

## STATE DATA

Based on 2015-2019 American Community  
Survey population estimates.

# 37,453

### STUDY POPULATION:

Women and girls  
with ancestral ties to  
countries where FGM/C  
is practiced

# 9,311

Women and girls who  
were likely **LIVING  
WITH** FGM/C

# 580

Girls who were likely  
**AT RISK** of FGM/C

## STATE LEGISLATION AND POLICY LANDSCAPE

### STATUS

Deficient **Existing Legislation**<sup>1</sup>,  
Needs Strengthening

### IMPROVE BY ADDING

Education and Outreach;  
Comprehensive Expanded  
Definition of FGM/C;  
Prohibition of Transporting for  
FGM/C; Civil Cause of Action;  
Extended Civil Statute of  
Limitations; Specification that  
Culture, Ritual, Religion are  
Not Defenses to Prosecution;  
Annual Statistical Reporting;  
Mandatory Training for Law  
Enforcement; Mandatory  
Revocation of Medical License

<sup>1</sup> <https://bit.ly/3sjgQ3R>

## SUMMARY

FGM/C prevalence was estimated at 26.4% within the study population in Illinois with over 60% of the impacted population in the state identifying as Egyptian (30.7%), Nigerian (24%) or Ethiopian (10.6%).

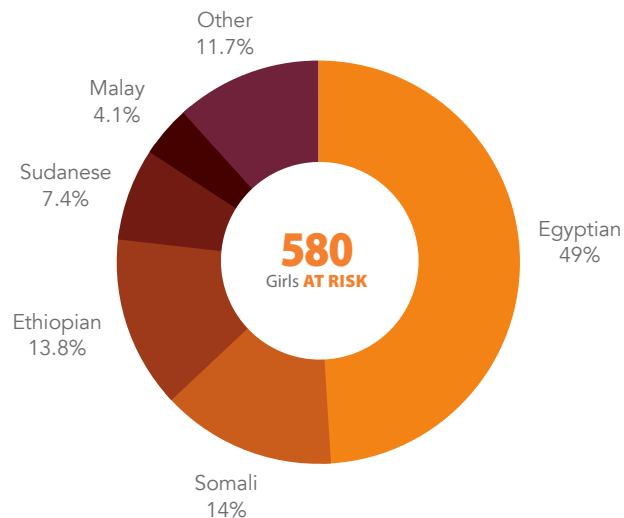
It is estimated that **1,039** women were living with Type 3 FGM/C in Illinois. While all survivors may require some level of medical and mental health support, those living with Type 3 would likely require additional medical attention.

Most of those impacted by FGM/C in Illinois live in the greater Chicago-Naperville-Elgin and St. Louis metropolitan areas.

An estimated 390 women and girls from the **Dawoodi Bohra** community live in Illinois and are not included in the population extrapolation calculation.

## ETHNIC BREAKDOWN

Ethnic breakdown of girls most likely  
to be **AT RISK** of FGM/C in Illinois



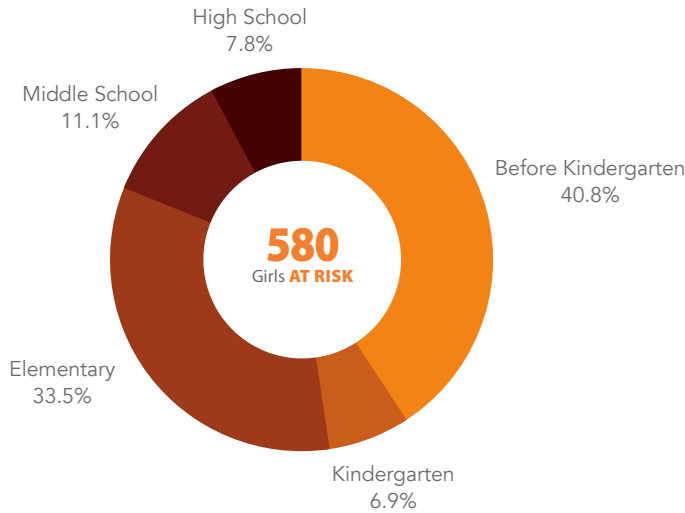
NOTE: Nigerian girls are likely underrepresented in this data since they are cut at a very young age, resulting in most girls being encoded as already living with FGM/C.

## STATE PREVALENCE RANKING



## AGE DISTRIBUTION

Distribution of girls most likely to be **AT RISK** of FGM/C in Illinois



## SPATIAL DISTRIBUTION

Counties with the highest **STUDY POPULATION** | **LIVING WITH** | **AT RISK** population

Cook	24,060	5,960	380
DuPage	3,078	1,120	33
Will	2,730	637	58
Kane	1,118	299	9
Champaign	734	227	11
Lake	720	224	3
Winnebago	563	104	26
Macon	148	77	-
McLean	268	74	1
Peoria	184	59	6

Metropolitan Areas with the highest **STUDY POPULATION** | **LIVING WITH** | **AT RISK** population

Chicago-Naperville-Elgin, IL-IN-WI	33,054	8,574	492
St. Louis, MO-IL	6,943	1,295	218
Champaign-Urbana, IL	734	227	11
Rockford, IL	602	118	27
Decatur, IL	148	77	-
Bloomington, IL	268	74	1
Springfield, IL	328	46	-
Kankakee, IL	256	40	-

## CALL TO ACTION

Interventions tailored to the specifics of the context.

State legislators should prioritize strengthening existing legislation.

Prevention and response interventions should focus on the greater Chicago-Naperville-Elgin and St. Louis metropolitan areas.

Child Protection should focus on **Egyptian** girls between the ages of 6 and 14; **Sudanese** and **Somali** girls between the ages of 5 and 15; and **Ethiopian** girls throughout their childhood and adolescence.

All estimates are subject to both sampling and nonsampling error.

For more granular prevalence data contact [info@theahafoundation.org](mailto:info@theahafoundation.org)

scan to access the full report

