

FORWARD

Safeguarding rights & dignity

**Female Genital Mutilation:
Frequently Asked Questions:
A Campaigner's Guide for Young People**



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FORWARD (Foundation for Women's Health, Research and Development) is an African Diaspora Women led campaign and support charity dedicated to advancing and safeguarding the health and rights of African girls and women. FORWARD was founded in 1985 and operates mainly in the UK and Africa. We focus on tackling female genital mutilation (FGM) and child marriage. We have a vision where women and girls live in dignity, are healthy, have choices and equal opportunities. Our programmes include campaign and policy work, public education and training, advice information and research, and community engagement.

YPSO (Young People Speak Out) is a project within FORWARD's Youth Programme which trains young people from black and minority ethnic (BME) communities to become campaigners and peer-educators on violence against women and girls, including FGM. The programme provides a safe space for young women and men aged 16 – 24, to develop their ideas, gain skills and explore ways for supporting themselves and those at risk. The programme uses youth-friendly and culturally sensitive methods including participatory training, workshops, film screenings and creative and interactive events to raise awareness.

For more information, please contact the Youth Programme team:

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WHAT is Female Genital Mutilation (FGM)?

FGM is when parts or all of the external female genitalia are removed or injured for no medical reason. There are four types of FGM:

- Type 1** is when the clitoris or the clitoral hood is cut off.
- Type 2** is when the clitoris and inner lips are cut off.
- Type 3** is when the clitoris, inner lips and outer lips are cut and sewn together or sealed, leaving only a small opening (infibulation).
- Type 4** is all other harmful practices which could include pricking, piercing, cutting, scraping and burning of female genitalia.

WHY does FGM have so many other names?

FGM is sometimes called Female Genital Cutting (FGC), Female Circumcision (FC), or excision. However, many communities also use local names to refer to this practice including 'Tahor' or 'Sunna' (both Arabic terms).



HOW many people are affected by FGM?

It is estimated that around **140 million** women have been affected by FGM worldwide.

In the UK it is estimated that **24,000** girls under the age of 15 are at high risk of FGM Type 3.



WHERE is FGM practiced?

FGM is practiced in more than 28 countries in Africa, parts of the Middle East, South East Asia, Europe, America and other countries where migrants from FGM-affected communities live. FGM is also practiced in the UK on girls from FGM affected communities.



WHEN and HOW is FGM performed?

FGM is often performed on girls between the ages of five and eight. However FGM can be performed on babies, teenagers, and sometimes even on adult women. The age differs from community to community.

In many affected communities, FGM is often performed by older women who are known by different names like 'circumciser' or 'excisors'. It is often performed without sterilized equipment or anaesthetic (a medicine that numbs an area to reduce pain). Often razor blades or knives are used to cut the genitals. In urban areas FGM may be performed by medically trained people.

FGM is illegal in the UK and is considered a human rights violation and a form of child abuse.



Amina's experience of FGM: A brief account of Type 3 FGM

Amina's legs, arms and head were held by female members of her family so that she couldn't move. The circumciser used a sharp instrument like a razor blade or a knife to cut her. The sides of the outer lips were sewn together with acacia thorns. The opening that was left for urine, menstrual blood and other bodily fluids was the width of a matchstick head. To stop the bleeding, the wound was covered with herbal mixture of ash, earth, sap and leaves. When the process was over, Amina's legs were tied together and she was taken to a room especially prepared for her recovery. During the first few days, Amina was given special food to stop her from going to the toilet too often as it would be painful and could delay the healing of the wound. After 10 days, the ropes around her legs were removed and she was asked to walk around carefully. They told her that if the opening was too big or had not healed well, the procedure would be done again.



WHY is FGM performed?

FGM is performed in many countries as an important part of their culture and tradition. People practice it because it is something that their mothers, grandmothers and great-grandmothers had practiced for centuries. Often both men and women support the practice of FGM.

Many reasons are given for the practice and often more than one reason is given.

These are some of the reasons given:

Social reasons

- To keep the cultural identity of a community.
- To signal that a girl has now become a woman.
- To protect a girl's virginity – to prove she has not had sex before marriage.
- To decrease a woman's sexual desire.
- To prepare a girl for marriage. Once FGM has been performed a girl is seen as ready for marriage. There is a link between FGM and child marriage.
- To enhance men's sexual pleasure.
- To increase a girl's beauty.
- To follow a religious requirement (although there is no evidence to suggest that FGM is required by any religion).

