



## 16 Days of Activism – Day 15

### STOP Female genital mutilation

For well over a decade, Zonta International and Zonta clubs around the world have joined forces with the UN and other agencies to end the practice of female genital mutilation (“FGM”). What is it? FGM comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. The practice is mostly carried out by traditional circumcisers, who often play other central roles in communities, such as attending childbirths. In many settings, health care providers perform FGM due to the erroneous belief that the procedure is safer when medicalized.

FGM is recognized internationally as a violation of the human rights of girls and women. It reflects deep-rooted inequality between the sexes, and constitutes an extreme form of discrimination against women. It is nearly always carried out on minors and is a violation of the rights of children. The practice also violates a person's rights to health, security and physical integrity, the right to be free from torture and cruel, inhuman or degrading treatment, and the right to life when the procedure results in death.

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#### Key facts

- Female genital mutilation (FGM) includes procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons.
- The procedure has no health benefits for girls and women.
- Procedures can cause severe bleeding and problems urinating, and later cysts, infections, as well as complications in childbirth and increased risk of newborn deaths.
- More than 200 million girls and women alive today have been cut in 30 countries in Africa, the Middle East and Asia where FGM is concentrated.
- FGM is mostly carried out on young girls between infancy and age 15.
- FGM is a violation of the human rights of girls and women.

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Long-term consequences can include:

- urinary problems (painful urination, urinary tract infections);
- vaginal problems (discharge, itching, bacterial vaginosis and other infections);
- menstrual problems (painful menstruations, difficulty in passing menstrual blood, etc.);
- scar tissue and keloid;
- sexual problems (pain during intercourse, decreased satisfaction, etc.);
- increased risk of childbirth complications (difficult delivery, excessive bleeding, caesarean section, need to resuscitate the baby, etc.) and newborn deaths;
- need for later surgeries: for example, the FGM procedure that seals or narrows a vaginal opening needs to be cut open later to allow for sexual intercourse and childbirth. Sometimes genital tissue is stitched again several times, including after childbirth, hence the woman goes through repeated opening and closing procedures, further increasing both immediate and long-term risks;
- psychological problems (depression, anxiety, post-traumatic stress disorder, low self-esteem, etc.)

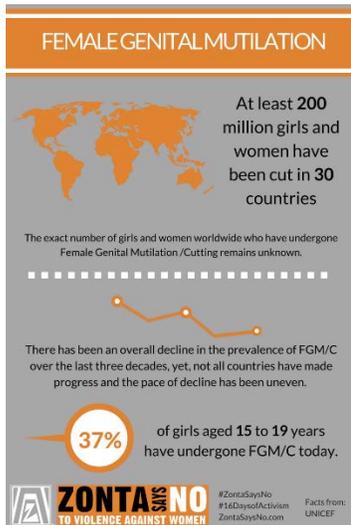
#### Who is at risk?

Procedures are mostly carried out on young girls sometime between infancy and adolescence, and occasionally on adult women. More than 3 million girls are estimated to be at risk for FGM annually. More than 200 million girls and women alive today have been cut in 30 countries in Africa, the Middle East and Asia where FGM is concentrated. However, women and girls in the U.S. are also at risk for FGM. This is not only a “third world country” issue. FGM is a global concern.

## Cultural and social factors

The reasons why female genital mutilations are performed vary from one region to another as well as over time, and include a mix of sociocultural factors within families and communities. The most commonly cited reasons are:

- Where FGM is a social norm, the social pressure to conform to what others do and have been doing, as well as the need to be accepted socially and the fear of being rejected by the community, are strong motivations to perpetuate the practice. In some communities, FGM is almost universally performed and unquestioned.
- FGM is often considered a necessary part of raising a girl, and a way to prepare her for adulthood and marriage.
- FGM is often motivated by beliefs about what is considered acceptable sexual behavior. It aims to ensure premarital virginity and marital fidelity. FGM is in many communities believed to reduce a woman's libido and therefore believed to help her resist extramarital sexual acts.



- FGM is associated with cultural ideals of femininity and modesty, which include the notion that girls are clean and beautiful after removal of body parts that are considered unclean, unfeminine or male.
- Though no religious scripts prescribe the practice, practitioners often believe the practice has religious support.
- Religious leaders take varying positions with regard to FGM: some promote it, some consider it irrelevant to religion, and others contribute to its elimination.

### What are we doing in the U.S.?

FGM has been a crime under federal law since 1996, and is punishable by up to 5 years in prison. In 2013, the Transport for Female Genital Mutilation Act amended this law to outlaw “vacation cutting,” the practice of taking a girl overseas for the procedure. On December 5, the House of Representatives unanimously passed H.R. 3317, Stopping Abusive Female Exploitation (SAFE) Act; legislation introduced by Congressman Dave Trott (R-MI) and Congresswoman Carolyn B. Maloney (D-NY) to increase the federal penalty for female

genital mutilation from 5 years to 15 years in prison and to encourage states to improve reporting requirements for suspected female genital mutilation. Following the bill’s passage, Rep. Maloney released the following statement:

“Female genital mutilation is a heinous, abusive practice that causes immense physical and emotional pain and damage to young girls that lasts a lifetime. While this practice is illegal in the U.S. and we condemn it around the world, we need to do more to stop this practice here at home. The [Centers for Disease Control](#) estimated in 2012 that 500,000 females in the U.S. have been subjected to or are at risk of female genital mutilation. That number is rising. It is up to us to bring that number to zero. This bill creates a harsher and more appropriate penalty, increasing the current sentence of 5 years to 15 years imprisonment. Stricter penalties for performing the procedure are critical to eradicate this horrific abuse. I am proud to have worked with Rep. Trott on this bill and thank him for his leadership on this issue that threatens women and girls in the U.S. and around world. Today’s unanimous vote in favor of this measure sends a clear message that the United States of House of Representatives has zero tolerance for this outrageous abuse of women and girls.”

Despite the clear laws banning FGM, according to a study published in January 2016 by the U.S. Department of Health and Human Services, 513,000 women and girls in the U.S. have undergone or at risk of being subject to FGM. This is 3 times higher than the 1990 data. Unfortunately, there is a lack of information about how to handle FGM in schools and health institutions. However, it is generally agreed, that to be effective, approaches to end FGM must be holistic and must include:

- Enforcement of laws.
- Advocacy in communities affected by FGM.
- Culturally sensitive awareness raising.
- Education and outreach programs.

As with early efforts to eradicate domestic violence, there is a shroud of secrecy protecting FGM. People simply do not talk about the subject. Help break the shroud of silence.... Educate people about FGM.

**SAY NO TO VIOLENCE AGAINST WOMEN AND GIRLS**