

# Fact Sheet: Female Genital Mutilation

**A procedure with life-long consequences:** There are around 230 million women and girls in the world today who have been subjected to female genital mutilation, with over 144 million of them living in Africa. Female genital mutilation is violation of basic human rights. The procedure is painful and causes permanent physical and psychological scars. UNICEF is committed to protecting girls and working to end to this harmful practice.



Every child has the right to bodily integrity. Through Article 24-3 of the Convention on the Rights of the Child, its 196 state parties commit to abolishing traditional practices that endanger children's health. Female genital mutilation (FGM) is such a practice. Regardless of the type of procedure carried out and whether or not it is performed by a medical professional, this traumatizing practice is a human rights violation.

## Life-long consequences

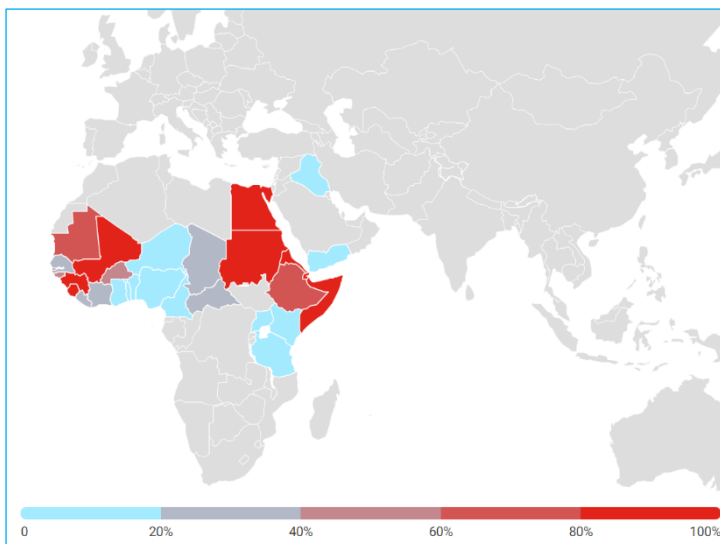
Female genital mutilation, sometimes called female circumcision, refers to partial or total removal of the labia and/or the clitoris (see sidebar). In some cases the wound is then sewn shut, leaving a small opening. Most of the girls are under twelve years old, with some even younger than five.

Many bleed to death or die from infections. The procedure can cause unbearable pain and heavy blood loss as well as lasting physical and emotional scars. Complications include pain caused by fistulas or the inability to leak menstrual blood, infections, cysts, bladder and kidney infections, incontinence and infertility. Many circumcised women and girls experience pain during intercourse and complications during childbirth, including stillbirths. Women and girls subjected to FGM suffer from lasting psychological effects including trauma, depression and other mental suffering. These often stem from feelings of helplessness and betrayal, as the procedure is often initiated or even performed by someone close to them.

## A global human rights issue

Although the exact number is unknown, analyzed data shows that over 230 million women and girls alive today in 31 countries have undergone this harmful practice.

Available data shows that FGM is practiced in countries from the Atlantic coast to the Horn of Africa, in areas of the Middle East such as Iraq and Yemen and in some parts of Asia, with prevalence varying greatly from country to country. The practice is widespread in Somalia, Guinea and Djibouti, affecting around 90 percent of women and girls, while affecting only 1 percent in Cameroon and Uganda. However, female genital mutilation is a human rights issue that affects women and girls all over the world. There are reports of the practice being carried out in Colombia, India, Malaysia, Oman, Saudi Arabia, the United Arab Emirates and other countries. The spread of diaspora communities means it is also found in parts of Europe as well as Australia and North America.



Global spread of FGM 2024. Source: UNICEF Data. This map does not reflect a position by UNICEF on the legal status of any country or territory or the delimitation of any frontiers.

The World Health Organization (WHO) has classified FGM into four different types:

**Type I:** Partial or total removal of the clitoral glans and/or the clitoral hood (clitorectomy)

**Type II:** Partial or total removal of the clitoral glans and the labia minora, with or without removal of the labia majora

**Type III:** Narrowing of the vaginal opening with the creation of a covering seal. The seal is formed by cutting and repositioning the labia minora and/or labia majora, with or without the removal of the clitoris. Also called infibulation.

