

Female Genital Mutilation: why should we still tackle it in 2023?

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Abstract. February 6th is the International Day of Zero Tolerance for Female Genital Mutilation (FGM), this date represents the importance of tackling the practice of female genital mutilation all over the world, aiming to reduce it as much and in as many countries as possible. However, even though this date has its significance for the international community, the number of cases of female genital mutilation in certain areas of the globe are still considerably high. Taking this into account, this article seeks to highlight the gravity of tackling the practices of female genital mutilation (FGM) in the year of 2023, analysing how different actors from the international community - such as, sovereign States, regional and international organisations - found their own ways to reduce FGM and to advocate for the health and for the human rights of girls and women from various backgrounds. Therefore, this study will consist in a literature review, that will serve us as a guide to critically analyse the problematic behind the practices of FGM, leading us to comprehension of its complexity, who facilitates its implementation and its consequences. for girls and women all over the world.

Keywords. Female Genital Mutilation, gender rights, reproductive health, End FGM

1. Introduction

This article seeks to highlight the importance of having various ways to fight against the practice of Female Genital Mutilation (FGM) in 2023. In a press release, the Secretary-General of the United Nations (UN) António Guterres stated that around **4.2 million girls are at risk for FGM only in this year**, this number would be added up to the 200 million girls and women alive who have already undergone through this practice. This total amount of women and girls that have experienced FGM reflects its negative connotation, in which the act of female genital mutilation is recognized worldwide as a violation of girls and women's human rights.

Taking this international recognition about the practice of FGM into account, António Guterres also stated his concerns about the necessity of the uprising of a "surge" - this "surge" would consist in a group of different actors that would act as allies to tackle this type of practice. Throughout this paper, we will have the chance to analyse how certain regional and international organisations have found different ways to deal with the cases of FGM and

how they also have found different manners to prevent it to happening with other girls and women in such scale ever again.

In order to be able to tackle FGM in 2023, specially if we want to proceed this approach by using ways that were based on the lessons learned over the past years, it is necessary to comprehend what in fact is Female Genital Mutilation (FGM), its historical background, what forms this kind of procedure can happen and what it represents. Therefore, throughout this paper, it will be displayed all the necessary information before aiming at the reason behind we should still tackle FGM in 2023.

2. Understanding FGM: Female Genital Mutilation

2.1 What is FGM?

On this section, our attention will be focused into analysing the importance of FGM's origins, so we can comprehend its effects on nowadays's international society and how urgent it is for all of us to fight this

kind of procedure, specially in countries that already count with a certain “tradition” to this sort of practice. According to the World Health Organisation (WHO), Female Genital Mutilation (FGM) refers to all procedures that might involve injuries to the female genital organs, or the partial or in extreme cases the full removal of the female external genitalia for non-medical motives. It is essential to accentuate that FGM is not advocated by any religion nor it brings any benefits to one’s health. But where did FGM come from?

FGM’s historical background is not well known, but according to scholars the practice of the first procedures dates back 2000 years - at minimum. As a result, scholars are not certain about when nor where the tradition of female genital mutilation surged from (LLAMAS, 2017, p.2). For some, FGM was practised in Ancient Egypt (nowadays Sudan and Egypt) under the form of distinction between the aristocracy - as in a way to distinguish them from the rest of society due to their social status/social hierarchy. Others believe that FGM started during the slave trade, more specifically when black women slaves were forced into ancient Arab societies.

In addition to that, another part of academia believe that FGM began with the arrival of Islam in some parts of sub-Saharan Africa. Meanwhile, others point out that practice developed independently among some specific ethnic groups in sub-Saharan Africa as part of **puberty rites**. It is necessary to highlight that scholars don’t immediately associate the origins of FGM to the African continent, there are some of those scholars that highlighted that Ancient Romans used to perform a technique that involved slipping of rings through the labia majora of female slaves to prevent them from becoming pregnant whilst the Scoptsi sect in Russia used to perform FGM to ensure that the virginity of women would remain intact (FGM National Clinical Group, 2015).

In modern days, Female Genital Mutilation (FGM) is known for being an **universal problem**, that is primarily concentrated in 30 countries across Africa and the Middle East. There are some incidences of such practices in some countries of Latin America and Asia, although it seems to be carried out by immigrant populations that have dislocated to Western Europe, North America, Australia and New Zealand. FGM has already been implemented in 200 million women worldwide and current rates estimate that in addition to this number, 68 million girls will face being cut by the year of 2030 (WHO, 2023).

