

# **FEMALE GENITAL MUTILATION/CUTTING: UNITED STATES GOVERNMENT'S RESPONSE**

## **What is female genital mutilation or cutting (FGM/C)?**

Female genital mutilation/cutting refers to all procedures involving partial or total removal of external portions of or other injury to the female genital organs for non-medical reasons.[1] The reasons given for conducting FGM/C encompass beliefs about health, women's sexuality, and community and adulthood initiation rites. Depending on the degree of the cutting, the practice can lead to a range of physical and mental health problems. The practice is mostly carried out by traditional practitioners, who often play other central roles in communities, such as attending childbirths. However, health care providers now perform more than 18 percent of all FGM/C in countries where it is traditionally practiced,[2] and the trend towards medicalization is increasing.[3]

## **Who is at risk?**

FGM/C is carried out on young girls sometime between infancy and age 15, and occasionally on adult women. Between 100 million and 140 million women and girls are thought to be living with the consequences of FGM/C.[4] While reports suggest that the rate at which FGM/C is practiced is dropping in some areas, as many as 30 million girls under the age of 15 may still be at risk for the procedure. The practice is most common in the western, eastern, and north-eastern regions of Africa, in some countries in Asia and the Middle East, and among migrants from these areas to North America and Europe.[5] Girls and women most at risk of FGM/C in the United States are those born to families that have emigrated from countries where FGM/C is practiced.

## **FGM/C in the United States: Legal, Programmatic, and Policy Responses**

Since 1996, there have been specific federal criminal penalties for performing FGM/C in the United States on any minor younger than 18 years old, including fines or up to five years in prison, or both (118 U.S.C. § 116(a)). In 2013, Congress criminalized the knowing transportation of a girl younger than 18 years old outside of the United States for the purpose of performing FGM/C (so-called "vacation cutting") (118 U.S.C. § 116(d)). The Department of Justice (DOJ) maintains a hotline where people can anonymously report violations or potential violations of the FGM/C statute. Numerous U.S. states have also criminalized the practice. DOJ will develop and disseminate a newsletter to U.S. Attorney's Offices providing guidance regarding investigations and prosecutions using the FGM/C statute.

The United States works through its embassies and consulates in countries where FGM/C is practiced to inform certain travelers and immigrants to the United States of the federal law forbidding the practice. In certain cases, women and girls at risk of FGM/C have been granted asylum or refugee status in the

United States. Department of Homeland Security personnel working with refugee populations receive extensive training on adjudicating gender-related claims, including those involving FGM/C.

The U.S. Department for Health and Human Services' (HHS) Centers for Disease Control and Prevention will produce in 2014 a report estimating the number of girls at risk for or who have already undergone FGM/C in the United States, updating 1997 figures. This report will be based on census data and the prevalence of the practice in the girls' country of origin.

HHS recommends health screening services to newly arrived refugees. Patients can access comprehensive primary and behavioral health care at community centers, and HHS maintains a website with contact information for those seeking additional information, resources or support. Over the past two years, over 100,000 individuals have visited the site to obtain information on FGM/C. Research funded by the HHS National Institutes of Health has helped to inform immigration-focused medicine, highlighting FGM/C for healthcare providers.

Through HHS grants programs, such as the Ethnic Community Self-Help Program and the Family Violence Prevention and Services Program, the United States supports domestic community-based organizations in populations where girls are most at risk for FGM/C. An April 2014 funding announcement for the Ethnic Community Self-Help Program explicitly mentions efforts against FGM/C as an allowable activity under the grant. These community-based programs provide leadership training, education on health and sexual violence, including through promoting sensitive treatment by healthcare providers, and direct services. The work done through these programs is driven by community concerns and interest. Lessons learned are shared with community organizations, educators, and immigrant and refugee service provider organizations.

## **FGM/C Globally: Policy, Programming, and Diplomatic Responses**

The U.S. commitment to ending FGM/C is rooted in efforts to protect and advance the rights of women and girls globally. The U.S. Strategy to Prevent and Respond to Gender-Based Violence Globally, launched in August 2012, specifically recognizes FGM/C as a harmful practice. The United States also supports efforts to end FGM/C in humanitarian settings and among refugees with a range of programming. The United States recently strengthened the reporting on this issue in its Annual Country Reports on Human Rights Practices, which now include information on whether FGM/C is prevalent, the type and category of genital cutting most common, as well as international and governmental efforts being taken to address the practice.

The United States is working to foster constructive legal and policy frameworks by supporting host country legislation against the practice of FGM/C; participating in the FGM Donors Working Group to discuss donor coordination and best practices to eliminate FGM/C; and engaging civil society through

social media and public outreach to spotlight the work being done to educate and invest in girls, a key to preventing FGM/C.

Through the Department of State and the U.S. Agency for International Development (USAID), the United States supports community-based programming to raise awareness on the harmful effects of FGM/C in regions where the practice is prevalent. This approach includes supporting the Nairobi Center of Excellence, which seeks to improve health care for girls and women suffering negative consequences from FGM/C and to promote broader education and dissemination of information on the harmful effects of FGM/C. The State Department and USAID are launching a new program dedicated to addressing this issue in Guinea, partnering with the Government of Guinea and with multilateral and civil society actors to work to eliminate the practice in Guinea's eight districts – impacting up to 65,000 girls through community awareness and capacity- building efforts. From 2011-2013, the State Department supported the development of seven FGM/C free villages in Kurdistan, through grassroots development and increased awareness regarding the health and economic consequences of FGM/C. A new Gender-based Violence Emergency Response and Protection Initiative is dedicated to assisting survivors of extreme forms of gender-based violence.

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[1] Eliminating Female Genital Mutilation, An Interagency Statement: WHO, 2008.

[2] **Ending Female Genital Mutilation/Cutting: Lessons From a Decade of Progress**: *Population Reference Bureau, 2014.*

[3] Global Strategy to Stop Healthcare Providers from Performing FGM: WHO, 2010.

[4] WHO, 2008.

[5] WHO, 2008.