Economic reasons

- It is believed that FGM ensures a girl's virginity, making sure she has not had sex with anyone before marriage. This may make men more willing to marry her and pay more money for her (her bridal price, which is money paid to her parents).
- Circumcisers also get paid for each circumcision performed and so this provides them with a good income (source of money).
- The FGM celebration also provides gifts and money to a girl and her family.
- In some communities traditional leaders and chiefs are paid to give permission for girls to be cut.

“All my life I’ve tried to think of a reason for my circumcision. If I could think of a reason, then perhaps I would be able to accept what they’ve done to me. But I’ve never been able to find one. And the more I’ve thought about it, the angrier I’ve got.”

-Waris Dirie (model, author and human rights activist)

MYTHS and misunderstandings

In most FGM-affected communities, there are myths that support the practice, which tends to influence people's attitudes about FGM.

Here are ways to respond to these myths:



MYTH:	FACT:
An uncut woman will become promiscuous and have an uncontrollable sexual appetite.	FGM makes no difference to a woman's sexual appetite but can stop her from enjoying sex. Sexual appetite mainly arises from hormones secreted by glands in the brain.
If the clitoris is not cut, it will continue to grow.	The clitoris stops growing after puberty and is still small at the final stage of growth.
If the clitoris is not cut, it will harm her husband during intercourse.	The clitoris gives a woman sexual pleasure and does not cause any harm to her or her husband.
If the clitoris is not cut, it will harm the baby during delivery.	The clitoris causes no harm to the foetus, the baby or the mother; whereas FGM may cause serious complications during childbirth.
If a woman does not undergo FGM, she will not be able to have children.	FGM has nothing to do with fertility; and FGM may actually cause infertility because of infections.
If a woman does not undergo FGM, her genitals will smell.	FGM will not make the vagina any cleaner. In fact, Type 3 FGM can make the vagina less hygienic.



So WHERE did FGM start?

The origins of FGM are not clear but many believe it was practiced during the Ancient Egyptian times during the rule of the pharaohs. This is because mummies have been found with evidence of FGM. It is believed that FGM was performed as a way to tell the difference between free upper class women and slaves. The link between Ancient Egypt and FGM is evident in the fact that Type 3 is sometimes known as Pharaonic circumcision.

The practice may also go back to Roman times, when a 'fibula', a clasp, was driven into the women's outer labia to prevent infidelity. It is thought that FGM spread along the Egyptian coast of the Red Sea into East and West Africa via trading routes. With the arrival of Islam, the practice spread to countries like Indonesia.

In many communities, there is strong pressure from families and friends to continue the practice.



Did you know?

A form of FGM was practiced by doctors on women in England until the 19th century. It was seen as a way to prevent women having affairs and some doctors believed it was a way to 'cure' lesbianism.



What right do Western people have to impose their cultural views on another culture/society?

FGM violates a number of agreed human rights laws and principles. Human rights are universal and all people are entitled to enjoy a range of rights that have been approved by the United Nations and are recognized internationally, many of which are violated through FGM.

These human rights include:

- Equality and the right to be free from all forms of discrimination against women;
- The right to life and physical integrity;
- Freedom from violence, injury, abuse, torture, cruel, inhuman or undignified treatment;
- The right to good health and wellbeing;
- The right to information;
- The rights of the child.

Children have a special right to health care, safe environments, education and a protected childhood that allows full growth and development.

Cultural arguments should not be used to justify violations of basic human rights. In the UK FGM is treated as a form of child abuse.

Many African women have been at the forefront of the campaign against FGM and have paved the way for many of the present programmes working on FGM. This includes the Inter African Committee on Harmful

Traditional Practices that has been in existence since 1984. Today a number of organisations in Africa and the UK are working at the community level to end the practice.



FORWARD is led by African women who want to end this practice within their own communities. **FORWARD** also works in partnership with organizations based in FGM affected countries in Africa to raise awareness and campaign on the issue of FGM. In this way **FORWARD** is supporting communities to come together, address the practice and help end it because FGM can only be effectively ended if we address the cultural and social context.



