

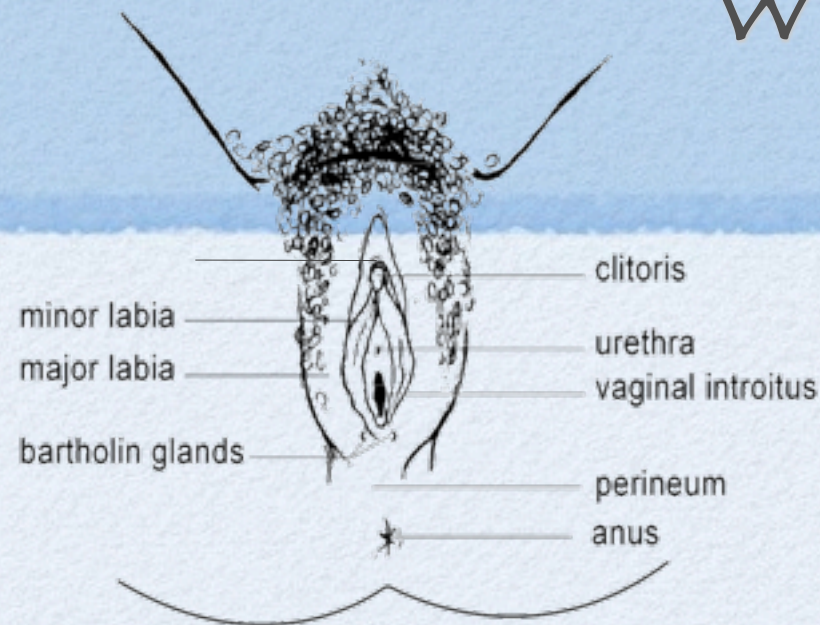
FGM AND HUMAN RIGHTS

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FEMALE GENITAL MUTILATION - DEFINITION

FGM constitutes all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for cultural or non-therapeutic reasons.
(WHO, 2008)

WHO CLASSIFICATION OF FGM (2008)



Type I : Partial or total removal of the clitoris and / or the prepuce (clitoridectomy).

Type II : Partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (excision).

Type III : Narrowing of the vaginal orifice by creating a covering seal through the cutting and apposition of the labia minora and / or labia majora, with or without excision of the clitoris (infibulation).

Type IV: Unclassified: All other harmful procedures to the female genitalia for non-medical purposes, for example: pricking, piercing, incision, cauterization and scraping.

