



Questions and Answers about Female Genital Mutilation/Cutting (FGM/C)

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What is FGM and the term FGM/C?

Female genital mutilation consists of the (partial or complete) removal of the external female genitalia, and the infliction of other injuries to the female genitalia for no medical reasons. There are several varieties, including partial or complete removal of the clitoris, of the labia minora and majora, the narrowing of the vaginal opening by joining the two sides of the wound, leaving only a small opening for urine and menstrual fluids, and any other non-medical injury such as scraping, incising, pricking or burning.

Female genital mutilation can lead to pain, infection, problems with sexual intercourse, problems with urination, problems with childbirth, and death.

It is estimated that 500,000 women in Europe have undergone FGM/C and 200 million women worldwide.

The term 'female genital mutilation' was adopted in 1990 by the Inter-African Committee on Traditional Practices Affecting the Health of Women and Children, and in 1991 the World Health Organization (WHO) recommended that the United Nations adopt it as well. However, objections have been raised because the term also confers judgement and condemnation of what is an age-old practice in many communities. In an effort to become more culturally sensitive, the term 'female genital cutting', or FGC, has become widely used among researchers as well as various international development agencies. EU in its external action, as UNICEF and the United Nations Population Fund (UNFPA) use a hybrid term, 'female genital mutilation/cutting' or FGM/C. This is meant to capture the significance of the term 'mutilation' at the policy level and highlight that the practice is a violation of the rights of girls and women. At the same time, it recognizes the importance of employing respectful terminology when working with practising communities.

Actions so far, based on the focus areas of the Communication towards the elimination of female genital mutilation (25 November 2013):

1. Knowledge

Estimates show that there may be as many as 200 million victims worldwide and 500,000 victims in the EU alone. However, these are estimates and there are currently no official data available on measuring the actual scale of the phenomenon.

It is difficult to estimate the number of victims and girls at risk, and we have little reliable information about how, by whom and where it is carried out. Therefore, improving data collection is a priority:

- The European Institute for Gender Equality has developed a common methodology and indicators to estimate risk of FGM. This includes methodological recommendations for risk estimation of FGM in all the EU Member States [\[1\]](#).
- A prevalence study headed by Ghent University is currently being funded under the Commission's Daphne III programme, to develop a common definition and methodology on FGM prevalence.

2. Prevention

The Communication towards the elimination of female genital mutilation has a strong focus on prevention through sustainable social change. FGM is often deeply rooted in communities, causing a

social pressure for parents to have their daughters cut. Often, it is also presented that undergoing FGM will be beneficial for the girl.

To change these social norms, the European Commission is funding, and will continue to fund grassroots activities that educate about the health complications FGM can cause, that counter the belief that girls need to be cut, and raise awareness among those in contact with victims of FGM and girls at risk of FGM. We do so by funding:

- National awareness campaigns run by Member States on violence against women and FGM[2].
- The development of a web-based platform on female genital mutilation for judges, nurses, asylum officers, doctors, teachers, police officers and other professionals who come into contact with girls at risk and victims, to promote a multi-agency approach[3].
- Transnational projects aiming to prevent, inform about and combat violence against women, young people and children, linked to harmful practices through the Commission's Rights, Equality and Citizenship Programme[4].

The development of training packages for health professionals, to improve the quality of and access to health services for migrant and ethnic minorities including the Roma, where FGM is a specific topic in the training modules[5].

At the 9th European Forum on the rights of the child 10 Principles for integrated child protection systems were proposed. The document adopts a systems-approach to violence against children, including gender-based violence, FGM and other harmful practices. To encourage a systems approach to the protection of children from all forms of violence, with emphasis on capacity of the system to prevent and respond to violence, the Commission published a reflection on integrated child protection systems, for everyone who through their job is in contact with children. FGM is part of this reflection[6].

3. Prosecution

FGM is a crime in all EU Member States, either through specific or more general legislation. A principle of extra-territoriality is often included, making it possible to prosecute FGM when it is committed abroad, as families often take their daughters to their country of origin to have them mutilated.

- A correct and timely implementation and application of the Victims' Rights Directive is important and relevant for the victims of FGM, as it ensures easy access to well-functioning specialised support services. The Directive applies to all victims, regardless of their legal status in the Member States, and puts in place measures to protect victims against any threat of physical or emotional harm during criminal investigations and trial. The Directive also puts in place specific protection measures for child victims.
- The Commission is also disseminating training materials on FGM for legal practitioners, through its e-justice platform. The e-learning course 'United against female genital mutilation' addresses the issue of FGM in the context of health and asylum services. It is aimed at legal practitioners and provides an introduction to understanding FGM as a human rights issue and as a specific form of gender based violence, and its implications in the area of asylum[7].
- Today, we publish an analysis of European court cases related to FGM, in an effort to identify what has allowed states to effectively prosecute.

