contested issues like abortion. This limited its ability to mobilize support and ultimately contributed to its discontinuation, demonstrating how knowledge contestations around sensitive issues can dissolve fragile governance networks.

In *redistributing the local*, we explored how social network analysis and digital platforms, particularly Twitter, served as dynamic arenas for knowledge exchange and actor–network formation in global gender programmes. By analysing online activity during peak advocacy moments (for example, International Women’s Day, Zero Tolerance Day for FGM), it mapped how actors – UN programmes, NGOs, donors, and grassroots organizations – engaged, aligned, or diverged in their messaging. Drawing on ANT, the analysis highlighted how influence stemmed from relational positioning rather than follower count, with NGOs like Girls Not Brides, The Orchid Project, and The Girl Generation often emerging as central hubs, surpassing global programmes in shaping digital discourse. While UN programmes such as @gpchildmarriage and @gptoendfgm shifted between central and peripheral roles, civil society actors and youth-led initiatives consistently drove momentum. SNA metrics (degree, betweenness, closeness centrality) revealed fragmented yet performative networks shaped by timing, alliance-building, and advocacy goals. Certainly not all global programme partners are active on X. Nonetheless, the findings underscore how knowledge transfer is a relational, contingent, and event-driven process, brokered by mediators and shaped by temporary attachments. This reinforces Latour’s notion of ‘redistributing the local’, illustrating how grassroots actors and digital coalitions reconfigure the architecture of global gender governance.

In *connecting sites*, we examined knowledge hubs as an emerging governance mechanism in transnational programming. These hubs – both digital and human-driven – serve as connecting sites where data, practices, and insights are circulated, translated, or, at times, obstructed. Ideally embedded within broader knowledge management strategies, hubs aim to link institutions, regions, and stakeholders in sustained learning processes. Drawing from empirical cases, the analysis identified three modes of governing knowledge transfer: *localization* which fosters local ownership but struggles with sustainability and quality control; *centralization* which ensures institutional control and coherence but often limits accessibility and demands high internal capacity; *co-creation*, which distributes power and fosters engagement through collaborative design but requires trust and coordination. These modes were exemplified by the Global Programmes on gender-biased sex selection (GBSS) (localization), FGM (centralization), and Child Marriage (co-creation). Each model revealed inherent trade-offs between control, inclusion, resource investment, and knowledge uptake. Framed through Latour’s concept of connecting sites, knowledge hubs were shown to be contested arenas where power, participation, and accountability are continuously negotiated. Their effectiveness depends not only on their technical design but on how well they enrol actors, balance competing interests, and translate knowledge into practice. In short,

knowledge hubs are only impactful when they catalyse real engagement and action.

A comparative analysis revealed six key factors that determine the ‘success or failure’ of knowledge mobilization in global programmes. These were:

1. Shared goals: Alignment of overarching values and specific objectives across stakeholders ensures coherence and collective direction.
2. Actors: Inclusion of the right mix of organizations, experts, and communities is seen as vital for legitimacy and capacity.
3. Steering: Strategic and adaptive management is needed to navigate complex political landscapes and sustain momentum.
4. Interaction: Effective collaboration can foster trust, innovation, and shared learning within and across global programmes.
5. Benefits: Clear, measurable outcomes strengthen programme credibility and help secure ongoing investment.
6. Sustainability: Long-term success hinges on institutional anchoring and continued relevance in changing environments.

The Joint Programme to Eradicate FGM and the Global Programme to End Child Marriage scored more highly across these factors, benefiting from broader reach, stronger funding, larger programme teams, and institutional continuity. In contrast, the Global Programme to Address GBSS lacked the necessary scale, political traction, and visibility to mobilize lasting actor–network relations. Across all three cases, knowledge is not neutral – it is a political resource. The ways in which knowledge is framed, disseminated, and mobilized determine what gets funded, which voices are amplified, and what types of policy responses are deemed legitimate. Actor–networks are held together not only by shared goals but by the strategic deployment of knowledge as ‘an art of persuasion’ and influence (Janicka, 2023). Programmes that failed to generate or mobilize knowledge effectively – due to limited capacity or political sensitivities – also struggled to attract funding and attention.

While global programmes invest in monitoring and evaluation, their ability to measure impact remains a core weakness. The attribution problem – linking global interventions to demographic or social outcomes – is compounded by time lags, contextual complexity, and limited baseline data. Despite advances in monitoring and evaluation (M&E), current efforts often fall short in capturing the full effects of global programming. Difference-in-difference (DiD) analysis provides a vital element for establishing causality. The main advantage of DiD is that it shows the magnitude of change and the shape of the trendline, with reference to a non-intervention model. For instance, the Child Marriage Programme demonstrated positive outcomes when compared with neighbouring countries in available datasets. Yet,

these gains are precarious and vulnerable to shocks such as the COVID-19 pandemic, climate-related disasters, or conflict. Moreover, in light of funding cuts and programmatic down-sizing, many gender initiatives have been discontinued, including the very data collection streams (DHS) that have underpinned accountability mechanisms. The book calls for a paradigm shift in evaluation: from attribution to contribution, from control to complexity, and from narrow metrics to meaningful, community-embedded assessments. Feminist and youth-led approaches to monitoring and evaluation can help address these gaps and ensure that interventions reflect lived realities.

Revisiting the research question and hypotheses: complexities and limitations

There is no easy answer to the question posed at the outset of this book: How do global gender programmes influence knowledge and policy production? If anything, this research has shown that the process is far from linear. Instead, it is iterative, negotiated, and deeply embedded in relational systems of governance, marked by power asymmetries, shifting agendas, and context-specific constraints. Global programmes do not simply translate knowledge into policy in a one-directional flow. Rather, they actively generate knowledge to sensitize and mobilize a wide range of actors – from government stakeholders and UN agencies to civil society, academics, and communities. This knowledge is not neutral; it is crafted, curated, and circulated strategically to enrol actors into networks of intervention, reshape norms, and legitimize certain forms of action. As actors align around a shared understanding of the problem (for example, GBSS, FGM, child marriage), global programmes offer support in informing national action plans, advocacy strategies, monitoring frameworks, and institutional reforms.

The Global Programme to Address Gender-Biased Sex Selection is a case in point. Its relatively small scale made it, to some extent, easier to manage than larger programmes, as the Global Gender-Based Violence Advisor at UNFPA noted:

When I look at GBV [gender-based violence], we're programming in 153 countries, I have almost no idea what's going on in all of those countries. I sort of have snippets of what's best practice in different places. But it's really hard to understand, globally, what the gaps are, where we need to be moving and shifting. In many ways, I feel like GBSS is much less challenging because we have that system and structure. (IN09)

This smaller scope translated into a clearer understanding of what was happening on the ground, where the gaps were, and where policy interventions were needed. Importantly, each of the six countries

involved in the Global Programme to Address GBSS was situated at a different point in the policy cycle – ranging from initial problem identification (as in Bangladesh) to evaluation (Vietnam) and even policy termination (Georgia) (Rahm, 2023). This variation required tailored strategies for knowledge production and use, demonstrating that policy influence is not a one-size-fits-all process. Instead, the global programme functioned as a flexible infrastructure, capable of adjusting to the unique political, institutional, and normative landscapes of each country (Rahm, 2023). The policy cycle remains a useful heuristic to capture this variation, but, as Cairney and Oliver (2020) have argued, it should not be taken as an accurate depiction of policy making in practice. Rather than unfolding in neat, sequential stages, global gender programmes operate within fragmented, contested, and overlapping policy-making environments, where ideas, actors, institutions, and events interact in unpredictable ways. These are messy systems, filled with feedback loops and bottlenecks, where evidence competes with ideology, norms, and vested interests.

This book has sought to move beyond the linear diffusion model – from knowledge production to dissemination to uptake – to instead embrace a networked and relational understanding of knowledge and policy influence. By applying ANT, the analysis uncovered how global governance is maintained through heterogeneous actor constellations, infrastructures, and knowledge practices. In this view, knowledge is not just a neutral input to policy – it is an active force in shaping what counts as a problem, what solutions are deemed legitimate, and who gets to speak and act. Throughout this research process, initial ambitions to develop a universal model of knowledge-to-policy translation gave way to a more grounded and empirical aim: to identify common processes through which global gender programmes attempt to influence policy production. Across the three cases examined, four such processes emerged:

- Knowledge management: The creation, curation, synthesis, and sharing of knowledge within programmes and organizations. This includes not only technical reports and situational analyses but also more tacit knowledge embedded in programme design, staff expertise, and informal networks.
- Knowledge translation: Making complex evidence understandable and usable by diverse stakeholders. This involved adapting content to national contexts, developing briefs, dashboards, advocacy materials, and technical tools that make evidence actionable.
- Knowledge brokering: Acting as intermediaries between knowledge producers and users. This includes policy advocacy, dialogue facilitation, capacity-building, and strategic advice – often to align interests and build consensus across levels.

- Knowledge uptake: Supporting actors to absorb and apply knowledge. This process was enabled through technical assistance, mentorship, timing interventions with policy windows, and trust-building efforts such as helpdesks or policy advisory.

Across cases, programmes employed different tactics to enact these processes and foster policy influence:

- Localization, through outsourcing knowledge transfer to regional NGOs and partner institutions.
- Centralization, through the internal curation of knowledge within international agencies, where access by external actors was often limited.
- Co-creation, by partnering with NGOs, think tanks, academic actors, and youth in the mobilization of knowledge.

These tactics are not mutually exclusive. Rather, they coexist, overlap, and sometimes conflict, depending on institutional arrangements, funding dynamics, political context, and actor capacity. Their relative success depends on a set of enabling conditions – robust actor–networks, resilient knowledge infrastructures, adequate funding, and continuity in leadership and staffing. Yet, several constraints remain. The short-term nature of many programmes, high staff turnover, weak M&E systems, and ongoing power asymmetries (for example, North–South hierarchies, limited voice of grassroots actors, language barriers) often limit the extent to which global gender programmes can translate knowledge into sustained policy change. This work aligns with and complements emerging scholarship on the politics of evidence in global governance ([Littoz-Monnet and Uribe, 2023](#)), particularly around ‘methods regimes’ that shape what knowledge is seen as valid, typically quantitative, clinical, or randomized knowledge is privileged, while other forms – qualitative, contextual, or experiential – are marginalized. This book contributes to that literature by showing how, in global gender programmes, knowledge transfer hierarchies and translation practices are deeply political, influencing whose knowledge counts, how problems are framed, and which policy options are prioritized.