**Type IV:** All other harmful procedures to the female genitalia for non-medical purposes, including: pricking, piercing, incising, scraping and cauterization

## No basis in religion

There are various reasons given for practicing FGM. In many societies that practice FGM, there is a misconception that it is dictated by religion. Neither the Torah, the Koran nor the Bible contains any passage commanding that women and girls be circumcised. First mention of it dates to the time before Christianity and Islam, for example in Herodotus (around 500 BCE) and Strabo (around 50 BCE).

Because FGM is nevertheless often justified through religious arguments, 34 distinguished imams in Mauritania issued a fatwa (legal opinion) opposing it in January 2010. In September 2011, they were joined by religious leaders from nine more countries where the practice is carried out. In a regional fatwa, they affirmed that sharia law does not condone FGM but indeed forbids it – a milestone for eliminating the practice.

Other justifications rest mainly on aesthetic, hygienic, or symbolic reasons, or as a “guarantee of virginity.” Experience has shown that in prevention work against FGM, the isolated consideration of individual aspects and statements only leads to reactive changes – and not an end to the practice. After an intense campaign highlighting the health risks for girls, for example, it was observed that the practice became “medicalized” – i.e., carried out by medical professionals such as midwives and moved to hospitals. Such observations underscore the fact that FGM has deep roots in the communities that practice it.

## Rooted in society

Female genital mutilation takes on an important and complex social function, as it guarantees the social status of the entire family. Uncircumcised girls are often considered “unclean.” They are relegated to the edges of society, cannot marry and bring disrepute to their families.

Parents see circumcision as a way for their daughters to grow up within the community. Withdrawing from the practice can result in the exclusion of the entire family, which brings considerable risks for girls and women. FGM therefore not only provides a sense of social acceptance, but – paradoxically – also offers certain protections. A practice being so deeply rooted in society and in the way it sees itself makes it a “social norm” (see sidebar).

## Hope in the fight against FGM

Despite this resistance, the social norm of female genital mutilation is subject to general societal change. This change could come within a generation, as certain circumstances could help to put an end to the centuries-old practice. However, changing these deep convictions and breaking behavioral patterns is a very complex process. Simply banning the practice will not change how people think. Lasting social change can only happen when people’s beliefs about the practice change.

UNICEF has been working to end female genital mutilation for more than 35 years. In 1985, UNICEF began to work with partner organizations on this issue. Its “Guidelines for UNICEF Action on Eliminating FGM/C” were published in 1995, and two years later UNICEF, the United Nations Population Fund (UNFPA) and the World Health Organization published a joint statement against female circumcision.

## UNICEF's comprehensive approach

Education and raising awareness are therefore essential tools for bringing about change. The topic must be viewed with sensitivity and discussion based on people's knowledge and experience – with consideration of human rights, human dignity, hygiene, health and discrimination.

Through such discussion, people become informed of the risks and disadvantages of female circumcision and more aware of child and human rights. Through these universal values, they are then able to consider the practice through the concept of "social norms." Our goal is for the population to see female genital mutilation as a clear violation of human and child rights, and abandon the practice.

Also essential is that parents are sure that their uncircumcised daughters will not suffer any disadvantages in life. Uncircumcised women and girls must be accepted as full members of society and as wives. Experience has shown that if these conditions are met, the number of parents who decide not to circumcise their daughters increases.



©UNICEF/UNO421350/Uganda 2021

Social norms are expectations of a community that its members do or not do certain things. Observance is rewarded by the community and non-observance punished.

Many societies see female genital mutilation as a social norm. Families and individuals have continued the practice for generations because they believe that it is expected of them by their communities.

You can find more information on female genital mutilation at:  
[www.unicef.ch/en](http://www.unicef.ch/en)  
[www.unicef.org](http://www.unicef.org)  
[www.childinfo.org](http://www.childinfo.org)

Last update: May 2024

UNICEF, the United Nations Children's Fund, has over 70 years of experience in development cooperation and emergency aid. UNICEF is committed to ensuring that children survive and have a safe childhood. Its central tasks include health, nutrition, education, water supply and hygiene as well as protecting children from abuse, exploitation, violence and HIV/AIDS. UNICEF is financed entirely through voluntary contributions. [unicef.ch/en](http://unicef.ch/en)

Committee for UNICEF Switzerland and Liechtenstein  
Pfingstweidstrasse 10  
CH-8005 Zurich  
Telephone +41 (0)44 317 22 66  
[info@unicef.ch](mailto:info@unicef.ch) | [www.unicef.ch/en](http://www.unicef.ch/en)

**unicef**   
for every child