FGM - CLASSIFICATION

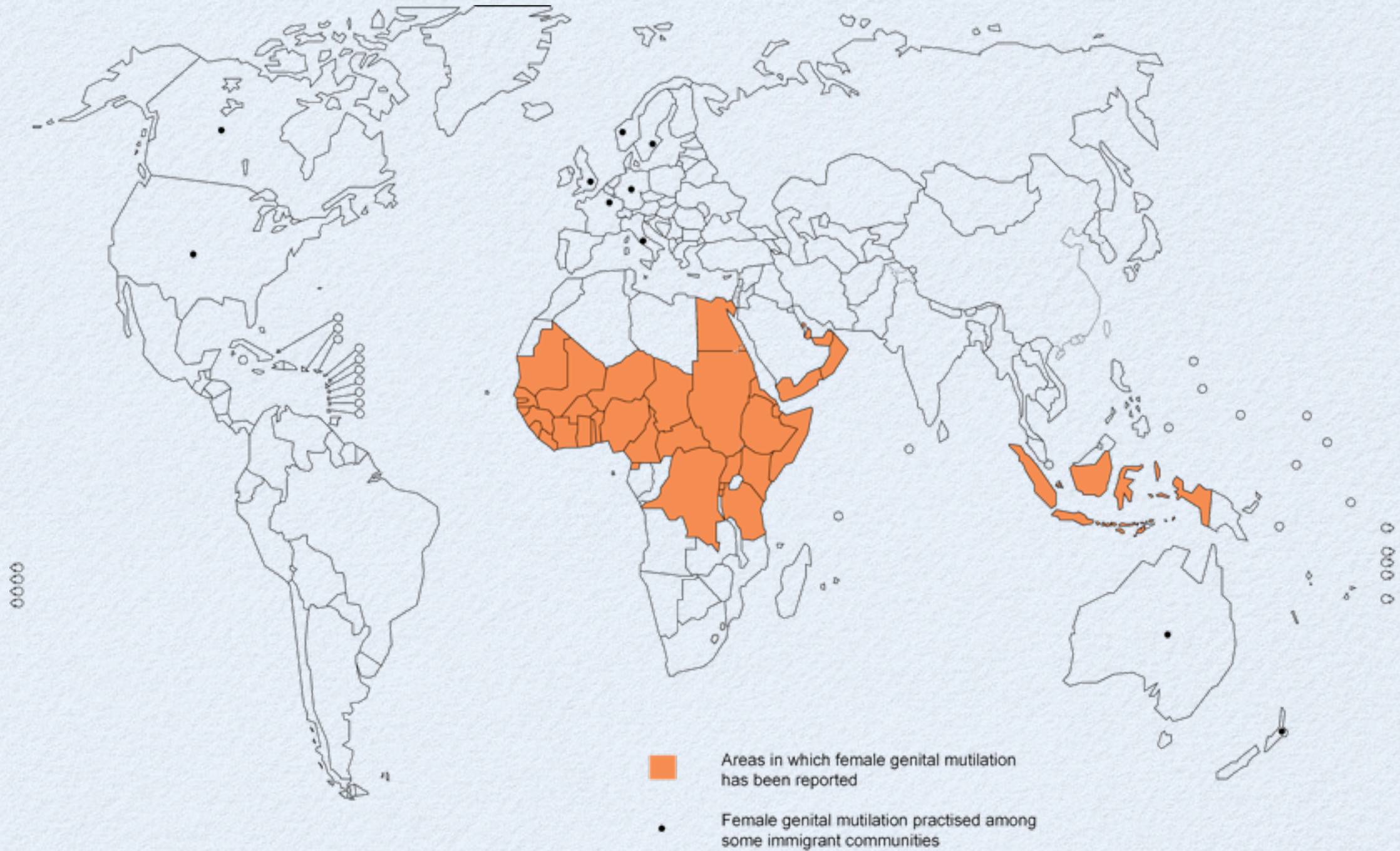
Type I — Partial or total removal of the clitoris and/or the prepuce (clitoridectomy). **Type Ia**, removal of the clitoral hood or prepuce only; **Type Ib**, removal of the clitoris with the prepuce.

Type II — Partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (excision). **Type IIa**, removal of the labia minora only; **Type IIb**, partial or total removal of the clitoris and the labia minora; **Type IIc**, partial or total removal of the clitoris, the labia minora and the labia majora. Note also that, in French, the term ‘excision’ is often used as a general term covering all types of female genital mutilation

Type III — Narrowing of the vaginal orifice with creation of a covering seal by cutting and appositioning the labia minora and/or the labia majora, with or without excision of the clitoris (infibulation). **Type IIIa**, removal and apposition of the labia minora; **Type IIIb**, removal and apposition of the labia majora.

Type IV — All other harmful procedures to the female genitalia for non-medical purposes, for example: pricking, piercing, incising, scraping and cauterization.

EACH YEAR 3.3 MILLION GIRLS ARE FORCED TO UNDERGO FEMALE GENITAL MUTILATION



FGM STATISTICS

- In the 28 countries, from which prevalence data exists, an estimated 101 million girls and women above 9 years have undergone FGM, and 3.3 million girls are at risk of being subjected to FGM annually.
- In these 28 countries the prevalence of FGM ranges from 0.6% to 98% although the practice of FGM is also found in other countries, including among migrants from FGM practicing countries.

FGM - WHY?

- The age at which FGM is practised differs from one ethnic group to the other.
- Varied and complex belief systems: "good tradition", "a religious requirement" or a necessary rite of passage to womanhood, ensures cleanliness or better marriage prospects, prevents promiscuity and excessive clitoral growth, preserves virginity, enhances male sexuality and facilitates child birth.
- The degree of "fixedness" of FGM varies widely.
- The "cultural keepers" of the practice vary as well.
- To make sure that people conform to the practice, communities have put strong enforcement mechanisms into place.
- On the other hand girls who undergo FGM are provided with rewards

FGM- TRENDS OF CHANGE

- Overall, the prevalence of FGM has declined, and in almost all countries girls and young women are less likely to have undergone FGM than older women. The pace of reduction varies widely, however, and millions of girls remain exposed to the risk of FGM in the future

FGM- HEALTH ISSUE

- **Short-term complications of FGM**

- The degree of pain and trauma is such that a woman or girl is often left in a state of medical shock after the operation

- Urine retention:

- Especially in the case of FGM Type III when skin is stitched over the urethra.