This book was guided by two central propositions, each interrogated through empirical evidence and theoretical reflection. H1 posited that global programmes emphasize knowledge generation and mobilization as a strategic component in their efforts to eradicate harmful practices. The findings support this hypothesis – but with a critical nuance. Knowledge was not only produced and circulated to inform evidence-based interventions or shift social norms and behaviours as further interrogated in H2, where the causal pathways remain difficult to verify. Importantly, knowledge functioned as a strategic resource – one that underpinned the very viability

and continuity of the programmes themselves. Continuous knowledge production and mobilization served to enrol and sustain actor-networks, attract and justify funding, and align programme activities with evolving global policy agendas. In doing so, programmes enhanced their visibility, institutional legitimacy, and resilience. As Latour reminds us, ‘when things hold, they start becoming true’ (Latour, 1987, p 12). From this perspective, knowledge operates not only as an epistemic tool for informing change but also as an ontological device that constitutes the conditions under which programmes persist, adapt, and are recognized as legitimate actors in global governance. This dual role of knowledge – as both a normative driver and an instrument of institutional legitimacy and continuity – echoes and extends prior work on the strategic mobilization of knowledge by/for international organizations (for example, Cannon, 2017; Litzo-Monnet, 2017). H2 posited that effective knowledge transfer is hindered by the programmes’ inability to robustly measure and evaluate the impact of their interventions. This hypothesis is confirmed. Despite investment in enhanced M&E systems, the attribution problem remains a fundamental barrier. Evaluation struggles with the inherent complexity of multi-stakeholder, multi-level interventions, inbuilt spillover effects, and persistent time lags. The analysis calls for greater innovation, participation, and plurality in evaluation practices.

The global governance of harmful practices is not simply a matter of eliminating acts of gendered violence. It is about reconfiguring the power, knowledge, and accountability structures that allow such practices to persist. Global programmes play a dual role as agents of change and as actors within contested political arenas. Understanding how they navigate these roles – through translation, enrolment, and mobilization – offers vital insights for scholars, practitioners, and policy makers. As we look toward 2030 and beyond, eliminating harmful practices requires more than technical solutions. It demands integrated approaches that foreground feminist knowledge, build inclusive actor-networks, and develop adaptive, resilient systems of governance. It also requires confronting the ‘blind corners’ of global policy: not only contentious issues like abortion but also the deeper entanglements of race, class, and colonial legacies that continue to shape whose voices are heard and whose lives are valued. Justice for women and girls cannot be achieved without confronting power, amplifying marginalized voices, and reshaping the very systems that produce inequality.

This book has sought to examine the role of global gender programmes in translating knowledge into policy and practice. While grounded in empirical research and interdisciplinary analysis, the study inevitably faced several limitations, many of which stem from the inherent complexities of researching global governance, knowledge transfer, and deeply embedded gender norms.

1. Complexity of global governance

Global gender programmes operate across multiple governance levels – global, regional, national, and local – bringing together a wide array of actors, institutions, sectors, and agendas. These transnational, multi-directional flows of ideas, policies, funding, and evidence create a multi-scalar and multi-sited research terrain that is difficult to capture in its entirety. The heterogeneity of country contexts and programme configurations also necessitates reliance on intermediary actors such as think tanks, knowledge networks, and consultants to bridge the gap between knowledge production and policy (Stone, 2004). Mapping these fragmented landscapes poses methodological and conceptual challenges, which could not be fully mitigated through the employed social network analysis.

2. Conceptual ambiguity of knowledge transfer

‘Knowledge transfer’ is a contested, fussy, and often misunderstood concept (Davies, Nutley, and Walter, 2008). It overlaps with related terms – knowledge exchange, translation, mobilization – and intersects with literatures on evidence-informed policy making, policy transfer, and knowledge brokerage. While the term ‘transfer’ suggests linearity, this study approached knowledge transfer as an interactive and iterative process that includes knowledge generation, dissemination, negotiation, and uptake with many overlapping feedback loops.

3. Epistemological and power dimensions of knowledge

Another layer of complexity lies in the epistemological debates surrounding the nature of knowledge itself. What knowledge is being transferred, and for what purpose? The study acknowledges divergent paradigms – positivist, constructivist, and critical – and different modes of knowledge use: instrumental, conceptual, or symbolic (Contandriopoulos et al, 2010; Greenhalgh, 2010). Importantly, knowledge is never neutral. It is deeply entangled in power relations – within and between institutions, programmes, states, and communities – shaped by economic, structural, discursive, and expert authority (Foucault, 1976, 2020; Neumann and Sending, 2010). These dynamics complicate any simple notion of ‘evidence-informed’ policy.

4. Normative and cultural complexity of harmful practices

Efforts to address harmful practices such as FGM, child marriage, and gender-biased sex selection must contend with the deeply embedded gender and social norms that sustain them. These practices are not only culturally and politically sensitive but also highly resistant to change. As Weible and colleagues (2018, 2023) argue, belief systems are inherently stable and tend to resist external influence, with changes occurring primarily through learning within coalitions – often reinforcing existing views rather than challenging them. In such contested settings, normative

beliefs about what is considered ‘harmful’ or ‘healthy’ frequently outweigh evidence-based reasoning. This is especially evident in areas related to sexual and reproductive health and rights, where scientific evidence may be disregarded or overridden by moral, cultural, or religious convictions (Heise et al, 2019).

5. Methodological challenges of applying actor–network theory

While ANT offers a valuable lens for tracing the dynamic and relational processes through which global gender programmes influence knowledge and policy production, its application to global governance is not without challenges. As Bueger (2013, p 338) observes, ‘for many, the question of what actually constitutes ANT remains mysterious’, and it is often reduced to a broad ‘new materialist’ call to take non-human actors seriously. This conceptual ambiguity creates difficulties not only for interpretation but also for operationalizing ANT in empirical research, particularly in highly diffuse and multi-level policy fields such as global gender programmes. While ANT demands empirical granularity, this was only partially met in this study due to the abovementioned complexities. Nonetheless, ANT proved useful in revealing how gender programmes function as evolving assemblages – highlighting the socio-technical work involved in translating knowledge into global policy.

6. Linking knowledge to change

Finally, as Davies and colleagues (2015, p 17) rightly noted, ‘Understanding the academic literature that links knowledge, knowing and change is a challenging and boundary-less task’. Relevant debates span psychology, sociology, political science, organization studies, and beyond – often appearing in fragmented and non-linear ways. While this book concentrated on selected strands of this vast literature, particularly those relevant to global governance, STS, and gender-focused knowledge transfer, the discussion is by no means exhaustive. We focused our empirical investigation on three flagship global programmes – on FGM, child marriage, and gender-biased sex selection – examining how knowledge is created, curated, communicated, and circulated within and across these initiatives. This focused scope allowed for in-depth comparative analysis, but it also left out other global initiatives and themes linked to social inclusion and global governance that warrant further exploration.

Future research could build on this work by deepening analysis of community-led knowledge production, gendered power asymmetries in knowledge governance, and the longitudinal impacts of knowledge mobilization efforts on policy and social norms. Continued attention to the politics of knowledge – and the actors who produce, translate, and resist it – will remain essential. In times of funding cuts and gender backlash, it

needs to be scrutinized to what extent and how global gender programmes evolve in the post-2030 period.

Scaling good: can innovations end harm?

Socio-technological innovations have profoundly reshaped gendered lives. The sewing machine and the washing machine, for instance, were transformative tools that altered women's everyday labour and time use (Rosling, 2010; Kang and Dong, 2023). With the advent of digital technologies and artificial intelligence (AI), the pace of change has only accelerated. Socio-technical innovation refers to novel solutions that integrate technological innovation to address social or environmental challenges, with benefits intended for the broader public rather than investors or private owners (Poonamallee, Scillitoe, and Joy, 2020). Such innovations are increasingly seen as levers for addressing structural gender inequalities. Yet, the spread and benefits of these innovations are uneven. According to Rogers' diffusion of innovations theory (2003), new technologies typically spread from innovators and early adopters to the majority only gradually. Gender disparities become stark in this diffusion process, shaped by intersecting injustices, digital divides, and structural power asymmetries that limit access for many women and girls.

Despite these barriers, tech-led solutions have driven meaningful progress in various domains. These range from women's financial empowerment through mobile banking and microloan platforms, such as Grameen America, which scaled its services using digital infrastructure (Walske and Foster, 2020), to socio-technical innovations in sustainable agriculture, which have enhanced the resilience of rural female farmers in Gujarat (Bhatt et al, 2024b). In the health sector, maternal and digital health innovations have expanded access to prenatal care and emergency response in low-resource settings (Al Dahdah, Desgrées Du Loû, and Méadel, 2015), while AI-supported platforms provide tailored HIV prevention advice (Fetrati, Chan and Orji, 2025). In the field of gender-based violence, AI-powered chatbots offer confidential support to survivors (Spencer and Masbouni, 2025), while apps like SheCan in Nigeria enable discreet GBV reporting, with Short Message Service (SMS) alternatives available for those lacking Internet access (Adeboye and Simon, 2024). Moreover, abortion care organizations such as Women on Web and Safe2Choose use telemedicine, digital platforms, and in some cases drones to deliver abortion pills to hard-to-reach areas, navigating legal grey zones while centring women's autonomy (Crossett, Gopalakrishnan, and Purdy, 2020).

