**FGM is Increasing in America** December 2017

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[available at [www.louisetrauma.weebly.com/fgm](http://www.louisetrauma.weebly.com/fgm)]

There has been an increase in FGM being performed on girls here in the United States.

Since 1990, the number of girls and women in the U.S. who have undergone the procedure or are at risk of it has tripled over the last two decades, according to an article published by CNN on July 14, 2017.

<http://www.cnn.com/2017/05/11/health/female-genital-mutilation-fgm-explainer-trnd/index.html>

The increase is due to rapid growth in the number of immigrants from countries with a high rate of FGM. The parents and families of the girls have brought this unfortunate aspect of their culture here.

*FGM is a Federal Crime in America*

On November 2, 2017, the House Judiciary Committee advanced to the full House a bill sponsored by Rep. Dave Trott (R-Al.) that would increase the maximum federal penalty for Female Genital Mutilation (FGM) from five years in prison to 15 years. House Judiciary Committee Chairman Bob Goodlatte (R-Va.) delivered these remarks during the committee’s mark-up of the *Stopping Abusive Female Exploitation Act* (H.R.3317): “Under current law (U.S. Code, Title 18, Part I, Chapter 7, section 116), FGM is rightly a federal crime. However, despite its ongoing occurrence in the United States, it has never been prosecuted until this year.”

The legislation came about after federal prosecutors filed charges in the nation’s first case involving an Indian-American physician in Michigan who allegedly performed the procedure on two 7-year-old girls. This case is the first of its kind prosecuted since FGM was first criminalized in 1996 in America. Dr. Jumana Nagarwala was charged in federal court for performing FGM in a medical clinic in Livonia, Michigan, outside Detroit. Authorities suspect that **she** has been secretly performing these brutal procedures since 2005, impacting many more young girls. Tragically, Michigan is one of 26 states that have failed to enact laws against the practice. Dr. Nagarwala has been charged with a federal crime, and has been placed on administrative leave while she is on bail.

*FGM a Cultural or Religious Practice?*

FGM is a procedure in which genital organs are altered or injured for non-medical reasons to suppress sexuality. No religious texts require FGM, yet some cultures and sects believe the practice makes for better wives by making girls more acceptable in their communities, thus improving their eligibility for marriage. The practice aims to reduce a woman’s libido to ensure premarital virginity and marital fidelity. FGM has no medical benefits—and carries myriad health risks, from childbirth and menstrual complications to severe infections, post-traumatic, stress, even death.

Defendants in the Michigan case have already attempted (and failed) to receive bond by using their religious freedom as a defense. Defendants assert that the practice not be classified as FGM, but rather as a religious practice. U.S. Magistrate Elizabeth Stafford denied bond, stating that religious would not be used “as a shield” in the case.

*Prevalence of FGM World-Wide and in America*

Across at least 30 countries, more than 200 million girls and women alive today have been subjected to FGM. More than half the survivors live in Indonesia, Egypt and Ethiopia. About 44 million of the survivors are younger than 15. More than 3 million girls are estimated to be at risk every year by being subjected to this procedure, even though it is outlawed in 42 countries. (WHO, “Prevalence of FGM,” accessed 11/13/17) The Center for Disease Control and Prevention estimates that half a million girls in the United States were affected by or at risk for mutilation in 2012. (CDC, January 2016)

Diaspora communities migrating to Western nations continue the practice. FGM is rising among migrants to western nations. These gruesome FGM assaults are performed at the insistence of culturally indoctrinated mothers and grandmothers on their daughters, impacting millions globally. Women, often themselves victims of FGM, perpetuate violence on women and girls. Families demand mutilation of girls and women for the preservation of “familial honor.” The task of getting a girl to have FGM falls on adult female relatives; men say that they don’t know it’s happening, or even that the practice exists at all. Girls are told to keep the procedure a secret after it’s performed, and they usually do.

There’s a movement in India to end FGM within a small Muslim sect known as Dawoodi Bohra. Bohras is a Shiite branch of Islam based in Gujarat, India, with an estimated 1.2 million followers around the world and thriving outposts across America. Sree Kamojjala, president of the Indian Association of Minnesota, said that FGM “is not a Hindu practice” or a condoned practice in India. (*Mother Jones,* April 21, 2017)

*Lasting Effects of FGM*

While the victims of FGM may find justice in the courtroom, their lives and bodies have been irrevocably changed. Survivors of FGM tell of the physical and emotional pain that remains long after the abuse. Long-term complications can include difficulty in passing urine, recurring urinary tract infections, pelvic infections, infertility (from deep infections), scarring, difficulties in menstruation, fistulae (holes or tunnels between the vagina and the bladder or rectum), painful intercourse, sexual dysfunction, and problems in pregnancy and childbirth (the need to cut the vagina to allow delivery and the trauma that results, often compounded by re-stitching). The post-traumatic stress of FGM often continues for a lifetime. (WHO, “Health Risks of FGM”, accessed 11/13/17)

*Violation of Human Rights for Girls and Women*

According to the WHO, FGM is an internationally-recognized violation of human rights of girls and women. The practice is most common in certain regions of Africa, the middle East and Asia, as well as among migrants from these areas. It is painful and harrowing, and yet millions are subjected to it.

FGM is illegal in the United States. So, why is it still happening? A deeply-rooted practice in many countries, migrant families are afraid of losing their identities. So, what if a culture’s age-old tradition is considered inhumane to the rest of the world? What can be done?

*Next Steps/Remedies*

Now that the FGM practice has become publicized and less secretive, more women have been sharing their stories and forming networks, supporting each other in the hopes that this practice will finally end. However, it will take more than women’s support groups to end the practice.

The Bosras feel tremendous pressure to conform; they also believe that their clergy leaders are all-seeing and knowing. The only way that FGM will end in the Bosra culture is if the clergy unequivocally tell them to stop, and offer support to women and girls who have already experienced it.

Dr. Nagarwala has allegedly been deceiving parents and her local medical community for over a decade. If she is found guilty of mutilating young girls and women, she will be stripped of her license to practice medicine permanently and be rendered a felon. When this happens, hopefully it will stimulate more law suits and prosecutions of this kind, and expose FGM for the horrendous practice that it is.

Equality Now, with offices in New York, London, and Nairobi, is active in campaigns to end FGM. See <https://www.equalitynow.org/>

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For more information on FGM, access the Louise Trauma Center website: <http://louisetrauma.weebly.com/>