- Also in the case of other types due to pain, tissue swelling and inflammation.

- Infections

- In extreme cases: death due to severe and uncontrolled bleeding or to infection.

- All these risks are repeated in cases where women have to go through re-infibulation

FGM- HEALTH ISSUE

- **Long-term complications associated with FGM**
- *Gynaecological and urinary complications*
- *Obstetrical complications*

FGM- HEALTH ISSUE

- Since interventions against FGM first started more than 40 years ago, providing information about the health risks associated with FGM has been the most popular approach.
- It is believed that an increased knowledge of the negative health effects can stimulate reflection and critical thinking, leading to reduce the approval of, and eventually to the abandonment of, FGM.

FGM - CULTURAL ISSUE

- A major reason for apparent contradiction between attitude and behaviour is a social and cultural pressure to uphold the tradition.
- Therefore, the importance of a community-wide change to enable individual families to abandon FGM is now widely recognized.
- Experience shows that large-scale abandonment can only be expected when FGM is no longer an all-dominant social norm and families can abandon the practice without the risk of stigmatization and exclusion.

FGM - FORCED PRACTICE

- Video including interview of Efua Dorkenoo
http://www.youtube.com/watch?v=MD4U_rIpNJ4

FGM - HUMAN RIGHTS

- The international community recognizes female genital mutilation as a serious violation of human rights. These practices deprive women and children of their rights :
 - to non-discrimination
 - to a maximum level of health, including physical and mental well-being
 - not to be subjected to violence or discrimination based on sex,
 - nor to undergo torture or cruel, inhuman and degrading treatment,
 - to a life or in certain cases, the right to live
 - also right to education might be compromised

FGM - VIOLENCE AGAINST WOMEN

- Every year, violence in the home and the community devastates the lives of millions of women.
- Gender-based violence kills and disables as many women between the ages of 15 and 44 as cancer, and its toll on women's health surpasses that of traffic accidents and malaria combined.
- Violence against women is rooted in a global culture of discrimination which denies women equal rights with men and which legitimizes the appropriation of women's bodies for individual gratification or political ends.
- ***The Declaration on the Elimination of Violence Against Women*** states that "violence against women means 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 in private life." (Article 1) It further asserts that states have an obligation to "exercise due diligence to prevent, investigate and, in accordance with national legislation, punish acts of violence against women, whether those acts are perpetrated by the State or by private persons." (Article 4-c)

FGM - IMPUNITY

- **The Problem of Impunity**

Perpetrators of violence against women are rarely held accountable for their acts.

- Women who are victims of gender-related violence often have little recourse because many state agencies are themselves guilty of gender bias and discriminatory practices.

- Many women opt not to report cases of violence to authorities because they fear being ostracized and shamed by communities that are too often quick to blame victims of violence for the abuses they have suffered.

- Violence against women is a violation of human rights that cannot be justified by any political, religious, or cultural claim. A global culture of discrimination against women allows violence to occur daily and with impunity.