The dark side of technology, however, cannot be ignored. The digital realm has amplified forms of violence and discrimination against women. From the dark web to mainstream social media, women and girls face hate speech, sexual abuse (including grooming and image-based abuse), and cyber

harassment – ranging from stalking and bullying to identity theft (David et al, 2022). At a deeper technological level, gender bias is often embedded and reproduced in design processes. As Doneys et al (2022, p 292) warn, AI and robotics may ‘fossilize’ the gender order – mirroring and reinforcing binary and stereotypical gender norms through both software and hardware design. These patterns create a feedback loop between technological representations of gender and broader social constructions, entrenching inequalities under the guise of innovation. UN agencies have recently called for chartering into a new era, where

tackling technology-facilitated gender-based violence and harmful practices deserves urgent action. Strong collaboration among governments, the technology sector, women’s organizations, civil society and national human rights institutions is pivotal to establishing sound regulatory frameworks; improving risk identification, perpetrator tracking and accountability procedures; and updating knowledge and capacity of GBV first responders. Cross-sector collaboration is also needed to change the design (including algorithms), dissemination and use of digital technologies to prevent gender biases and stereotypes and to combat gender-based violence. (ESCAP and UN Women, 2025, p xviii)

This dual nature of technology – its transformative potential and its capacity to reproduce harm – raises critical questions for global governance and norm-change interventions. Can technology serve as an effective catalyst for social norm transformation? Can context-sensitive efforts be scaled up in the first place? Scaling up social norm interventions has indeed become a central concern, especially in fields like GBV prevention, sexual and reproductive health, and women’s empowerment. Different camps have emerged in the academic literature. Drawing on the socio-ecological model, three dominant schools of thought can be identified.

First, scholars like Karisa Cloward (2016) have focused on individual-level change, theorizing how individuals respond to international norm promotion in contexts where local and global values conflict, using FGM and early marriage in Kenya as case studies. She argues that individuals’ decisions depend not just on exposure to international messages but also on contextual factors – NGO density, exit options, and the relative salience of competing norms. Her mixed-method study reveals the layered, temporal dynamics of norm diffusion and the importance of both individual attitudes and social pressure.

Second, scholars like Cristina Bicchieri advocate for community-level diagnostics that focus on collective behaviour rather than individual attitudes. Her influential theory of social norms emphasizes the need to distinguish

between empirical expectations (what people believe others do) and normative expectations (what people believe others think they should do), which vary significantly across contexts (Bicchieri, 2006, 2017; Bicchieri and Mercier, 2014). This theoretical framework provides a foundation for designing context-sensitive and evidence-based interventions and helps explain why some culturally misaligned efforts to eliminate harmful practices have failed. Bicchieri considers a range of strategies – legal measures, media campaigns, economic incentives, and community deliberation – but cautions that even well-designed, multi-pronged approaches may not succeed if people are not convinced that others around them are also changing their behaviour. This perspective underscores the locally contingent nature of social norms, which poses challenges for the scalability of interventions, as they require (cost) intensive, tailored engagement and sustained local diagnostics.

Third, researchers like Lori Heise and Ben Cislighi adopt a pragmatic, macro-level approach that balances cultural specificity with scalability (Cislighi and Heise, 2018, 2019). They argue that while local context matters, it is both possible and necessary to design adaptable frameworks that can be translated across diverse settings. Central to their model is the concept of ‘organized diffusion’ – a strategy where participants in community-based interventions are empowered to share new knowledge within their networks, creating ripple effects that extend impact without significantly increasing costs (Cislighi et al, 2019). Drawing on case studies from Mali, Nepal, and Nigeria, they show how structured peer-to-peer engagement can foster sustainable norm change. This approach promotes scalability by preserving key principles (such as community dialogue and leadership engagement) while allowing for flexible, context-specific implementation.

Different examples of scaling up social norm change interventions exist. The Tostan Community Empowerment Program in West Africa scaled rights-based education and anti-FGM efforts by centring community ownership (Diop and Askew, 2009). Long-running entertainment-education programmes can catalyse broader norm shifts as shown in the context of child marriage or son preference (Bouman, Lubjuhn, and Hollemans, 2017; Dasgupta and Sharma, 2022). With regards to FGM, the World Health Organization has invested in the scaled-up of interventions to increase the uptake of comprehensive health sector approaches to address FGM in 15 countries of high prevalence (Ahmed et al, 2023).

The Institute of Development Studies and CUSP (Community for Understanding Scale Up) have developed practical guides and decision trees to help donors and implementers assess when and how scale is feasible. Their guidance emphasizes the need for long-term investment, fidelity to core values, support for women’s rights organizations, accountability to local communities, and a rethinking of evaluation models to ensure greater inclusion and more relevant evidence (Goldmann et al, 2019). However,

scaling up is rarely a linear process. As [Johnsdotter \(2020\)](#) cautions, poorly contextualized interventions may backfire – driving harmful practices underground or shifting them in unintended ways, such as the medicalization of FGM. Similarly, [Bicchieri and Dimant \(2022, p 443\)](#) remind us that ‘norm-nudges can be powerful interventions, but they can easily fail to be effective and can even backfire unless they are designed with care’. A recent synthesis identifies four overarching factors that facilitate or inhibit scale-up: (1) availability of financial and human resources, (2) transferability of designs and materials, (3) strong partnerships across community and government sectors, and (4) effective monitoring capacity ([Nguyen et al, 2019](#)). The authors conclude that while scaling multifaceted social norm interventions is possible, it remains under-documented and under-measured, calling for a stronger evidence base to guide future programmes. [Lee et al \(2020, p 118\)](#) draw on Kingdon’s theory of ‘policy windows’ to introduce the concept of a ‘window for scale-up’ – a critical convergence of political momentum, strategic alignment, funding, and leadership. They argue that scalability must be built into programme design from the outset.

Whether tech-enabled or community-driven, scaling interventions to promote health and reduce harm requires more than replication. It demands contextual adaptation, sustained investment, and intersectional awareness. Socio-technical innovations hold immense promise – but only if grounded in the lived realities of those they aim to serve. The challenge is not only to innovate, but to do so ethically, inclusively, and with the foresight to achieve meaningful, systemic change.

How can knowledge transfer (to tackle harmful gender norms) be improved?

A wide literature on gender norms and GBV prevention has emerged over the past decades. As [Piedalue et al \(2020, p 89\)](#) observe, ‘changing social norms has become the preferred approach in global efforts to prevent GBV’ – a strategy that is especially embraced within the UN system. Under the UN 2.0 framework, the organization supports member states in ‘changing social norms that lead to gender-based violence affecting up to 730 million women’ ([United Nations, 2023, p 31](#)). Yet this approach has limitations. As Piedalue and colleagues caution, prioritizing social norms risks sidelining structural contributors to GBV, such as unequal access to and control over resources ([Piedalue et al, 2020](#)). [Wazir \(2023\)](#) critiques current social and behaviour change approaches for becoming yet another form of epistemic colonization, highlighting their limited contextual framing, methodological complexity, and focus on individual behaviour at the expense of structural constraints. In this context, it is essential to reflect on how knowledge transfer can serve as a vehicle for empowerment rather than reinforcing existing inequalities.

The transfer of knowledge to address harmful gender norms is a critical yet underdeveloped component of global gender programmes. While substantial research, evaluation, and programme experience have generated a wealth of insights, the persistent challenge lies in translating this knowledge into context-specific, transformative, and sustained action. Evidence use and uptake are often the weakest links in this chain. To address this gap, several interrelated strategies can help to reimagine knowledge mobilization for more equitable and effective outcomes:

1. From knowledge dissemination to co-production

Many global programmes continue to rely on disseminating toolkits, frameworks, and training materials with minimal adaptation to local contexts (UNFPA and UNICEF, 2022). Yet, effective knowledge transfer must move beyond dissemination toward participatory co-production. This involves engaging communities – especially women, girls, and marginalized groups – as co-creators of knowledge to ensure legitimacy, relevance, and local ownership. Although global programmes embrace co-production through multi-stakeholder partnerships (Mukherjee and Mukherjee, 2018), their practical implementation (for example by involving marginalized groups) remains inconsistent. Co-production – whether in knowledge or policy – requires collaborative design, implementation, and evaluation involving diverse stakeholders (Flinders, Wood, and Cunningham, 2016). It can redistribute power and create space for local agency. Examples from FGM illustrate this potential: youth-led research (Ali, 2023) and community action plans involving men (Mwendwa et al, 2025) demonstrate how inclusive co-production can foster locally meaningful change. However, there are also risks involved particularly in sensitive areas like GBV – when state actors assert control over survivors under the guise of co-production (Wheildon et al, 2023). As Flinders, Wood, and Cunningham (2016, p 262) note, co-production often ‘rubs up against traditional social norms and roles’, making it both challenging and politically charged. Yet, it is precisely this friction that can prompt critical reflection and open pathways for shifting harmful norms. When done with care, co-production has the potential to catalyse transformative change. To unlock this potential, co-production must be supported institutionally, with clear safeguards and sustained investment (Joshi and Moore, 2004).

2. Capturing complexity: combining quantitative and qualitative knowledge

Efforts to shift gender norms must account for the complex, non-linear nature of social change. Yet dominant monitoring and evaluation frameworks often prioritize quantitative indicators, which can miss subtle normative shifts, reinforce data gaps, and fail to inform policy in real-time. Apparent contradictions – such as declining prevalence

alongside increased burdens – can create confusion without deeper contextual understanding. Integrating qualitative methods such as outcome harvesting, participatory ethnography, and most significant change techniques – as applied in the Joint Programme to Eliminate FGM – helps reveal the underlying processes of transformation and centres lived experience as a valid source of knowledge. These methods counter the limitations of quantification alone and address persistent data gaps. New forms of data, including citizen-generated data, are emerging as critical complements (Proden, Fraisl, and See, 2023; Cookson et al, 2026). Scholars have long warned of the ‘seductions of quantification’ showing how global indicators can obscure local realities and misrepresent gender inequalities (Merry, 2016). Calls to ‘widen the catchment of data’ (Fuentes and Cookson, 2020) advocate for approaches that make complex, intersecting inequalities visible. Emerging efforts to produce ‘counter-data’ – from feminist collectives and civil society – aim to foreground women’s voices in shaping evidence (D’Ignazio and Klein, 2023). Yet beyond generating better data, there is an critical need to ensure that this knowledge informs policy and resource allocation, raising important questions about data governance and accountability.