Type 1 doesn't seem that bad; what if FGM Type 3 is banned but Type 1 allowed?

Although many people think that a 'nick' of the clitoris for symbolic reasons is not harmful the truth is that ALL forms of FGM can have short and long-term complications. The extent of the effects of FGM on a girl's health and well-being depends on the type of procedure. The most severe form, Type 3, poses a greater risk to health and wellbeing of girls and women. Additionally all forms of FGM violate human rights and girls should not be subjected to a practice which is not in the best interest of the child and is harmful.



What are the complications associated with FGM?

FGM can cause both short-term and long-term physical complications.

Physical complications

- **Extreme pain:** FGM is often performed without any anaesthetic. Girls can go into shock because of extreme pain and stress.
- **Severe bleeding:** This is caused by damage to blood vessels. In some cases this can lead to death.
- **Risk of infection:** An unclean environment (i.e. the use of blades that are not sterile and traditional methods for healing the wounds), may cause serious infections such as tetanus or even HIV.
- **Difficulty in passing urine and menstruation:** due to fear of passing urine or damage to the urinary tract and/or reproductive organs.

Psychological complications

Studies show that FGM may affect a woman psychologically for the rest of her life. Some psychological effects include:

- **Anger** at the person who performed FGM or arranged for FGM to be carried out.
- **Emotional distress, fear and feelings of helplessness**
- **Post-traumatic stress disorder:** symptoms can include flashbacks, nightmares, anxiety and depression for a long time after FGM.
- **Sexual Phobia:** resulting in **fear and difficulties in having sex.**
- **Feelings of not being a ‘whole’ or a ‘normal’ girl or woman** may be felt by some girls/women because of FGM.
- Because the clitoris is so sensitive, **a woman’s sexual pleasure is greatly decreased** by its removal. This can have negative effects in a marriage and in sexual relations. However, FGM does not take away sexual desire. This is because sexual relations are more than physical; feelings such as love, passion and companionship are also important for pleasure.

“You have the feeling that you have not been allowed to have something that you should have by nature. It is something to do with pleasure ... you hear about this pleasure but you have never felt it, you don’t know what it is, how would you know?”

Female participant in FORWARD’s London PEER research



Is FGM an Islamic or religious requirement?

Islamic requirements are taken from both the **Quran** (the Islamic holy book) and the **Hadith** (a collection of texts that relate the deeds and words of the Muslim Prophet Mohammed (Peace Be Upon Him - PBUH). Together they provide Muslims with a guide (known as **Sunna** – which means 'according to the tradition or custom of the Prophet') on how to live their lives.

There are several Hadiths which have been interpreted to support FGM. One Hadith (known as the Hadith of circumcision) is that of a debate between the Prophet Mohammed (PBUH) and Umm Attia. It says the following:

“Mohammed (PBUH) met a woman called Umm Attia. This woman was known to be a circumciser of female slaves. Mohammed said to her: “Trim, but do not cut into it, for this is brighter for the face and more favourable with the husband.”

Those that argue in favour for FGM believe that this Hadith provides evidence that the Prophet Mohammed (PBUH) did not forbid FGM, instead giving instructions for how it should be performed. The same Hadiths are also used by people who want to end FGM as a way to prove that although FGM was practiced at the time of the Prophet, it should be kept to a minimum.

Despite the Hadiths that refer to circumcision there is no explicit reference in the Quran that girls must be circumcised. There is much debate on the issue and many Muslim scholars will provide evidence both for and against FGM.

Imam Abusayeed, chairman of the Islamic Shari'a Council (UK) said:

‘In Islam it is forbidden to mutilate the body, in this sense FGM is condemnable as it irreversibly harms a woman. It is also prohibited to compel an individual to undertake this operation... FGM is not Sunna... all forms of FGM are crimes and have no relationship with Islam.’



Islam does not give any convincing arguments for making FGM a religious obligation; in fact, the practice goes against many aspects of the religion.

- Although the Quran mentions many duties regarding women; such as pregnancy, breast-feeding, divorce, menstruation, etc, it says nothing about FGM.
- According to Islam, you may not wound a human being or cut off a part of his/her body, unless there are important reasons for doing so.
- The female genitals were created by Allah, not by humans. No one has the right to change God's creation.
- Islam respects women and also recognises female sexuality giving women the right to have sexual pleasure in marriage.