FGM - TREATIES AND DECLARATIONS

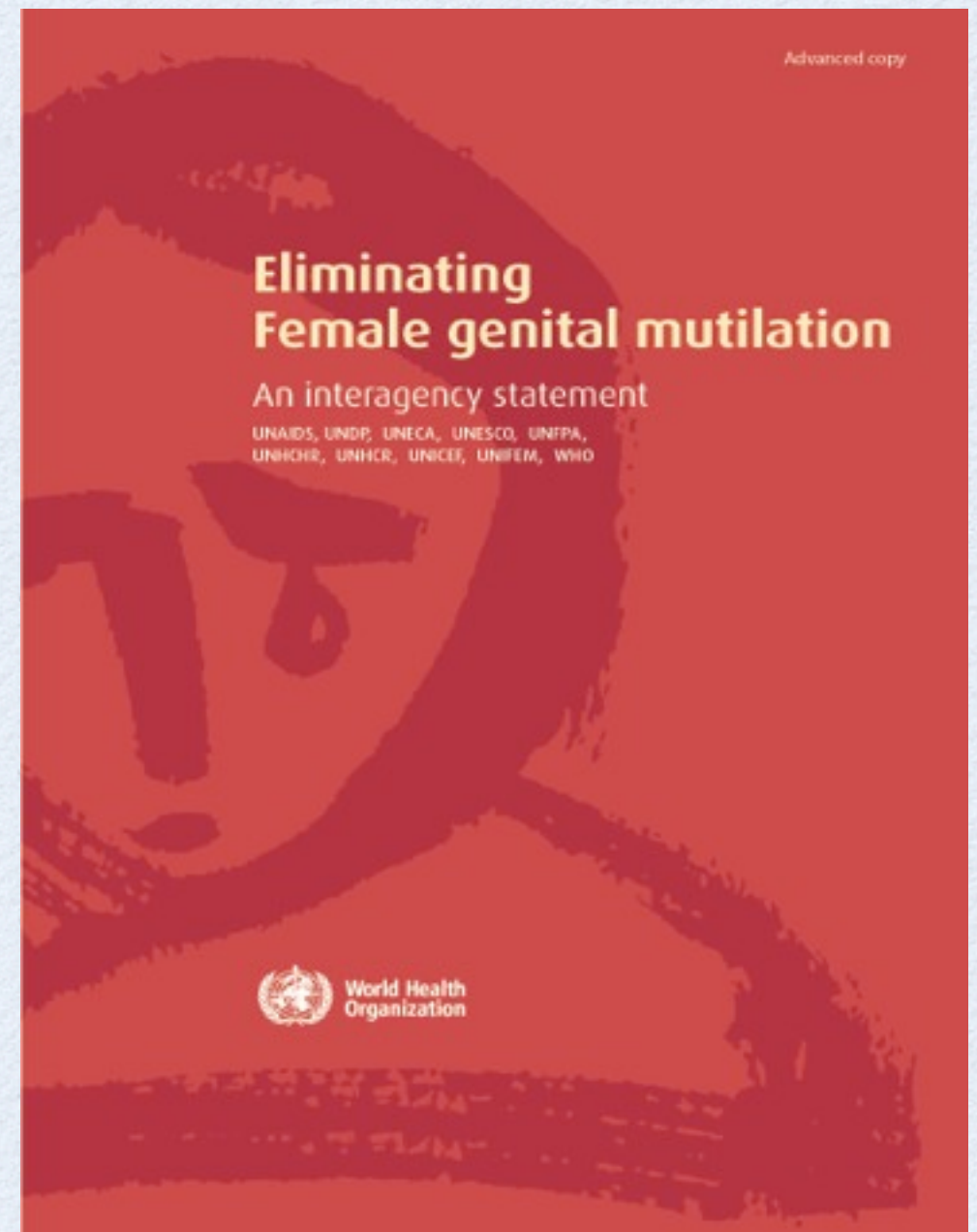
- Universal Declaration of Human Rights, 10 Dec 1948
- International Covenant on Civil and Political Rights (ICCPR), 1948
- International Covenant on Economic, social and cultural rights, (ICESCR), 1966
- International Convention on the elimination of all forms of discrimination against women, 1979
- International convention against torture, other punishments or cruel, inhuman and degrading treatment, 1984
- International Convention on the rights of the Child, 1989
- The Protocol pertaining to women's rights in Africa (Maputo Protocol), 2003
- Council of Europe Convention on preventing and combating violence against women and domestic violence, 2011 (didn't enter into force yet)

FGM - RIGHTS OF CHILDREN

- Article 5 of the Universal Declaration of Human Rights (prohibition of torture or inhuman or degrading treatment);
- Article 2 of the Convention on the Rights of the Child (CRC) (gender equality);
- Article 19(1) of the CRC (prohibition of all forms of mental and physical violence and maltreatment);
- Article 24(1) of the CRC (right to the highest attainable standard of health);
- Article 37(1) of the CRC (States must take effective and appropriate measures to abolish traditional practices prejudicial to the health of children)

FGM - JOINT STATEMENT OF 10 UN AGENCIES

- Co-signed by Executive Heads of 10 United Nations and specialized agencies (WHO, UNAIDS, UNDP, UNECA, UNESCO, UNFPA, UNHCHR, UNHCR, UNICEF, UNIFEM)
- launched at meeting of Commission on the Status of Women, 27 February 2008
- summarizes findings from research on the reasons why the practice continues, highlighting that the practice is a social convention which can only be changed through coordinated collective action by practising communities. It also summarizes recent research on its damaging effects on the health of women, girls and newborn babies.



FGM - UN RESOLUTION

- In December 2012, the United Nations General Assembly adopted a resolution, (A/RES/67/146) to intensify global efforts for the elimination of female genital mutilations
- Its adoption reflects universal agreement that female genital mutilation constitutes a violation of human rights, which all countries of the world should address
- As the recent Unicef report argues, evidence played a major part in driving this resolution through.