3. Strategic framing and narrative change

How knowledge is framed significantly affects its impact. Narratives aligned with local values and identities are more likely to influence behaviour. Strategic communication – employing local languages, storytelling traditions, and emotional appeal – can help reframe issues such as child marriage and gender-biased sex selection in persuasive and politically viable ways. Tools such as message testing, audience segmentation, and engagement with local influencers are essential for enhancing resonance and effectiveness. Message testing is particularly important to avoid perceptions of campaigns as mere ‘government propaganda’ lacking practical guidance, as observed in GBSS policy campaigns in Vietnam, or worse, reinforcing existing gender biases, as seen in some government messaging in India (Rahm, 2019a). Digital storytelling offers an innovative approach to addressing trauma and fostering engagement. For example, the Voices to End FGM/C initiative brings together survivors and activists ‘to share and heal from female genital mutilation/cutting, grow as community leaders, and create short videos calling for an end to this harmful practice’ (Taher et al, 2023, p 435). These recommendations all point toward the same challenge identified at the outset of this book: the disconnect between the sites of policy design and the lived realities of those cast as ‘beneficiaries’. Closing this gap requires not only methodological innovation but also structural reform, ensuring that the processes by which knowledge is generated, validated, and applied are genuinely participatory, inclusive, and power-aware.

4. Confronting power asymmetries in knowledge production

Global Programmes are highly relevant for SDG implementation, but scholars caution against persistent power asymmetries, particularly affecting low-income countries (Leal Filho et al, 2022). Whose knowledge counts? This remains a fundamental question. Knowledge transfer must contend with entrenched epistemological hierarchies that often privilege knowledge produced in the Global North, marginalizing local, Indigenous, feminist, and experiential forms of knowing. Aníbal Quijano's concept of the 'coloniality of knowledge' critiques the enduring legacy of colonialism in shaping what is recognized as valid knowledge – perpetuating global power imbalances through Eurocentric epistemologies (Quijano, 2024). Decolonizing knowledge production involves valuing diverse ways of knowing, redistributing authorship and credit, and embedding horizontal models of collaboration (Sakai, Solomon and Button, 2023). Practice-based learning – grounded in practitioners' voices and community expertise – is one approach gaining traction (UN Trust Fund, 2025). Duarte (2017) warns of a 'techno-scientific hegemonic world order' that clashes with more holistic, Indigenous ways of knowing. To avoid backlash and enhance relevance, digital tools must be designed with attention to digital inequalities – considering infrastructure, accessibility, and cultural resonance. Duarte's work on 'network sovereignty' underscores the importance of integrating Indigenous knowledge systems into digital platforms, fostering self-determination and epistemic justice in the technological domain.

5. Empowering local change agents long term

A key recommendation is the sustained empowerment of local change agents. For knowledge to be effectively mobilized, it must move through those embedded in communities – via motorbikes, radio, or local gatherings. Local change agents play a vital role in amplifying diverse voices through culturally resonant channels. Their work must be recognized not only symbolically but also materially, with fair remuneration and structural support to sustain their agency. However, too often local engagements are one-off and short-lived. Building and investing in local change agents over the long term is essential. Numerous studies highlight the need for sustained interventions, as many are simply too short to achieve behavioural change (Jejeebhoy et al, 2017). Some programmes failed to reach a 'tipping point' due to limited reach or overly brief implementation periods. This problem is compounded by the perception that initiatives to curb harmful practices are temporary or externally driven interventions that overlook local ownership and long-term sustainability (Wolff, 2024). Evidence suggests that sustained engagement, particularly through regular discussion sessions, can lead to more lasting social and economic empowerment (Iyengar and Ferrari,

2015). Creating safe spaces for reflection enables community members to question deeply held beliefs and collectively reimagine more equitable futures. As Underwood and colleagues found, ‘when community members in rural, economically straitened conditions are given the opportunity, they will eagerly engage in the ritual process to interrogate their assumptions, challenge their friends and neighbours to rethink their own beliefs, and reformulate their social reality in ways that are more equitable and hold greater promise than what went before’ (Underwood et al, 2011, p 214).

These strategies are by no means exhaustive and need to be tailored and adapted to the specific contexts. Knowledge transfer to tackle harmful gender norms is not a linear or technocratic process. It is inherently social, political, and relational. For such efforts to succeed, knowledge must be co-produced, context-sensitive, power-aware, and embedded in adaptive systems. As global gender programmes evolve beyond 2030, transforming how knowledge is generated, mobilized, and applied will be essential for the post-SDG era (see also [Box 5.1](#)).

Box 5.1: Knowledge transfer around harmful gender norms

Knowledge transfer to shift harmful gender norms needs to be:

- Transformative: Shifting power and agency – not just transmitting information.
 - Contextualized: Rooted in local realities, histories, and resistances.
 - Collaborative: Built on strong partnerships across sectors and levels.
 - Adaptive: Responsive to feedback, complexity, and change.
-

Final reflections: reclaiming the politics of knowledge and regrounding power

This book has demonstrated that efforts to eliminate harmful practices against women and children – such as female genital mutilation, child marriage, and gender-biased sex selection – are fundamentally concerned with questions of power and knowledge. As noted in the opening chapter, the very category of ‘harmful practices’ is a policy construct that emerges from international agendas, one that is detached from the lived realities on the ground. This study has shown how that conceptual distance – between the framers of policy and the communities whose practices are targeted – remains a defining tension in global gender programming. While the earlier chapters have unpacked how programmes mobilize knowledge to shape norms and policy,

it is equally clear that without bridging this epistemic and political gap, global efforts risk reinforcing the very hierarchies they seek to dismantle. In other words, interventions aimed at promoting gender justice are not neutral; they are shaped by contested epistemologies, institutional hierarchies, and embedded assumptions regarding what constitutes valid knowledge, who produces it, and how it is mobilized. In this context, the politics of knowledge must be brought to the forefront. While efforts are made towards co-creation, dominant approaches in global gender programmes still often prioritize toolkits, frameworks, and ‘best practices’, many of which are produced by institutions in the Global North and operationalized through top-down mechanisms. Such models risk marginalizing experiential, Indigenous, and locally situated knowledge, and may perpetuate rather than dismantle the very structural inequalities they aim to address.

In an increasingly fragmented and uncertain global context, co-creation with grassroots actors emerges not simply as an implementation strategy but as a political and epistemological imperative. While multi-scalar global programmes have the capacity to circumvent bureaucratic constraints and engage actors across levels, their long-term efficacy depends on their ability to recognize and support the agency of local actors. As [Davies \(2024\)](#) argues, transformative change may not emerge from within established institutions, but rather through what he terms a ‘global tapestry of alternatives’ – a constellation of grassroots movements in the Global South that enact communitarian, pluriversal, and non-hegemonic models of change. These approaches challenge both reformist and revolutionary paradigms by operating outside conventional state-centric or donor-led structures, drawing instead on deeply rooted practices of mutual aid, relational accountability, and socio-ecological embeddedness.

Feminist scholarship, particularly the work of [Donna Haraway \(1988\)](#), has emphasized the importance of situated and embodied knowledge. Recognizing the partial, contextual, and lived nature of all knowledge forms is central to fostering inclusive, meaningful, and effective action. Co-production of knowledge – when genuinely practised – can serve to democratize research and policy processes, foregrounding voices that are often excluded from global discourses. This requires moving beyond linear knowledge transfer or instrumental participation toward more equitable, dialogic and relational forms of engagement. A critical approach to co-creation must therefore attend to the structural dynamics of inclusion, voice, and influence (see, for example, [Livaha, 2024](#)), acknowledging that who participates – and how – is as important as the content of the collaboration itself.

The architecture of global gender programmes renders them inherently multi-actor and multi-scalar. They are connecting sites – spaces where diverse stakeholders converge, including UN agencies, governments,

civil society, academia, and communities, but also ideas, instruments, indicators, and investments. These spaces are political; they are arenas of negotiation, contestation, and often conflict. To fulfil their transformative potential, global programmes must move beyond technical rationality and embrace a more politicized understanding of knowledge governance and practice. Doing so entails reimagining these programmes as sites of co-creation, where knowledge is not merely extracted or disseminated but collaboratively generated and contextually validated. It involves investing in long-term partnerships, institutionalizing mechanisms for local ownership, and recognizing the multiplicity of knowledges that exist within and across communities.

In light of recent political backlashes, funding constraints, and the erosion of trust in international development paradigms, the imperative to reframe global gender programming is more urgent than ever. The path forward must be both pragmatic and visionary – attentive to context, yet open to ontological pluralism. This includes grounding interventions in community-based realities while rethinking the architecture of global cooperation – from one of oversight and compliance to one of mutual learning and epistemic justice. The struggle to end harmful practices is not only a normative project but an epistemic one. It is a struggle over what is known, who is authorized to articulate what is known, and how that knowledge is used to effect change. In an increasingly fragmented and contested world, knowledge alone is insufficient. Partnerships are vital. As this work has shown, global programmes are powerful ‘connecting sites’ (Latour, 2005). What is required is the co-creation of knowledge, embedded in relationships of trust, accountability, and solidarity. Only through such a reorientation can we hope to address the persistent harms of gender inequality – and co-produce a more just, inclusive, and sustainable future.