2.2 What does FGM represents?

As we were able to see in the previous section, throughout history, it was believed that FGM would ensure **girls and women’s virginity and reduction in the female desire**. The practice of FGM is supported by traditional beliefs, values and attitudes. For example, in some communities, such

as in Kenya and in Sierra Leone, FGM it is viewed as a rite of passage to womanhood.

In other cases, for example in Sudan, Egypt and in Somalia, FGM is valued as a way to preserve a girl’s virginity until marriage. In these cases, FGM is seen as a pre-requisite to marriage, and marriage in those sovereign States is believed to be “essential” to woman’s social and economic survival in such countries - for example, it is believed by some African women that if their daughters are not circumcised, they would not get husband.

This perspective about FGM upholds a harmful tradition that has been passed along based on taboos and on non-medical benefits. We were able to see that FGM is deeply rooted in culture and for some it can be done for religious reason, but as it has been mentioned before, **FGM does not belong nor it can be linked to a particular ethnicity or religion** - for example, FGM cannot be found on religious texts, such as the Bible, nor in the Quran, not even inside the Sunnah (FGM National Clinical Group, 2015).

The practices of FGM are so deeply rooted that they can still be seen in the 21th century inside some communities and under various form. For example, some cases have been seen in the United Kingdom and in the United States, as gynaecologists practiced such procedure to cure women of their so-called “female weakness” (FGM National Clinical Group, 2015).

Due to the incidence of such harmful tradition in many countries all over the world, the practice of FGM is internationally recognized as **a violation of girls and women’s human rights**. It is understood to reflect the systematic and deeply rooted views of inequality between the sexes, therefore constituting an absurd form of discrimination and violence against girls and women all over the globe (WHO, 2023). It is important for us to highlight that FGM is majoritally implemented by practitioners with **traditional views** on minors - which also makes FGM a violation of children rights (WHO, 2023). Indeed, the practice of FGM is also known for violating a person’s rights to health, security, physical integrity, the right to be free from torture and right to life - taking into account that this procedure has led to death in many cases (WHO, 2023). Therefore it is necessary for the international community to stand against this practice and implement various types of conducts to tackle it.

2.3 What are the different types of FGM?

As it was mentioned before, Female Genital Mutilation (FGM) includes all procedures involving the removal of the external female genitalia, or, other injury to the female genital organs for non-medical reasons (End FGM European Network, 2020). However, there are four classifications that FGM can be categorised into: clitoridectomy, excision, infibulation or pharaonic type and all other

procedures done to the genitalia of women for non-medical purposes (WHO, 2023).

Type I, also known as clitoridectomy, consists of the partial or even total removal of the external part of the clitoris and/or its prepuce - also known as the clitoral hood.

Type II, named excision, where there is total or partial removal of the clitoral glans and labia minora, with or without removal of labia majora.

Type III, also known as infibulation or the pharaonic type, which is the narrowing of the vaginal opening through the creation of a covering seal, formed by cutting and repositioning the labia minora, or labia majora, sometimes using stitching, with or without the removal of the clitoral prepuce/clitoral hoods and glans.

Type IV, which consists in all the procedures to the female genitalia for non-medical purposes. Some examples are pricking, piercing, incising, scraping and cauterizing the genital area.

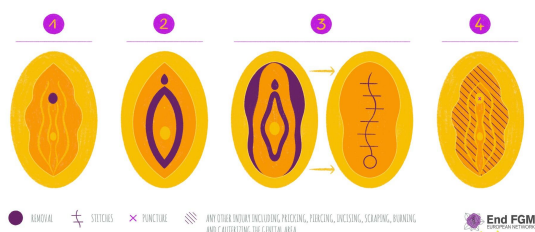


Fig. 1 - Types of female genital mutilation based on the World Health Organisation (WHO)'s category (source: End FGM EU, 2020).

It is important to highlight the most recent estimates. According to the World Health Organization (WHO), that roughly 90% of cases of FGM include clitoridectomy (Type I) or cases where girls and women's genitals have been "nicked" however no flesh has been removed (Type IV), and the other 10% are infibulations (Type III).

Besides the importance of understanding the estimates behind the implementation of FGM as a procedure, it is also crucial to highlight the **incorrectness of referring to FGM as "female circumcision"**, since it implies that the procedure is analogous to the male circumcision, when in a matter of fact, the Female Genital Mutilation is much more extensive than the male circumcision, and it involves a far extensive amount of tissue being removed, it completely alters the female genitalia and can compromise the sexual organs of girls and women for the rest of their lives.

