

Female Genital Mutilation (FGM) FAQs

WHAT IS FEMALE GENITAL MUTILATION?

Female genital mutilation (FGM) is any procedure involving the partial or total removal of the external female genitalia or other injury to the female genital organs and is often performed on girls between the ages of 4 and 14 to ensure their virginity until marriage.

IS FEMALE GENITAL MUTILATION HARMFUL?

Yes. The World Health Organization (WHO) reports that FGM has no health benefits and can cause a number of health problems. Immediately following the procedure, girls are at risk for severe pain, shock, bleeding, bacterial infection, and injury to nearby tissue. In the long term, girls and women who have suffered this procedure are at risk for recurrent bladder and urinary tract infections, cysts, infertility, and complications during childbirth. In some cases, FGM can be lethal.

IS FEMALE GENITAL MUTILATION PRACTICED IN THE UNITED STATES?

Yes. Because this is a private ritual that occurs within the secrecy of the family, there is no

way of knowing exactly how prevalent FGM is in the U.S. Research conducted by the Centers for Disease Control and Prevention found that approximately 513,000 women and girls in the U.S. have either suffered the procedure or are at risk of FGM, a number that approximately doubled between 2000 and 2014.

IS FGM BECOMING MORE PREVALENT IN THE UNITED STATES?

Yes. The estimated number of girls at risk of FGM in the U.S. has quadrupled since 1997. Immigration to the U.S. from African, Middle Eastern, and South Asian countries - where the practice of FGM is most deeply entrenched - is responsible for the rise in numbers.

WHAT IS THE FEDERAL LEGISLATION REGARDING FGM?

FGM was criminalized on the federal level in 1996 and made punishable by up to five years in prison. In January 2013, the federal FGM law was amended by the Transport for Female Genital Mutilation Act, which prohibits knowingly transporting a girl out of the country for the purpose of undergoing FGM. The act was designed to address the

problem of "vacation cutting," or taking girls to a location where FGM is legal or not penalized. Under the federal law, anyone found guilty of doing so may be sentenced to up to five years in prison.

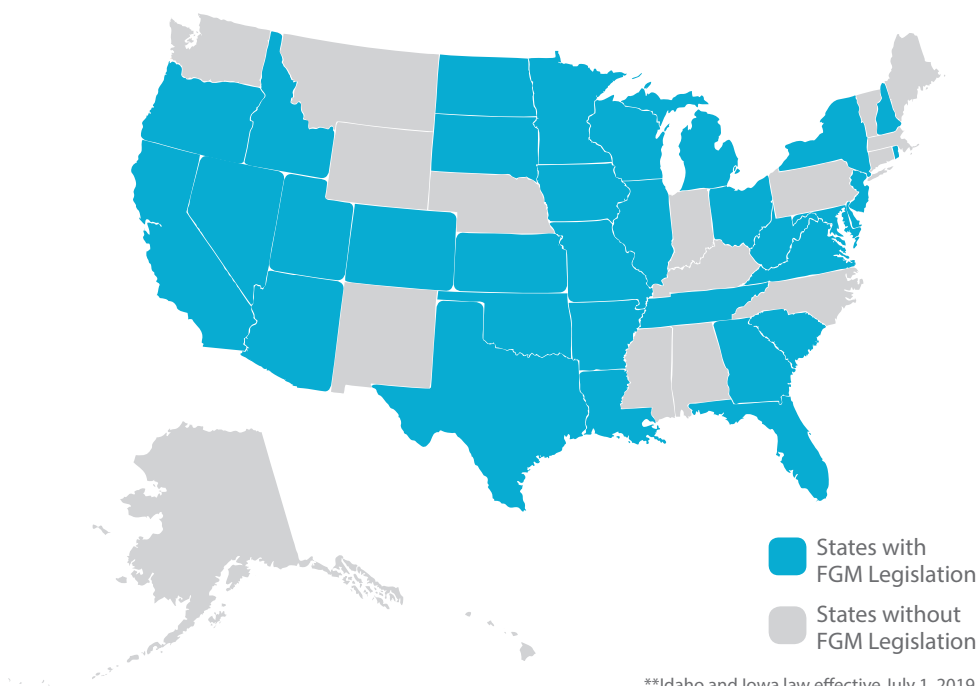
It was not until 2017, in *United States v. Nagarwala*, that federal prosecutors brought charges against a medical practitioner for performing FGM on young girls. The district court judge presiding over the case ruled that the federal FGM ban was unconstitutional and key charges against the defendants were subsequently dropped. The fate of the law remains unclear. In April 2019, the Department of Justice decided not to appeal this latest ruling and indicated that they agree with the judge's ultimate determination regarding the law's constitutionality. Currently, however, congressional leaders can still take action to affirm the legitimacy and constitutionality of the federal FGM ban.

WHY DO WE NEED SPECIFIC STATE LEGISLATION ADDRESSING FGM? WHY WOULD THIS NOT FALL UNDER ASSAULT OR ABUSE?