APPENDIX 1

International Legal Frameworks, Consensus, and Policy Instruments to End Harmful Practices

Year	Convention
1948	General Assembly Resolution 217. UN Doc. A/810. Universal Declaration of Human Rights
1951	Convention relating to the Status of Refugees
1966	International Covenant on Civil and Political Rights
1966	International Covenant on Economic, Social and Cultural Rights
1979	Convention on the Elimination of All Forms of Discrimination Against Women
1984	Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment
1989	Convention on the Rights of the Child
1990	Committee on the Elimination of Discrimination against Women. General Recommendation No. 14: Female Circumcision
1992	Committee on the Elimination of Discrimination against Women. General Recommendation No. 19: Violence against women
1992	Human Rights Committee. General Comment No. 20, 1992. Prohibition of torture and cruel treatment or punishment
1993	UN Declaration on the Elimination of Violence Against Women, Doc. A/RES/48/104
1993	World Conference on Human Rights, Vienna Declaration and Plan of Action
1994	International Conference on Population and Development (Cairo) and Programme of Action
1994	General Recommendation No. 21: Equality in Marriage and Family Relations
1995	Beijing Declaration and Platform for Action of the Fourth World Conference on Women, Beijing
1999	Committee on the Elimination of Discrimination against Women. General Recommendation No. 24: Women and Health

Year	Convention
2000	Human Rights Committee. General Comment No. 28, 2000. Equality of rights between men and women
2000	Committee on Economic, Social and Cultural Rights. General Comment No. 14, 2000. The right to the highest attainable standard of health. UN Doc. E/C.12/2000/4.
2001	UNESCO Universal Declaration on Cultural Diversity
2002	UN General Assembly Resolution on traditional or customary practices affecting the health of women and girls, calls upon all States to adopt national measures to prohibit practices such as FGM/C
2003	CRC General Comment No. 4: Adolescent Health and Development in the Context of the Convention on the Rights of the Child
2005	Convention on the Protection and Promotion of the Diversity of Cultural Expressions
2005	UN ESC Commission on Crime Prevention and Criminal Justice: Guidelines on Justice in Matters Involving Child Victims and Witnesses of Crime
2007	United Nations Economic and Social Council (ECOSOC), Commission on the Status of Women. Resolution on the Ending of Female Genital Mutilation. Additional resolutions on Ending FGM were issued in 2008 and 2010
2009	United Nations General Assembly Resolution 64/145 on The Girl Child
2012	UN Resolution, calling on countries to eliminate FGM/C
2013	57th UN Convention on the Status of Women calls on member states to develop policies and programmes to eliminate all forms of violence against women and included specific mention of harmful practices including early marriage and FGM/C
2013	General Recommendation No. 30 on Women in Conflict Prevention, Conflict, and Post-Conflict Situations
2014	Joint General Recommendation No. 31 of the CEDAW Committee / General Comment No. 18 of the CRC on Harmful Practices
2015	Sustainable Development Goal 5.3 seeks to eliminate all harmful practices by 2030. Transforming Our World: The 2030 Agenda for Sustainable Development
2015	UN Human Rights Council Resolution on Strengthening Efforts to Prevent and Eliminate Child, Early, and Forced Marriage
2016	CRC General Comment No. 20 on the Implementation of the Rights of the Child During Adolescence
2016	UN General Assembly Resolution on Child, Early, and Forced Marriage
2016	Committee on Economic, Social and Cultural Rights (ICESCR). General Comment No. 22 on the right to sexual and reproductive health (article 12 of the International Covenant on Economic, Social and Cultural Rights)
2017	General Recommendation No. 35 on Gender-Based Violence Against Women, updating General Recommendation No. 19

Year	Convention
2017	UN Human Rights Council Resolution on Child, Early, and Forced Marriage in Humanitarian Settings
2018	UN General Assembly Resolution on Child, Early, and Forced Marriage
2019	UN Human Rights Council Resolution on Consequences of Child, Early, and Forced Marriage
2020	UN Human Rights Council Resolution 44/16 on the Elimination of female genital mutilation
2021	UN Human Rights Council Resolution on Child, Early, and Forced Marriage in Times of Crisis, including the COVID-19 Pandemic
2024	UN Pact for the Future condemns all forms of violence against women and children, including harmful practices

APPENDIX 2

Regional Legal Frameworks, Consensus, and Policy Instruments to End Harmful Practices

Year	Convention or declaration
1950	European Convention for the Protection of Human Rights and Fundamental Freedoms
1969	American Convention on Human Rights
1981	African Charter on Human and Peoples' Rights (also known as the Banjul Charter)
1990	African Charter on the Rights and Welfare of the Child
1994	Inter-American Convention on the Prevention, Punishment, and Eradication of Violence against Women (Belém do Pará Convention)
2002	South Asian Association of Regional Cooperation (SAARC) Convention on Regional Arrangements for the Promotion of Child Welfare in South Asia
2002	SAARC Convention on Preventing and Combating Trafficking in Women and Children for Prostitution
2003	Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol)
2005	Council of Europe: Parliamentary Assembly Resolution 1468
2005	Ibero-American Convention on Young People's Rights
2008	Arab Charter on Human Rights
2011	Explanatory Report to the Convention on Preventing and Combating Violence Against Women and Domestic Violence
2011	Council of Europe Convention on Preventing and Combating Violence Against Women and Domestic Violence
2014	Addis Ababa Declaration on Ending Child Marriage in Africa
2014	Kathmandu Call for Action to End Child Marriage in South Asia
2014	Addis Ababa Declaration on Accelerating the Implementation of the Beijing Declaration and Platform for Action

Year	Convention or declaration
2015	African Union: African Common Position on the AU Campaign to End Child Marriage in Africa
2016	Southern Africa Development Community: Parliamentary Forum Model Law on Eradicating Child Marriage and Protecting Children Already in Marriage
2017	Joint General Comment of the African Commission on Human and Peoples' Rights and the African Committee of Experts on the Rights and Welfare of the Child on Ending Child Marriage
2018	European Parliament, Committee on Women's Rights and Gender Equality: Opinion
2018	Council of Europe: Parliamentary Assembly Resolution 2233
2018	Accelerate Actions to End Child Marriage and Early Unions in Latin America and the Caribbean
2019	IACHR Violence and Discrimination Against Women and Girls: Best Practices and Challenges in Latin America and the Caribbean
2020	Inter-American Commission on Human Rights (IACHR) Resolution 1/2020: Pandemic and Human Rights in the Americas
2020	Africa Young Women Beijing+25 Manifesto
2022	African Union Accountability Framework on the Elimination of Harmful Practices
2024	European Union Directive to Combat Violence against Women and Domestic Violence

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Index

References to figures appear in *italic* type, those in **bold** type refer to tables.

3-M Model (Motives, Methods, Magnitudes) 70, 205

A

abortion 40, 42, 62, 111–18, 143, 151, 206
 care and technology 215
 unsafe abortions 199
 WHO key facts 111–12
access to resources 40, 158, 218
accountability 19, 29, 64, 70, 132, 157
 and funding 208
 and governance 137, 139, 146
 and transparency 76
activism 50, 80, 108, 131, 183
Actor-Network Theory 8, 10–12, 73, 140,
 142–4, 204–5, 211
 see also Bruno Latour
 challenges of 214
 co-creation 88
 complexity of actors and levels 170–2
 and knowledge transfer 81–9
 mapping actors 118–32
advocacy networks 131, 136
 youth-led groups 131
 transnational 75
Afghanistan 113
Africa 24, 55
 British colonialism in 50–2
 child marriage in 38
 Eastern Africa 77, 182–4, 182
 FGM in 39
 Maputo Protocol 62, 67, 183
 Western Africa 180–5, 181, 184, 217
African Charter on Human and People's
 Rights 67, 183
African Charter on the Rights and Welfare of
 the Child 62
African Union 62, 67, 70, 183
Age of Consent Act 1891 51
AIDS 75, 215
Akrich, Madeleine 82

Albania 193
 and GBSS 98
 sex ratios in 40
 'sworn virgins' 27
anti-foundationalism 83–4, 95–7, 103, 110
Arab Region
 child marriage in 38
 intellectuals in 52, 55
armed conflicts 29, 63, 189, 194–5
Armenia
 GBSS in 98, 106
 'red apple tradition' 27
 sex ratios in 40
Asia 193
 FGM in 39
 SAARC Year of the Girl Child 62
 sex ratios in 40
 and son preference 56
Asia Pacific Regional Office (APRO) 24, 25,
 41, 120
Association of the Southeast Asian Nations
 (ASEAN) 105
attachment 86–7
attribution problem 162–76, 165
 and difference-in-difference 176–89
Australia, diaspora FGM in 39, 99
authority, mechanisms of 10–11
Azerbaijan 98, 193
 sex ratios in 40

B

backlash, political 141–2, 194, 195, 196, 224
Banerjee, Abhijit 177
Bangladesh 33, 143–4
 child marriage in 25, 179
 FGM in 39
 and GBSS 98
beauty ideals in Global North 47
Beijing Platform for Action 22, 58, 59, 69
 harmful practices referenced 61
 Hillary Clinton speech 60