3. Why tackle FGM?

3.1 It detriment girls and women's physical health:

It has been already concluded that FGM has no health benefits, as it only harms girls and women in

various ways. Taking into account that FGM removes and damages the healthy genital tissue of girls and women all over the world therefore interfering with the natural functionality of girls' and women's organisms and bodies (WHO, 2023). As we have seen before, although all varieties of FGM are linked with increased risk of girls and women developing health complications, there are some forms of FGM that has higher and greater risks - such as: **Type I, Type III and Type IV.**

The **immediate** complications of Female Genital Mutilation (FGM) are: severe pain, excessive bleeding (also known as haemorrhage), swelling of the genital tissue, fever, contraction of infections -for example, tetanus), urinary tract issues, cicatrization complications, injuries surrounding the genital tissue, shock and even death.

Meanwhile, the **long-term** complications of FGM are: urinary tract problems (for example, painful urination, urinary tract infections), vaginal issues (such as: excessive discharge, itching, bacterial vaginosis and other modalities of infections), menstrual problems (for example, painful periods), sexual complications (pain during intercourse, decreased satisfaction), significative increase of the risk of childbirth complications (for example, difficulty into delivering the baby, hemorrhage, necessity of performing a C-section, the need of performing extraordinary measures to resuscitate the baby, the delivery of born-still babies).

It is also categorised as long-term complications of FGM, the need for later surgeries (such as, the sealing or narrowing of the vaginal opening due to the performance of Type III FGM) and development of psychological issues (for example, depression, anxiety, post-traumatic stress disorder -PTSD - and low self-esteem).

It is necessary to highlight that FGM is mostly carried out on young girls between infancy and adolescence, and occasionally on adult women. According to available data from 30 countries where FGM is practiced in the western, eastern, and north-eastern regions of Africa, and some countries in the Middle East and Asia, more than 200 million girls and women alive today have been subjected to the practice with more than 3 million girls estimated to be at risk of FGM annually. FGM is therefore of **global concern.**

3.2 It raises the cost of health systems

According to a study made by the researchers of World Health Organisation (WHO, 2022), the healthcare costs for FGM are predicted to practically double an annual of **US\$ 2.1 billion** by the end of 2047 if this kind of practice is not completely discarded. The abandonment of Female Genital Mutilation by 2030 it is included on the Sustainable Development Goals throughout the target 5.3, however its elimination can take its own toll if it is

analysed via a financial perspective - specially if the focus lies on the costs associated with obstetric and gynaecological assistance. Therefore, the practice of Female Genital Mutilation (FGM) is viewed as a financial and economical burden.

4. Where is FGM more evident?

In this section, we will be focusing on data provided by major organizations like UNICEF, World Bank and World Health Organization (WHO) regarding FGM and where this practice is more evident.

According to the WHO, FGM is most commonly practiced in 30 countries in Africa, the Middle East and Asia. We must also notice that the practice has been registered in immigrant communities in Europe, Australia and North America, so this is not an issue only to be seen in African countries, which configures FGM as a **global concern**, demanding **global action** to end it.

The biggest prevalence of the practice is still found in countries like Egypt, Mali, Djibouti, Guinea and Somalia, where the numbers of FGM prevalence are beyond 85% for all of these countries. Somalia is the country in the world where FGM is more evident where **at least 99.2% of women have undergone FGM**. (See figure 3)

According the chart provided by The World Bank, Guinea is the second country on the list, with almost 94.5% of FGM prevalence, closely followed by Djibouti with 94.4%, Mali is the third one with 88.6% of FGM prevalence. (See figure 4).

The chart demonstrates the prevalence of FGM in African countries as a cultural or even a religious practice, emphasizing the need of a global action to put an end to it. This is also growing feeling between the women and girls of these high-prevalence countries, UNICEF has provided a new analysis which concluded that in the last two decades the number of women in high-prevalence countries who want the practice to stop has doubled, mainly because of the **rising number of adolescent girls opposing the practice**.