FGM is practiced in many cultures and occurs in several different religious communities and among people with traditional beliefs. Therefore, FGM can be seen as both a pre-Christian and a pre-Islamic practice that – together with ancestor worship and believing in spirits – has become tradition in many countries.

Men get circumcised. What's the difference between male circumcision and FGM?

In male circumcision the foreskin is removed without harming the penis itself. If male circumcision was carried out in the same way as FGM then most of the penis would be cut off.

The most important difference between male circumcision and FGM is the reasons behind the practices. Unlike FGM, male circumcision is not performed to preserve virginity or to decrease male sexual desire or drive. Male circumcision is not linked to the control of men's sexual behaviour while FGM is practiced to control women's sexual behaviour: to make sure that they remain virgins before marriage and faithful during marriage. However there is now a growing movement against male circumcision.

Some important differences are:

- Male circumcision causes health problems less frequently, while FGM has serious and more harmful health effects.
- Male circumcision is an important part of both Islam and Judaism and is mentioned in both the Islamic and Jewish holy books. Muslim scholars have yet to come to an agreed decision on the necessity of FGM.



If a girl gives consent, would FGM be okay?

NO. FGM has no medical benefits and is closely linked to traditional and cultural norms.

As cultural and societal pressures to practice FGM are so strong, it is difficult to judge whether a woman is truly giving consent. There is almost always the question of whether she is undergoing FGM because she wants to, or because she feels like she has to. This leads to the question: is it possible to separate the two? Similarly, because FGM is a taboo subject that is not openly discussed; it is difficult to ensure that a girl or a woman knows all the facts and has all the information about FGM before giving her permission to undergo the procedure.

If FGM is allowed when consent is given, it also results in some problematic questions like:

- How old does a woman or a girl need to be in order to make the decision to undergo FGM?
- Can we be sure that she is freely giving her permission and isn't being pressured by others or her community?
- How can we ensure that she isn't being influenced by financial or societal factors?

In some countries like the United States of America the law forbids FGM for those under the age of 18 years old.



Why is FGM different from other cosmetic surgeries including designer vaginas?

Some people argue that cosmetic surgery such as breast enlargements/reductions, facelifts or 'designer vaginas' (an operation to change the way the vagina looks) are equally harmful cultural practices similar to FGM, as they both affect health, both physically and psychologically.



However, the most important difference is that in cosmetic surgery women give their consent for the operations; usually without a deeply embedded pressure from their community. In terms of FGM the decision is made for the child or woman, who is usually neither informed nor old enough to decide for herself. Also the extreme societal pressure makes it difficult to determine if a girl is freely deciding to undergo the procedure without pressure from others. Therefore, the girls who undergo FGM may not be giving consent to the practice.



If a woman has had FGM, is she still able to be sexually active or achieve sexual pleasure?

For some women who are sewn up or 'closed' (infibulation – FGM Type 3), it can be difficult or impossible to have penetrative sex because the opening may be very small (often the size of a matchstick head). In some cases, custom requires that the woman is opened up, either by her husband or a female member of the family for her wedding night, after she has been inspected and they are happy that she is still a virgin. This can cause more physical and emotional trauma for a woman, particularly those who have undergone Type 3 FGM and may require support from a trained health professional. It is recommended for women who have undergone FGM to seek medical advice or counselling to make a decision about being opened up.



In the UK, it is possible for a girl or a woman to be opened up by a medical professional. This operation is known as de-infibulation or FGM reversal.

For a list of specialist clinics that offer this service please see FORWARD's Information, Services and Support guide or contact FORWARD.



Would it be better if FGM was done by professionals in hospitals using sterilised equipment?

No. FGM is harmful regardless of how it is performed.

Although having FGM done in the hospital would reduce the risk of infections and help to dull the pain, physical and psychological complications could still happen. This is because the effects of FGM do not only occur during the procedure but continue throughout a woman's life. FGM can affect a girl/woman's physical and emotional wellbeing; for example blood or urine may collect inside her because the opening is so small (this is known as menstrual or urinary retention).