- benefits from global programmes 140,
147–9, 208
- Benin, decline of FGM 193
- Benner, T. 79
- best practices 100–3
- Bicchieri, Cristina 26, 216–17, 218
- Bradley, T. 44
- British Colonialism 50–2
- Bueger, C. 10, 152, 214
- Burkina Faso
child marriage in 41
FGM in 41, 55, 193
- C**
- Cairney, Paul 132
- Callon, Michel 10, 82, 97, 110
- Cambodia, FGM in 39
- Cameroon, FGM in 39
- Canada
child marriage in 54
diaspora FGM in 99
and IACHR 68
- capacity-building 77, 133, 189
- Caribbean, child marriage in 38
- Castro Pereira, J. 84
- Caucasus region 193, 194, 199
and GBSS 98
sex ratios in 29, 40
- Central Asia 32, 194
child marriage in 38
- centralization 89, 132, 134–6, 138, 139, 151,
207, 211
- Chao, Fengqing 40, 193, 194
- childbearing 42
- child brides
kidnapping/selling 27, 32
trafficking 33
- child marriage 2, 7, 32–3, 136
consequences of 42–3
and crises/instability 29
cross-border issue 33
data on 34–9
decline in 190–1
motives behind 25–9
prevalence of 35, 38–9, 160, 179, 180,
181, 182, 184, 192
world map of 35
see also *Girls Not Brides; Global Programme to End Child Marriage; marriage*
- Child Marriage in an International Frame* 24
- Child Marriage Prevention Act 46
- Child Marriage Research to Action Network (CRANK) 136, 159
- Child Marriage Restraint Act 1929 52
- child mortality 51
- child neglect 7
- Chilo, D. 198
- China 33, 147, 193, 194
and GBSS 98
One-Child Policy 56
sex ratios in 40, 41, 56
travel for IVF 32
- Christianity 28
- circumcision 29, 39, 55
- Cislaghi, Ben 26, 30, 58, 217
- civilizational superiority 44, 47, 51
- climate change 63, 64, 79, 84, 156
and gender equality 196–8
- Clinton, Hillary 60
- clitoridectomy 45
- Cloward, K. 216
- co-creation 88, 136–7, 189, 207, 211,
219, 224
- Cold War 57, 58, 74
- colonialism 5, 44, 47, 218
in Asia and Africa 50–2
and knowledge 221
and superior knowledge 78
- Commission on the Status of Women 14, 16,
54, 79, 94–5
- commonalities and differences
of gender programmes 73, 141
of harmful practices 2, 17, 24–5, 43–50, 70
see also *comparative analysis of programmes*
- communication 146, 220
- Communities of Practice (CoP) 79
- community-based interventions 217
- Community for Understanding Scale Up 217
- comparability of countries 187
- comparative analysis of programmes
child marriage in Ghana vs Togo 182–4, 186
child marriage in Sierra Leone vs
Liberia 184–5
child marriage in Zambia and
Zimbabwe 182–4
of the gender programmes 140–51, 151–3
- complexity of actors and levels 170–2
- Confucian beliefs 29
- connecting sites 87–9, 138–9, 151, 223
see also *knowledge transfer*
- context, the importance of 172–3
- contraception 199
see also *sexual and reproductive health and rights*
- Convention on the Elimination of All
Forms of Discrimination against Women
(CEDAW) 5, 7, 22, 50, 57, 66
and child marriage 54
data collection 34
framing of harmful practices 47
obligations on states 65
violence against women 28
- Convention on the Rights of the Child
(CRC) 5, 7, 47, 56, 57, 67, 91, 183
and child marriage 54

data collection 34
 obligations on states 66
 cooperation 76
 coping strategies 28, 189, 197
 co-production 88, 219, 223
 Council of Europe 68
 COVID-19 28, 38, 63, 180, 185, 189
 and harmful practices 198–200
 crises *see* [climate change](#); [COVID-19](#);
 [humanitarian crises](#)
 culture
 cultural imperialism 45, 51
 cultural practices 1
 and harmful practices 6
 socio-cultural norms 26, 213
 see also [traditional customs](#)
 Cunningham, M. 219

D

Danny Kaye Visitor Center 96
 data
 availability/reliability of 169–70, 187–8
 collection 34, 66
 Data for All 134–6
 data quality 107
 diverse data sources 189
 Declaration on the Elimination of Violence
 against Women 4, 59
 Demographic and Health Surveys 16, 39,
 102, 166
 Desai, Bharat H. 198
 Dey, J. 88
 diasporas and FGM 39, 99
 difference-in-difference (DiD) approach 3,
 156, 172, 200, 208
 and attribution 176–89
 dilemmas of governance 137–9
 displacement 197, 198
 Djibouti 55, 193
 FGM in 39
 Domínguez, Roberto 23
 Doneys, P. 216
 dowry practices 24, 41, 197
 and bride price 27
 droughts 197
 Duarte, Marisa Elena 221
 Duflo, Esther 156, 177, 189, 202

E

Eastern Africa
 child marriage in 182
 child marriage comparative study 182–4
 Eastern Europe 193
 child marriage in 38
 and GBSS 98
 sex ratios in 40
 Eastern Europe and Central Asia Regional
 Office (EECARO) 97, 98

economic factors 25, 27–8
 education 52, 159, 197
 access to 40, 43, 59
 Beijing Platform for Action 69
 and COVID-19 pandemic 185
 effects on girls 180, 190
 and India 88, 173
 right to 5, 66–8, 70, 217
 sex education 195
 Egypt
 child marriage in 68
 feminism in 52
 FGM in 55, 193
 medicalized FGM 32
 El-Dareer, Asma 55
 ElMorally, Reham 51
 Elnakid, S. 195
 empowerment of stakeholders 189
 enrolment of stakeholders 85, 103–6, 151, 205
 resistance from 143–4
 environmental crisis 84
 and harmful practices 197–8
 equality, backlash against 63, 194, 195,
 196, 224
 Eritrea
 child marriage in 41
 decline of FGM in 193
 FGM in 41
 Essén, Birgitta 44
 Ethiopia
 child marriage in 41
 conflict in 195
 decline of FGM in 193
 FGM in 41, 55
 Europe 68
 and genital cutting 44–5
 sex selection in 62
 European Union 68, 73, 92, 98, 206
 criminalization of VAW 62
 donor to GGP's 92
 FGM in 39
 evaluation reports 168
 alternative methods 188–9
 Evers, Hans-Dieter 132
Every Girl Counts 109
 evidence-based policy making 22, 82, 141,
 155, 217
 as 'best practice' 81
 and knowledge hubs 132
 see also [knowledge transfer](#)

F

family, the
 and child marriage 32
 and FGM 31
 planning 56, 65
 and virginity/sexual morals 26–7
 see also [marriage](#)

- Farouki, Leen 191–3
- female genital mutilation (FGM) 2, 55–6
- consequences of 42–3, 55
 - data on 34–42
 - decline in 191–3
 - in Global North 44–5
 - motives behind 24–9
 - opposition to programme 99
 - Orchid Project/ The Girls Generation 130
 - prevalence of 36, 39
 - and technology 32
 - terminology used 6
 - travel to circumvent law 32–3
 - types of 31
 - world map of 36
- see also* Joint Programme to Eliminate FGM
- Female Infanticide Act 1870 51
- feminism 12, 22, 75, 113, 125
- and abortion 112–13
 - activism 57, 80
 - in Egypt 51
 - evaluation methods 189, 208
 - feminist critique 82, 223
 - feminist knowledge 212, 220, 221
 - and FGM 55
 - in India 52
- fertility and IVF treatments 32
- Flinders, M. 219
- Food and Agricultural Organization (FAO) 76
- forced marriage *see* child marriage
- fragility-resilience spectrum 152
- funding 90, 92, 94, 107, 149, 224
- cuts in 47, 63, 86, 91, 195
 - of global programmes 148, 152, 207–8
 - and the long-term 150
 - pooling of 76
 - and sexual health rights 113
- G**
- Gambia 41, 127, 193
- gender-affirming surgeries 44
- Gendercide Awareness Project 115
- gender-based violence 65
- definition 4
 - harmful practices as a form of
- gender-biased sex selection 2, 7, 56–7, 98, 193–4
- and abortion 111–18
 - consequences of 42–3
 - data on 34–42
 - in Global North 45–6
 - global trend of 98
 - motives behind 25–9
 - prevalence of 37, 40
 - programme faded away 109–10
 - and technology 30–1, 32
- see also* abortion; Global Programme to Address Gender-Biased Sex Selection
- gender equality
- backlash to 63, 194, 195, 224
 - common vision of 141–2
- Georgia 98, 193, 194
- sex ratios in 40
- Ghana 185
- child marriage 179, 181, 186
 - child marriage comparative study 180–2
 - FGM in 39
- Girl Generation, The 131, 207
- Girls Not Brides 126, 129, 129, 130, 131, 136, 207
- global gender programmes 2–3, 7–9, 74–81
- activities of 141–2
 - actors in 81–9, 118–32, 142–4
 - and anti-foundationalism 95–7
 - ‘at a glance’ 93–4
 - and attribution 162–76
 - benefits 147–9
 - centralization 134–6
 - co-creation 136–7
 - complexities of 212–14
 - connecting sites 87–9
 - definitions of 74–7
 - enrolment of stakeholders 103–6
 - global problems and taboos 97–100
 - goals 141–2
 - interaction 144–6
 - knowledge transfer 73, 77–81, 106–11, 132–9
 - localization 83–5, 85–7, 118–32, 133–4
 - monitoring and evaluation 146–7, 156–62
 - in practice 89–118
 - solutions and best practices 100–3
 - success factors 140–51, 151–3
 - sustainability 149–51
 - target countries 148
- global governance
- about 22–3
 - and anti-foundationalism 83–4
 - ‘collaborative governance’ 132
 - complexity of 212–14
 - dilemmas of governance 137–9
 - governance mechanisms 23
 - of harmful practices 50–64
 - knowledge transfer in 11
 - mobilization against harmful practices 50–64
 - role of knowledge in 204
 - and science and technology studies 9–10
- global magnitudes of harmful practices 34–42
- global mobilization against harmful practices
- early activism 19th–20th century 50–2
 - harmful practices as VAWG 50–64
 - post WWII era 52–3
- Global North/South, harmful practices
- in 44–50