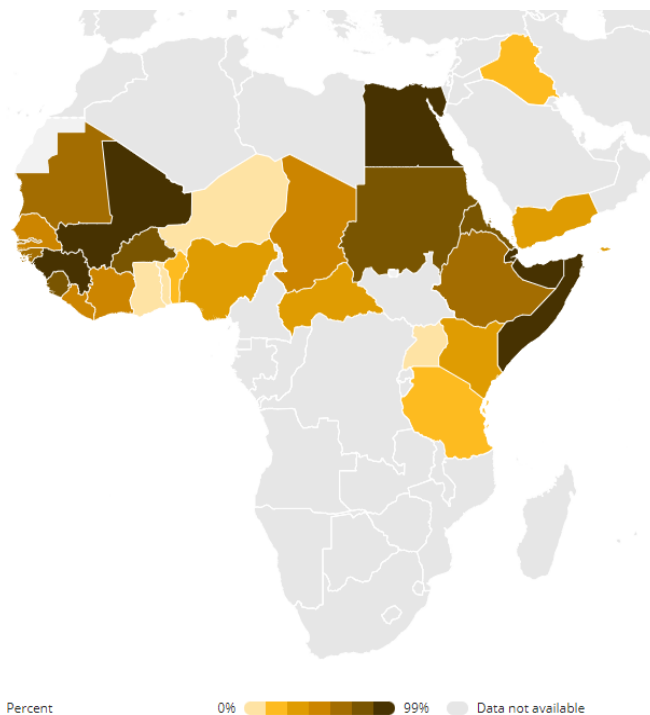


Fig. 3 Map of Africa showing the countries where FGM is more evident supplied by The World Bank, regarding the percentage of women aged 15–49 who have gone through partial or total removal of the female external genitalia or other injury to the female genital organs for cultural or other non-therapeutic reasons.

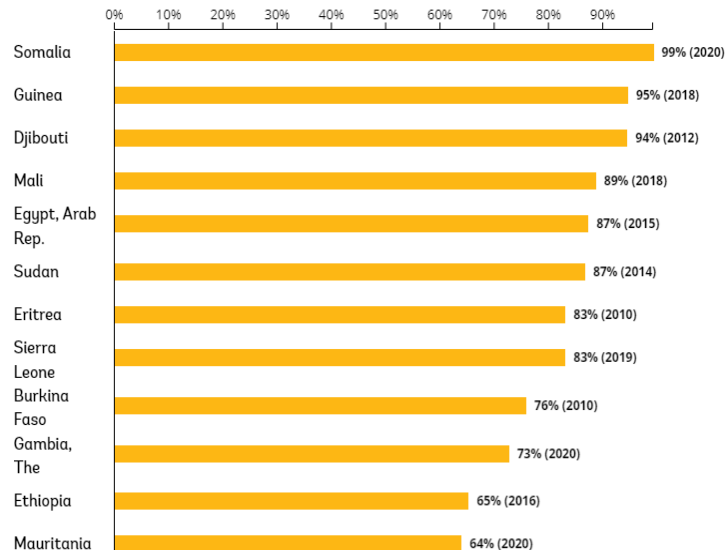


Fig. 4 - Female Genital Mutilation Prevalence on Africa chart provided by The World Bank

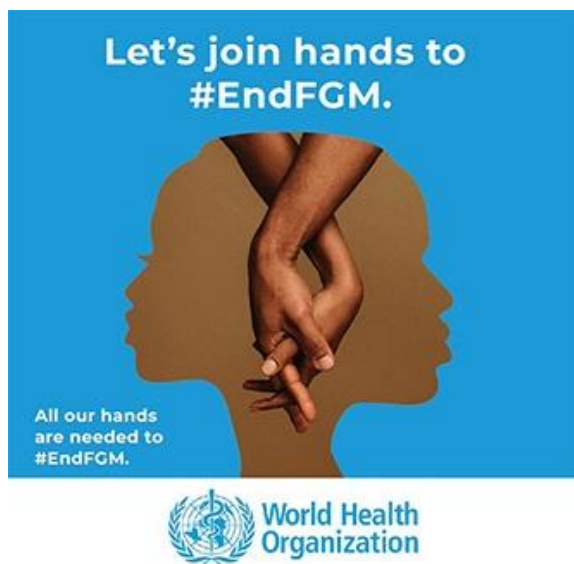


Fig. 2 - Official flyer of the International Day of Zero Tolerance for Female Genital Mutilation offered by the WHO (source: WHO, 2023).

5. How to tackle FGM?

5.1 Lessons from World Health Organization (WHO):

On the year of 2008, the World Health Assembly - an agency linked to the WHO - approved the resolution WHA61.16, that defends **the elimination of Female Genital Mutilation (FGM)** and it highlights the necessity for co-jointed action of all areas -such as health, education, finance, and many others - to assure the eradication of FGM. It was throughout this form that it became clear the WHO's approach to eliminate FGM: **a global strategy**. The reason behind this global strategy is that the WHO understands FGM as a global concern that can affect and detriment the health of every single girl and woman on the planet, therefore it is necessary to take action in such scale.