According to the World Medical Association, health professionals swear an oath not to do any harm to their patients, therefore it is considered unethical for health professionals to perform FGM on girls or women. Health staff in the UK are also forbidden from performing FGM.

FGM being performed by a medical professional in a clinic or a hospital may make the operation safer, but it does not take into consideration the reasons why the girl is on the operating table in the first place. Did she make an informed choice, knowing all the facts? Or was there pressure or expectations from family or the community to have FGM done? It might also make the practice seem more acceptable since medical personnel are respected.



Since FGM is a cultural practice can it still be banned?

Laws that ban FGM are important as they protect children and women. This provides security for girls and women who stand up against FGM. Making FGM illegal recognizes it as a human rights violation. Additionally laws provide a good environment for working to end FGM as it shows that governments are committed to ending the practice. Ending FGM is not as simple as making it illegal, but it is an important step to addressing an unacceptable cultural practice.

In the UK the FGM Act (2003) makes it illegal to help, support or arrange for FGM to be performed on a girl either in the UK or abroad. The offence can be punished by up to 14 years in prison, a fine, or both.



The law is an important step to ending FGM. There is still much work to be done, through involving affected communities to increase awareness of FGM. Therefore it is important to continue campaigning on this issue. You can do this through supporting organisations that campaign on the issue, telling people that you know about it or volunteering with a group that works on these issues. However, FGM is a cultural norm and will require community education and empowerment; engaging different people at community and national level. Without engagement with affected communities to abandon FGM, laws alone will not be enough to end this practice.

The UK has banned FGM. Has anyone been prosecuted (sent to jail) for practicing FGM in the UK?

Despite the FGM Act (2003), the law banning FGM in the UK, there have been no prosecutions in the UK. However this does not mean that FGM is still not occurring both in the UK and to British girls abroad. Active steps are being taken by all professionals concerned with the protection of children in the UK to ensure that those practicing FGM in the UK are prosecuted.

It is also important to note that prosecution is not the only way to ensure that there is an end to FGM.

Under the law in France there have been more than 100 prosecutions of families. This is because in France, there are routine physical examinations of girls. Although this has led to prosecutions it is a controversial way to end FGM. This is because it opens up ethical questions around protecting and maintaining the dignity of girls. It also does not engage communities on why FGM is harmful and does not allow them the opportunity to actively make the decision to end FGM in their communities.

At the moment, in the UK, only girls who are suspected of being at risk of FGM are physically examined.



If a girl has undergone FGM where can she get support?

If a girl or a woman needs support, advice or guidance she can contact **FORWARD**:

Phone: 0208 960 4000

Email: youth@forwarduk.org.uk

for support or to be signposted to specialist support services.

She can also join **FORWARD**'s youth support group.

Alternatively she can contact her GP or any of the specialist FGM clinics, who have extensive experience in dealing with FGM and understand the cultural reasons behind the practice.

Contact numbers for specialist health clinics can be found on our website (www.forwarduk.org.uk) or in our **Information, Services and Support (ISS) guide**. The ISS Guide also includes the names of other FGM organisations that can provide support.



What happens if I report that a girl has either undergone FGM or is at risk of FGM?

If you tell a teacher or a school nurse about your concerns of someone being at risk or having undergone FGM this will be treated confidentially. Your concerns will be referred to specialist care or to the child protection officer in the school. Professionals are required to treat any reported case of FGM as a child protection issue and start a child protection referral. This means that the local authority's children's services will treat this as a serious concern and organise a meeting to assess the case and find ways to best protect the child. This investigation will also try to find out if other siblings in the family are at risk of FGM. Parents will be part of this meeting to discuss the concerns. A girl will **NOT** automatically be taken away from her home. It will only happen in rare cases where the parents fail to guarantee that they will not carry out FGM on their daughter.

"If you are worried about someone who is at risk of FGM or has had FGM, you must share this information with social care or the police. It is their responsibility to investigate and safeguard and protect any girls or women involved." – UK Multi-Agency Practice Guidelines (2011)

Have a question we did not answer?

Let us know and we will answer it as best we can!

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Designed by Youth Friendly

Produced by FORWARD

Charity Registration Number: 292403

Company Number: 01921508

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