- global policy 3, 79–80, 209–10
 - concept of 23
 - and knowledge 9
 - 'policy windows' 218
 - and transnational problems 72–3
 - see also* evidence-based policy making; knowledge; knowledge transfer
- Global Programme to Address Gender-Biased Sex Selection 3, 63, 73, 92
 - and abortion 111–13
 - 'at a glance' 121
 - comparative analysis 140–53
 - complexity of 208–9
 - enrolment 103–4
 - evaluation reports 168
 - failures of 109, 124, 208
 - resistance to 97, 101–4, 133–4
 - and sustainability 150
 - see also* gender-biased sex selection
- Global Programme to End Child Marriage 2, 63, 73
 - 'at a glance' 119
 - co-creation of knowledge 136–7
 - comparative analysis 140–53
 - comparison of programmes 182–5
 - evaluation reports 168, 176–89
 - and humanitarian crises 195
 - and knowledge diffusion 126
 - mapping stakeholders 118
 - networks 125–6, 129–30
 - performance indicator 160
 - and United States 47, 54
 - see also* child marriage
- Glover, Jennifer 24
- Global goals 140, 141–2, 208
- Gorur, R. 82, 84, 88
- governments *see* nation states
- grassroots 70, 80, 92, 108, 120, 125, 130–2
- Gruenbaum, E. 44
- Guilmoto, Christophe
- Guinea 41
 - child marriage in 41
 - decline of FGM in 193
 - FGM in 39
- Guterres, António 196
- H**
- Haraway, Donna 223
- harmful practices 41, 48
 - Beijing Platform for Action 61
 - commonalities and differences 17, 23, 24, 43–50, 70, 73
 - consequences of 42–3
 - decline in 190–4
 - definitions and contestations 1–7
 - driven underground 142, 218
 - global governance of 212–14
 - global mobilization against 50–64
 - in Global North/South 44–50
 - and humanitarian crises 194–200
 - law and agreements 65–71
 - lifecycle of 30–1, 30
 - magnitudes of 34–42
 - methods behind 30–4
 - motives behind 23–30, 205
 - and sustainable development 62–4
 - as violence against women 58–62
 - see also* child marriage; female genital mutilation; gender-biased sex selection
- health 59
 - access to care 40, 43, 65, 137
 - effects of harmful practices 42–3
 - technological innovations 215
- Heise, Lori 26, 30, 58, 214, 217
- historical review of global mobilization
 - child marriage 53–4
 - early activism 19th–20th century 50–2
 - female genital mutilation 55–6
 - gender-based sex selection 56–7
 - post WWII era 52–3
 - and sustainable development 62–4
 - as violence against women 58–62
- Hobden, S. 84
- Hong Kong, GBSS in 33, 193
- Hosken Report 55
- human and non-human actors 10–11, 82, 84, 85, 86, 111, 204
- humanitarian crises 4, 29, 38, 189
 - and gender equality 194–6
- human rights 17, 65, 75
 - global consensus on 58
 - H. Clinton speech 60
 - perspective of 142
 - post WWII era 52–3
- human trafficking 4, 8, 34, 43, 75
- I**
- identity 1
 - and FGM 51
 - shared group 29
 - see also* culture
- India 33, 125, 148, 193, 194, 198–9, 200
 - British colonialism in 50–2
 - child marriage in 25, 34, 38, 52, 179, 190–1
 - child marriage decline 173, 190
 - education platform 88
 - FGM in 39
 - and GBSS 31, 98
 - harmful practices 40–2
 - sex ratios 40, 43, 56
 - widow burning 4, 51
- Indigenous knowledge 221, 223
- individuals
 - behaviour of 218
 - effects of harmful practices on 42–3

Indonesia 42
 FGM in 39, 143
 inequality 25–6, 40, 62, 132, 141, 223
 and public policy 132
 structural inequality 190
 and technology 216
 infanticide 7, 60, 61
 informational campaigns 66
 Institute of Development Studies 217
 interaction between global programmes 140,
 144–6, 172–3, 208
 Inter-American Commission on Human
 Rights (IACHR) 68
 intersement 85, 100–3, 206
 intergovernmental organizations 90, 174
 interlinkages of harmful practices 24
 international aid *see* [global
 gender programmes](#)
 International Conference for Population and
 Development (ICPD) 58–9, 69
 International Covenant on Economic, Social
 and Cultural Rights (ICESCR) 65
 international law 65–7
 international organizations, alliances of 76
 International Women's Day 130
 International Women's Year 1975 57
 interregional mechanism 104, 133
 Iran
 and abortion 113
 child marriage in 38
 Iraq, FGM decline in 193
 Istanbul Convention 62, 68

J

Jeffreys, S. 45
 Joffe, Lisa Fishbayn 43
 Johansen, R. Elise B. 6
 Johnsdotter, Sara 6, 44, 218
 Joint General Comment, state obligations 66–7
 Joint Programme to Eliminate FGM 2, 7, 73,
 75, 125
 comparative analysis 140–53
 evaluation reports 168
 integrated network 127
 at international day 128
 and knowledge transfer 102, 134
 mapping stakeholders 120, 128
 and network structure 126, 129, 130, 131
 resistance to programme 99
 theory of change 157–8
see also [female genital mutilation](#)

K

Kanem, Natalia 72, 151
 Kenya
 drought 197–8
 FGM in 32, 55, 127, 193
 transportation in 108

Kleinsorg, L.K. 45
 knowledge 77
 brokering 155, 210
 'coloniality of knowledge' 78, 221
 definition of 78, 213
 exchange 77, 81, 86, 109, 120, 138,
 171, 207
 knowledge production 81
 management 19, 107, 132, 134–6, 159,
 207, 210
 mobilization 15, 72, 84, 207, 214, 219
 politics of 222–4
 role of 23, 203–8, 212
 uptake 77, 139, 151, 207, 210
see also [knowledge transfer](#)
 knowledge transfer 77–81, 97
 centralization 89, 132, 134–6, 138, 139,
 151, 207, 211
 co-creation 88, 136–7, 189, 207, 211,
 219, 224
 connecting sites 87–9, 122, 138–9, 151
 co-production 88, 219, 223
 in global governance 8–9, 11
 governance dilemmas 137–9
 improving 218–22
 key factors in 208
 knowledge flows 106–11
 knowledge hubs 63, 87–8, 132–3, 133,
 138, 138, 207
 modes of 132–9, 179, 183, 207, 213
 online courses 138–9
 into policy 8–9, 18, 85, 89, 110, 189, 204,
 208, 209–10
see also [Actor-Network
 Theory; localization](#)
 knowledge translation
 Problematisation (Defining harmful
 practices as global issues, breaking taboos,
 and generating data)
 Intersement (Aligning diverse actors
 around proposed solutions and
 best practices)
 Enrolment (Securing formal commitment
 and overcoming resistance)
 Mobilization (Maintaining engagement,
 circulating knowledge, and securing
 sustained commitment)
 knowledge-policy interface, *see also*
[evidence-based policy making](#)
 Koski, Alissa 54
 Kosovo and GBSS 98
 Kyrgyzstan, bride kidnapping in 32

L

labial reductions 45
 Laos 39
 Latin America 62, 68
 child marriage in 32, 38

- Latour, Bruno 114, 120, 124, 131, 139, 206
 'Reassembling the Social'
 Actor-Network Theory 10–11, 82–3, 117
 'art of persuasion' 104
 'connecting sites' 87–9, 132
 'localizing the global' 85–7, 89, 94
Reassembling the Social 10, 82, 83
 'redistributing the local' 118
 'sociology of associations' 151
- Latvia 68
- law, circumventing the 29, 32–3
- Law, John 10, 82
- Leander, A. 83
- legal architectures and agreements 65–71
 consensus documents 68–71
 international law 65–7
 national constitutions 68
 regional instruments 67–8
- Liberia 184–5, 193
 child marriage in 184
- Littoz-Monnet, A. 81
- Livaha, P. 125, 137, 223
- lived realities 209, 220
- localization 89, 133–4, 139, 151, 159, 207, 211, 220
 empowering local partners 189
 glocalism 75
 local actors 223
 localized diagnostics 25
 localizing the global 83–5
 redistributing the local 85–7, 118–32, 207
- Longman, C. 44
- M**
- magnitudes of harmful practices 34–42
- Malaysia
 FGM in 39, 47
 resistance to programme 143
- Maldives, decline in FGM 193
- Mali 193, 195, 217
- management and steering 146–7
- Mandal, M. 198
- mapping actors *see* Actor-Network Theory
- maps
 child marriage 35
 female genital mutilation 36
 skewed sex ratios 37
 son preference 37
- Maputo Protocol 5, 62, 67
- marriage 32
 child brides 27, 32, 33
 consensual unions 25, 54
 dowry practices 24, 41, 197
 economic factors 27
see also child marriage
- maternal mortality 2, 42
- Mauritania 41, 68, 193
- media 105, 106, 108
- mediation 86–7
- medicalization of harmful practices 45, 59
 and FGM 31–2
 and GBSS 31
- Mehta, Hansa Jivraj 52–3, 53
- men and boys
 boys and child marriage 38
 involving men 219
 male circumcision 39
MenEngage Alliance
- menstrual restrictions 41
- methodology 3, 9–17, 204
 of evaluation 178–80
 mixed-method approach 14–17
- methods behind harmful practices 30–4
- Metzler, J. 195
- Mexico City Conference 57
- Middle East 32, 143
 FGM in 39, 92
- migrant women 67
- migration and FGM 39
- Millennium Development Goals 75
- minority ethnic communities 41–2
- 'missing' women 2, 40, 56, 98, 99–100, 114–18, 116
- missionaries 50–1
- mobilization stage 85, 106–11, 151, 206
 key factors in the 208
- monitoring and evaluation 146–7, 153, 165, 208
 alternative methods 201
 complexity of 212
 global frameworks 156–62
- Montenegro 193
 and GBSS 98
 sex ratios in 40
- Morocco 68
- motives behind harmful practices 23–30
- Mubaiwa, O. 198
- multi-level operations 76
- Multiple Indicator Cluster Surveys (MICS) 16, 39, 102, 167
- multi-stakeholder approach 59, 63, 76
- Mwebia, Tony 127, 131
- N**
- Nairobi
 Conference on Women 57
 Orchid Project 131
- 'naming and shaming' strategy 51
- nation states 57
 legal obligations 65–71
 national constitutions 68
 national momentum 180–2, 183, 184–5
- Nepal 98, 217
 child marriage in 25, 178, 180–2
 harmful practices in 41
 sex ratios in 40