For example, the WHO creates guidance and resources mechanisms for workers in health systems, so they can prevent FGM from happening and/or managing the cases of complications that they might face. Also, it is important to highlight that the WHO supports and assists countries to implement and adapt to their national and local resources, taking into consideration their particular contexts.

5.2 Lesson from African Union (AU):

On the year of 2019, the African Union (AU) launched a **continental initiative** to end FGM and to save over 50 million girls that were at risk. Tackling Female Genital Mutilation (FGM) in Africa consists of an important task, considering that if FGM is not eliminated by 2030, just in the African continent alone over 50 million girls under the age of 15 are at risk of being the next victim of FGM. This estimate

harms Africa's Transformative Agenda 2063, which has its core aligned with the investment of African girls and women. It is important to highlight that this continental initiative - also known as the Saleema Initiative - was designed **to stimulate political action to accelerate the eradication of FGM on Africa**, counting with the support of Burkina Faso, African Union Champion on Eliminating Female Genital Mutilation, Egypt, Ethiopia, Zambia, Sudan, the UN High Commissioner for Human Rights and the Director of UN's Population Regional Fund for West and Central Africa.



Fig. 5 - Official flyer of the Saleema Initiative offered by the African Union (source: AU, 2019).

5.3 Lesson from European Union (EU):

The European Union (EU) has been an active participant in the international efforts that stimulate the elimination of FGM, specially via dialogues with partner countries, regional, civil society and human rights organisations. For instance, in order to support political and advocacy movements regarding the elimination of FGM, the EU **finances** a series of projects throughout the globe to contribute to the eradication of Female Genital Mutilation (FGM).

It is also important to cite that the EU has other internal and external modalities of action to tackle FGM. For example, it raises awareness, it advocates for stronger and better legal protection to the victims, it also seeks to improve the access to support the victims, and many others. The European Union (EU) has a strong **normative mechanism**, so all its actions towards the elimination of FGM were based on the "EU Action Plan on Human Rights and Democracy for 2020-2024" and the "Gender Action Plan III for 2021-2025" launched by the European Commission.

6. Conclusion:

Throughout this paper it has been discussed the depth and issue behind Female Genital Mutilation (FGM) in modern international society. Over 200 million girls and women already have been victims of such traditional yet harmful procedures, and if no actions are not taken into place with urgency,

another 4.2 million girls and women just in the year of 2023 could join this (unfortunately) well established statistics. Due to this possibility, António Guterres, the Secretary-General of the United Nations (UN), made an extremely sensitive plea to the international society to fight and tackle Female Genital Mutilation (FGM), specially in this year of 2023.

It is necessary to reinforce that Female Genital Mutilation (FGM) is an universal problem and a violation of girls' and women's human and health rights. Therefore, its reduction and its eventual eradication should also be seen as an urgent global goal. Taking that into consideration, this article presents some lessons of "how to tackle FGM" from different regional and international organisations over the past few years - every single one of them has their own personal touch but they all aim the same goal: fully eliminate FGM.

7. Acknowledgments:

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8. References:

- [1] Llamas J. *Female Circumcision: The History, the Current Prevalence and the Approach to a Patient*. University of Pennsylvania, 2017; 8.
- [2] UNICEF. *What is Female Genital Mutilation? Everything you need to know about FGM and what UNICEF is doing to stop it*. UNICEF, New York.
- [3] The World Bank. *Female Genital Mutilation Prevalance*. The World Bank; 2020.
- [4] Helen W. *Approximately 1 in 4 survivors of female genital mutilation were cut by a health care provider*. UNICEF, New York; 2020.
- [5] FGM National Clinical Group.. *FGM Information: Historical & Cultural*. United Kingdom; 2007-2015.
- [6] End FGM EU. *Female Genital Mutilation: What is FGM?*. The End FGM European Network; 2009-2020.
- [7] World Health Organisation. *Female Genital Mutilation*. Folder; WHO, 2023.
- [8] The African Union. *The African Union Launches a Continental Initiative to End Female Genital Mutilation and Save 50 million Girls at Risk*. Press Release; AU, 2019.
- [9] European Commission. *Questions and Answers about Female Genital Mutilation (FGM)*. EC Europa, Brussels; 2021.