Legislation banning FGM sends a strong message that this abuse is not tolerated in the U.S. Specific state legislation combating FGM is necessary to give prosecutors the tools they need to bring perpetrators to justice. Also, we know anecdotally that families on the fence about whether or not to cut their daughters, but who may be facing pressure from family or communities, have used the existence of legislation as an excuse for why they will not go ahead with the procedure.

The recent case in Livonia, Michigan, *United States v. Nagarwala*, highlights the need for state-specific legislation as the girls involved in the case were brought from Minnesota, where a practitioner can get life in prison for cutting girls, to Michigan, where there was no state legislation outlawing the practice at that time. Michigan has since put in place comprehensive legislation banning FGM.

Further, many state assault statutes specify intent to harm and/or serious bodily injury to be guilty of the statute. Parents' intent in cutting their girls is not to harm them, so



proving intent to harm is problematic. In terms of bodily injury, in a minority of cases, there may be no lasting visible scars from the procedure. Even in cases which may be less severe physically, lifelong psychological consequences may still result.

HOW MANY STATES HAVE SPECIFIC FGM LEGISLATION?

Currently, only 33 states in the U.S. specifically ban FGM. The remaining 17 do not have measures in place to prosecute, and prevent, FGM from taking place within their borders.

WHAT IS VACATION CUTTING? WHY DO WE NEED SPECIFIC LANGUAGE IN OUR LEGISLATION TO ADDRESS THIS?

"Vacation cutting" is when girls are taken away from their homes to their parents' country of origin (typically during school breaks) to undergo the FGM procedure. State legislation needs to specifically address vacation cutting because if not, it serves as a loophole for parents, grandparents, or guardians to take girls to another location for FGM. This loophole must be closed to protect the thousands of girls at risk of FGM in the U.S.

WHICH STATES HAVE THE MOST WOMEN AT RISK OF FGM?

States with more than 25,000+ women and girls at risk include: California, Maryland, Minnesota, New Jersey, New York, Texas, Virginia, and Washington. States with between 10,000-24,999 women and girls at risk include: Florida, Georgia, Illinois, Massachusetts, Michigan, Ohio, and Pennsylvania.

WHY ARE SOME CULTURES PERFORMING FGM? WHY SHOULD CULTURAL TRADITIONS NOT BE A VALID DEFENSE FOR FEMALE GENITAL MUTILATION?

In some cultures, FGM is used to initiate girls into adulthood and to ensure their marriageability. It is a way to control the sexuality of women and an attempt to prevent sex before marriage. Other reasons include: promotion from local structures of power including religious or community leaders, strengthening of cultural ideals of femininity through removal of body parts considered "unclean," serving as a confirmation of virginity at the time of marriage, and

[17]
THE NUMBER OF
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encourages conformity to social convention. Culture, ritual, tradition, and custom cannot serve as a defensible reason for FGM because it is a human rights abuse. The rights of young girls should always be protected and not left to tradition.

DOES FGM LEGISLATION INFRINGE ON RELIGIOUS FREEDOM?

No. No major religion requires FGM as part of the faith. Further, FGM legislation does not infringe on religious freedom; it protects the human rights of girls. No religion should be used as a justification for abusing human rights, especially for minors. FGM violates women's and children's human rights, including their right to health, to be free from violence, to life and physical integrity, to non-discrimination, and to be free from cruel, inhumane, and degrading treatment.

WHY BAN FEMALE GENITAL MUTILATION IF MALE CIRCUMCISION IS LEGAL?

FGM has no benefits and can cause lifelong health and psychological consequences. Immediately following the procedure, girls are at risk for severe pain, shock, bleeding, bacterial infection, and injury to nearby tissue. In the long term, girls and women who have suffered this procedure are at risk for recurrent bladder and urinary tract infections, cysts, infertility, and complications during childbirth. In some cases, FGM can be lethal. In addition to physical consequences from FGM, there are also psychological and social consequences. These same consequences are not seen in male circumcision.

Additionally, FGM is most often a tool to control female sexuality. This is not the case

for male circumcision. FGM is recognized globally as a human rights violation that according to the WHO "reflects deep-rooted inequality between the sexes, and constitutes an extreme form of discrimination against women."

DOES FGM LEGISLATION IMPACT THOSE SEEKING TRANSGENDER REASSIGNMENT?

No, FGM legislation does not affect those seeking transgender reassignment. Transgender reassignment is often considered medically necessary for those diagnosed as suffering from gender dysphoria. FGM legislation includes a provision that allows for surgeries performed by licensed medical practitioners that are necessary to the health of the person on who it is performed. Transgender reassignment will likely fall into this category.

SHOULD A MINOR BE ABLE TO CONSENT TO FGM?

Minors should not be able to consent to FGM because of the high possibility that they are being forced into undergoing the practice. If a minor truly wishes to have her genitals cut, mandating she wait until she is at least 18 years old does not deny her the right to do so, it merely delays the procedure.



The approximate
**NUMBER OF WOMEN AND GIRLS
IN THE U.S. THAT HAVE EITHER
SUFFERED THE PROCEDURE
OR ARE AT RISK OF FGM,**
according to the Centers for Disease
Control and Prevention,
a number that approximately
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BETWEEN 2000 AND 2014.

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