- networks 205
 society as a network 82
see also Actor-Network Theory;
 localization
- New Zealand, diaspora FGM in 39
- nicking/pricking 31–2
- Nigeria 217
 conflict in 195
 decline in FGM 193
 FGM in 55
 harmful practices in 41
 medicalization of FGM 32
- non-governmental organizations 15, 16, 69,
 74, 80, 91, 207
 and VAWG 58
- North America 39, 46
- Norway 76, 92, 147
- O**
- observed outcomes of gender
 programmes 166–7
- Oman 55
- online courses 138–9
- Orange Room 94, 95
- Orchid Project 128, 130, 130, 131, 207
- outreach 69, 76, 108, 168
- P**
- Pakistan 33, 98
 child marriage 25, 38
- parallel trend assumption 187
- participatory co-production 219
- patriarchy 4, 23, 24, 51
- Peng, I. 163
- Philippines 39
- Piedalue, Amy 218
- political factors 29, 113–14, 210
 abortion 112
 backlash 141–2, 194, 195, 196, 224
 conservative forces 64–5, 68
 politics of knowledge 222–4
 President Putin 63
 President Trump 47, 63, 113
- polygamy 24
- pooling expertise and resources 74, 76, 164
- Pope, D.H. 197
- Popper, Karl 202
- population growth
 and child marriage 38
 and sex selection 56
- positionality 12–14
- Pouliot, Vincent 23
- poverty 27–8, 32, 43, 190, 195, 196, 198
- power dynamics 12, 205
 and politics 222–4
- prenatal sex selection *see* gender-biased
 sex selection
- privileged status 44
- problematization stage 85, 206
- Programme of Action 58, 59, 60, 63, 69
- Q**
- qualitative and quantitative methods 14, 16,
 161, 186, 189, 211
- quality assurance 107
- quantitative methods 12, 106, 152, 220
- Quijano, Aníbal 221
 ‘coloniality of knowledge’
- R**
- Rahm, Laura 74
see also 3-M Model
- randomized evaluations 177
- Reassembling the Social* 10, 82, 83
- regional agreements 62, 67–8, 70
- Regional Office South Asia (ROSA) 24
- Reinicke, W.H. 79, 24, 28–9, 66
 and FGM 55
- Republicans and abortion 112–13
- research
 complexities and limitations 209–14
 interview respondents 15
- risk-sharing 76
- rites of passage 26, 30, 55
- Roe vs Wade 113
- Rogers, E.M. 215
- Roosevelt, Eleanor 52–3, 53, 64
- Routledge International Handbook of Harmful
 Cultural Practices* 24
- S**
- safe spaces 222
- safety and protection 28, 29–30
- Sagalova, Vera 38
- Saramago, A. 84
- scaling-up 217–18
- Schmidt, C. 79
- Science and Technology Studies 9–17, 73,
 82, 152, 204
- Sen, Amartya 40, 56, 100
see also ‘missing’ women
- Senegal 193
- sex ratios, skewed 40, 98, 193, 193
 bachelor societies 43
 map of 37
 reversing sex ratios 102
- sexual and reproductive health and rights 6,
 157, 214
 contested rights 196, 197
 and COVID-19 pandemic 198, 199
 and gender equality 4
 and global programmes 141, 172
 protection of 56, 59
 and UNFPA 90, 91, 107, 117
see also abortion
- sexual morals 26–7

- Shahzad, R. 82, 84
 shame 26
 Sharawi, Huda 51–2
 Shell- Duncan, Bettina
 short/long-term 174–6, 187, 221
 Sierra Leone 41, 110, 193
 child marriage in 118, 178, 184
 child marriage comparative study 184–5
 FGM in 108
 Singapore
 FGM in 39
 GBSS in 33, 194
 Sismondo, Sergio 152
 situated and embodied knowledge 223
 slavery 53, 54, 60
 social change, complex nature of 219
 social media 33
 harms from 216
 social network analysis 118, 120, 124, 207
 social norms 29, 141, 216–17
 changing social norms 218–22
 of violence against women 43
 Western norms 47
 society and effects of harmful practices 42–3
 socio-economic factors 28, 190
 and religion 29
 ‘sociology of associations’ 82, 151
 socio-technological innovations 215–18
 Somalia 68, 193
 conflict in 195
 FGM in 39, 47, 55
 harmful practices in 41
 son preference 40, 56
 and crises 199–200
 world map of 37
 see also gender-biased sex selection
 South Asia 68, 105, 166, 194
 child marriage in 24, 32, 33, 38, 190
 harmful practices in 41
 South Asian Association for Regional
 Cooperation (SAARC) 62, 68, 105
 South Korea 33, 40, 56, 199
 GBSS in 193
 reversing sex ratios 102, 194
 South Sudan 68
 spillover effects 8, 156, 164, 172–3,
 187, 212
 Sri Lanka, FGM in 39
 stakeholders 74, 103–4
 enrolment of 103–6
 mapping of 118, 120, 122
 multi-stakeholder approach 59, 63, 76
 steering effects 140, 146–7, 208
 sterilization 62
 Stockbruegger, J. 152
 Stone, Diane 73, 79, 80, 118, 138
 Strategic Technical Assistance for Research
 (STAR Initiative) 107–8, 136
 Sub-Saharan Africa 38, 191, 194
 effects of drought 197
 success factors 140–51
 Sudan 193
 child marriage in 41
 conflict in 195
 FGM in 32, 47, 55
 harmful practices in 68
 sustainability of programmes 140, 149–51, 208
 Sustainable Development Goals 162, 167,
 178, 194, 200
 adoption of 75–6
 data collection 34
 and FGM 17, 32
 framework of 205
 and GBSS 99, 113, 149
 and gender equality 155, 157, 190
 and harmful practices 2, 50, 62–4, 70, 92
 systems change 200–2
- T**
 taboos 97–100
 Taiwan 193
 Tangaraja, Gangeswari 77
 Tanzania 81
 FGM decline in 193
 technology 87, 206
 Data for All 134–6
 digital issues 221
 and GBSS 56
 and harmful practices 30–4, 64
 and marriage 32
 online courses 138–9
 socio-technological innovations 215–18
 teenage pregnancy 25, 32
 terminology 5–6
 Thailand
 fertility clinics in 32
 FGM in 39
 Thakur, Ramesh 22
 Theory of Change 141, 157–8, 164,
 166, 188
 Togo
 child marriage in 181, 185, 186
 child marriage comparative study 180–2
 traditional customs 43, 65, 68, 70, 110, 120
 and child marriage in Zambia 183
 commonalities of 24
 driven underground 142, 218
 and FGM 55
 and harmful practices 1
 marriage and family 27
 rites of passage 26, 30, 55
 socio-cultural norms 26
 and terminology 5–6
 and the UN 61
 virginity 27
 traffic light framework 138

translation of knowledge into policy 18,
32–3, 72–3, 85, 89, 110, 204, 209–10
and co-creation 189
of knowledge, *see also*
knowledge translation
transparency 76, 88, 177, 186
travel to circumvent law 29, 32–3
True, Jacqui 80
trust 224
Tunisia 68
sex ratios in 40, 193, 194
Turkey 68, 134, 145
Twitter (X) 86, 124, 207

U

Uganda 39
Ukraine War 195
ultrasounds 31, 56, 193
Underwood, C. 222
Unified District Information System for
Education (UDISE) 88
Union of Soviet Socialists Republics
(USSR) 29
United Kingdom, FGM in 39, 44, 45
United Nations
Declaration on the Elimination of Violence
against Women 4, 59
founding of 47, 50
global gender programmes 2–3
Universal Declaration of Human
Rights 17, 52–3, 65
see also global gender programmes
United Nations Children's Fund
(UNICEF) 2, 24
about 89–94
child marriage 2, 7, 38
knowledge portal 107
see also Global Programme to End
Child Marriage; Joint Programme to
Eliminate FGM
United Nations Development Programme
(UNDP) 91
United Nations Educational, Scientific and
Cultural Organization (UNESCO) 76
and cultural practices 6
Teacher Task Force 139
United Nations Population Fund
(UNFPA)
and abortion 62
about 89–94
child marriage 2, 7, 38, 89
female genital mutilation 2, 7, 61
gender-biased sex selection 2, 7, 63
sexual reproductive and health rights 90
see also Global Programme to Address
Gender-Biased Sex Selection; Global
Programme to End Child Marriage;
Joint Programme to Eliminate FGM

United Nations Population Fund (UNPFA)
see sexual and reproductive health
and rights
United Nations Entity for Gender
Equality and the Empowerment of
Women (UN Women) 38, 61, 68,
90, 91, 195, 196
United States 32, 68
and abortion 112–13
aid funding 195
and child marriage 46–7, 54
and CRC 66
FGM in 39
and genital cutting 45
Universal Declaration of Human Rights
(UDHR) 17, 52–3, 65

V

Van Langenhove, Luk 22
Velázquez, Florez, Rafael 23
Vietnam 193, 194
FGM in 39
and GBSS 98
sex ratios in 40
and ultrasounds 31
violence against women and girls (VAWG)
virginity testing 62

W

Wazir, Rekha 218
Wessal, A. 154
Westcott, P. 154
Western Africa 217
child marriage in 181, 184
child marriage comparative study 180–2,
184–5
Western norms 47
widows, burning of 4, 51
witchcraft accusations 41
Witte, J.M. 79
Wodon, Quentin 38
Women, Peace and Security (WPS) 80
women and girls 23
and crises 194–200
and digital technology 81, 120
as economic burden 27–8
effects of harmful practices 42–3
family/societal expectations 26
gender inequality 24–6, 57, 65
harmful practices against 1–7, 22
and human rights perspective 142
justice for 212–14
life-cycle of violence 30, 59
lived realities 220
menstrual restrictions 41
safety and protection of 28–30
sexuality and morality 26–7
and technological innovations 215–18

INDEX

violence against 4, 42–3, 58–62, 68, 139
see also child marriage; female genital mutilation; gender-biased sex selection
WomanStats Project 34
Wood, M. 219
World Bank 16, 75, 98
World Health Organization (WHO)
and FGM 31, 45, 55, 61
Programme on AIDS 75
World War II, post-war human rights 52–3

Y

Yaya, Sanni 38
Yemen 195
youth-led approaches 92, 207, 209, 219

Z

Zambia 179
child marriage 25, 182
child marriage comparative study 182–4
Zimbabwe
child marriage 182
child marriage comparative study 182–4