FGM- EUROPEAN PARLIAMENT

- Resolution (14 June 2012):
- “Urges the Commission to give specific attention to female genital mutilation as part of an overall strategy for combating violence against women, including joint action against female genital mutilation”.

FGM - LEGAL ISSUES

- The United Nations Special Rapporteur on violence against women clearly maintains that FGM is **comparable to torture**.
- In fact, the measures adopted are not often effective and very few circumcisers or abettors are punished by law.
- These practices are deeply rooted in certain communities. In this context the state authorities are sometimes reluctant or incapable of suppressing them.

FGM - LEGAL ISSUES

- Rugiatu Turay in Sierra Leone, a female genital mutilation (FGM) survivor has set out to ensure that other women and girls do not suffer the same tragic consequences that she has. She has taken a strong stand against those who say that FGM should be permitted for women over 18 years old and emphasizes that FGM is a human rights violation, so it does not matter if you are 12 years or 74 years, it's still a violation.
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FGM-ASYLUM

- Gender Based Asylum
The UN High Commission on Refugees advocates that "women fearing persecution or severe discrimination on the basis of their gender should be considered a member of a social group for the purposes of determining refugee status." (Guidelines on the Protection of Refugee Women) Such persecution may include harms unique to their gender such as, but not limited to, female genital mutilation, forcible abortion, domestic violence that the state refuses to act on and honor killings.
- Regarding asylum, according to the HCR Guidelines on international protection, FGM should be considered as a persecution related to gender as per the Geneva Convention. A woman at risk of undergoing such treatment in her country of origin and not provided with legal protection can apply for asylum in a signatory country of the Convention
- Council of Europe Convention on preventing and combating violence.

FGM - RECENT DEBATES

- UK
- Liberia
- Benin
- Malta

FGM - COLLABORATION

- UN agencies
- Donor agencies
- NGOs

FGM- ELIMINATION: WHAT WORKS?

- Three major challenges:
- First is the limited extent to which interventions have been properly documented and evaluated.
- Secondly, many interventions combine two or more approaches and methods, and there is limited knowledge on the interplay and relative efficacy of the different components of an intervention.
- Thirdly, most interventions do not have the total abandonment of all forms of FGM as the objective, though this is mostly an ultimate goal. Considering what is feasible within the available timeframe and budget, most interventions aim at secondary outcomes.

FGM - APPROACHES TO ELIMINATION

- Health Risk Approaches
- Conversion of Excisers
- Training of Health Professionals as Change Agents
- Alternative Rites Programmes
- Community-Led Approaches
- Public Statements
- Legal Measures

FGM- CHALLENGES IN LEGAL MEASURES

- Studies indicate that legislation and its implementation can have a preventive effect.
- Most African countries with documented FGM have now passed laws against the practice. This provides an official legal platform for action and offers legal protection for women and can discourage excisers and families for fear of prosecution. It can also offer health professionals a legal framework to oppose requests for performing FGM.
- One challenge to the effectiveness of legal measures is that the practice may go underground.
- In several contexts, laws and debates about passing or enforcing legal measures led to resistance and protest.
- A final concern has been that the existence of a law may also scare people with immediate health complications after FGM from seeking health care



FGM- ELIMINATION IN THIS GENERATION!

- If commitment is sustained and programmes strengthened in light of increasing evidence, the data should show that the transformation currently under way has gained momentum, and that millions of girls have been spared the fate of their mothers and grandmothers.

FGM - CALL FOR ACTION NOW!

- <http://www.iac-ciaf.net/>
- <http://www.global-alliance-fgm.org/>
- <http://orchidproject.org/>
- <http://www.desertflowerfoundation.org/en/>
- <http://www.equalitynow.org/>
- <http://www.npwj.org/>
- <http://www.endfgm.eu/en/>

HOW TO GET SUPPORT?

- **UNFPA-UNICEF Joint programme** http://www.unfpa.org/gender/docs/fgmc_kit/DeliveringAsOne.pdf
- **Donors' Working Group** <http://www.fgm-cdonor.org/>
- **The Global Fund for Women** www.globalfundforwomen.org
- **INTACT Association** -<http://www.intact-association.org/en.html>

FGM - RESOURCES

- <http://www.who.int/reproductivehealth/topics/fgm/en/index.html>
- http://www.unicef.org/media/files/UNICEF_FGM_report_July_2013_Hi_res.pdf
- <http://www.unfpa.org/topics/genderissues/fgm>