4. Protection

Girls at risk of FGM and women who are victims need particular support when they arrive on the EU territory. EU legislation is in place: a woman or a girl at risk of suffering FGM is eligible for international protection and her specific needs should be taken into account.

- Because of the recast Asylum Procedures Directive and the recast Reception Conditions Directive, Member States have now an obligation to identify applicants with special procedural and reception needs, due to their gender or as consequence of serious forms of sexual violence. If such needs are identified, Member States need to provide adequate procedural and reception support to these vulnerable applicants.
- Relevant provisions of the Asylum Procedures Directive provide, for instance, that personal interviews shall be conducted by persons competent to take into account, among other things, the applicant's cultural origin, gender and vulnerability. In addition, Member States should, wherever possible, select an interviewer and interpreter of the same sex of the applicant if the latter requests it.
- Relevant provisions of the Reception Conditions Directive also provide that victims of female genital mutilation should receive the necessary medical and psychological treatment, and staff working with victims of female genital mutilation should have appropriate training.

- The European Asylum Support Office have developed an online training platform for immigration and asylum officials in Member States on gender-specific issues related to asylum and the application of EU law in this area; first trainings will take place this year.

5. External actions.

The EU contributes to eliminating FGM/C globally. The EU has actively participated in international cooperation to promote the elimination of FGM/C. FGM/C is included in human rights and political dialogues with partner countries and in annual dialogues with civil society organisations.

The EU participated and announced concrete pledges, and made a financial contribution at the 2014 Girl Summit in London. These include supporting actions to achieve gender equality and wellbeing of children, continued support of advocacy for improved national legislation on FGM where it is needed. The EU pledged around EUR 100 million for the next 7 years to gender equality and children's wellbeing under the EU Global Public Goods and Challenges programme.

In September 2015 the EU launched a diplomatic outreach with a global focus on all forms of violence against children and women and a focus on ending child, early and forced marriage and FGM/C. All EU Delegations received instructions to carry out actions in priority areas of their choice and include the reporting in their human rights country strategy in December 2015. The results are currently being compiled and an analysis of the impact will be prepared.

The EU has supported and contributed to the resolutions of the World Health Assembly, and the work of the World Health Organisation in this area, and also in the broader context of violence against women.

The EU is currently supporting 12 projects in non-EU countries, for a total amount of approximately EUR 5 million, with an objective of putting an end to FGM/C. The EU is also about to support UNICEF-UNFPA Joint Programmes on the Abandonment of FGM/C: accelerating change.

Lessons learnt tell us that, in order to address FGM/C, projects strategies should encompass a multi-level, multi-thematic and coordinated approach, paying a specific attention to side-issues. Some pillars can contribute to a change of mind-sets: engaging with justice, health, religious and political authorities and practitioners, from communities on grassroots level to national level, engaging with women and girls but also men and boys in order to shift social norms.

In the regular Human rights and gender training, the European External Action Service in cooperation with Amnesty International provides specialised training on FGM/C. Participants come from the External Action Service headquarters in Brussels and from the EU Delegations all over the world, the European Parliament, the European Commission and Member States. The EU also works closely with the African Union and African group in the UN Human Rights Council to end the practice.

Background:

[Analysis of court cases, published 5 February 2015](#)

[Communication towards the elimination of female genital mutilation \(25 November 2013\)](#)

[Strategic Engagement for gender equality 2016-2019](#)

[Gender Equality and Women's Empowerment: Transforming the Lives of Girls and Women through EU External Relations 2016-2020](#)

[EU Action Plan on Human Rights and Democracy 2015 – 2019](#)

[2030 Agenda for Sustainable Development](#)

[Roadmap on a possible EU Accession to the Council of Europe Convention on preventing and combating violence against women and domestic violence](#)

[EU Guidelines on Violence against women and girls and combating all forms of discrimination against them](#)

[The 10 Principles for integrated child protection systems were proposed in the reflection paper of the 9th European Forum on the rights of the child, held in Brussels on 3 – 4 June 2015](#)

[1] <http://eige.europa.eu/rdc/eige-publications/estimation-girls-risk-female-genital-mutilation-european-union-report>

[2] http://ec.europa.eu/justice/grants1/calls/just_2012_prog_ag_vaw_en.htm

[3] http://ec.europa.eu/justice/grants1/calls/just_2014_rppi_ag_fgmu_en.htm

[4] http://ec.europa.eu/justice/grants1/calls/just_2014_rdap_ag_harm_en.htm

[5] <http://www.mem-tp.org/>

[6] http://ec.europa.eu/justice/fundamental-rights/files/2015_forum_roc_background_en.pdf

[7] https://e-justice.europa.eu/content_human_rights-256-en.do?clang=en

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