
TESTIMONY SUBMITTED TO THE JOINT COMMITTEE ON JUDICIARY | MARCH 24, 2021

Senator Winfield, Representative Stafstrom, ranking and distinguished members of the Judiciary Committee:

Female genital mutilation (FGM) is a practice that impacts Connecticut residents. In fact, the Population Reference Bureau estimates 2,658 women and girls in the state are at risk of or have undergone FGM. AHA Foundation believes that the legislation under review today may be a good first step in addressing FGM in the state, provided it does not stand in the way of, nor delay the passage of a comprehensive law that seeks to prevent the practice, while also supporting survivors.

Although 39 states have passed laws criminalizing FGM, Connecticut is one of 11 remaining states that have yet to take steps to protect girls from this harmful practice. Comprehensive legislation is particularly important for the state of Connecticut, because it is completely surrounded by states that have already banned the practice. As it stands, the state is vulnerable to being a destination state for FGM.

Comprehensive anti-FGM legislation aids in prevention of the practice as it provides families with justification to resist cultural and familial pressure to cut their daughters. We know anecdotally through our work with survivors and at-risk individuals that families on the fence about whether or not to cut their daughters, but who may be facing pressure from family or communities, have used the existence of legislation as an excuse for why they will not go ahead with the procedure.

Last year, AHA Foundation worked closely with a survivor and lawmakers in Kentucky to pass comprehensive anti-FGM legislation that not only banned FGM in the commonwealth, but also empowered survivors to stand up for themselves in a court of law, and provided education and outreach programs to impacted communities and professionals. Following the passage of the law, we learned of at least one family who decided not to perform the procedure as a result of the new law. This is the best-case scenario for putting in place comprehensive anti-FGM legislation - preventing the practice and protecting girls from a human rights abuse.

A [report](#) released by UNFPA-UNICEF states that, “to change a harmful social norm given the hierarchical nature of society, it is imperative that even as change is welling up from the grass roots, and spreading across communities laterally, it needs to be codified by laws, policies, sanctions and resolutions that come from the top. Legal frameworks that criminalize FGM send a clear signal that the practice will no longer be tolerated. Where FGM is socially contested, legislation serves to encourage those who wish to abandon it and deter those who fear prosecution.” This supports what we have heard from individuals in the U.S. seeking to abandon the practice; laws give them the support they need to stand firm in their decision, and laws can help sway individuals considering whether or not to cut their daughters to refrain from doing so.

To understand the importance of comprehensive legislation, it is also important to understand FGM on a global level. FGM is a form of gender-based violence that is internationally recognized as a violation of women’s and girls’ fundamental human rights. Because it is typically carried out on minors, it is also regarded as a violation of the rights of children. The practice of FGM is generally motivated by beliefs about what is considered proper sexual behavior and cultural ideas of femininity and modesty. This includes the notion that girls are “clean” and “beautiful” after the removal of body

parts that are considered to be “male” or “unclean.” FGM is also considered a way to reduce a woman’s libido, safeguarding virginity and marital fidelity. Communities that practice FGM believe that it will ensure a girl’s marriageability, virginity, beauty, and family honor. FGM is defined by the World Health Organization (WHO) as the partial or total removal of the female external genitalia or other injury to the female genital organs for non-medical reasons. There are various types and degrees of FGM, but the [WHO](#) makes it clear that FGM should not be carried out in any of its forms, not even by a healthcare provider.

The timing of FGM can range from shortly after birth to the time a woman is pregnant with her first child; however, the victims are commonly between the ages of infancy and 15 years old. The procedure is typically carried out by traditional practitioners, with or without anesthesia, using a knife or razor blade, although in recent years it has become increasingly medicalized. FGM has no health benefits. Many girls who undergo FGM face lifelong physical and psychological consequences. During and immediately following the procedure girls may experience severe pain, shock, hemorrhage, tetanus or sepsis, urine retention, open sores in the genital region and injury to nearby genital tissue. Over the course of her life, a survivor may experience recurrent bladder and urinary tract infections, cysts and infertility.

Survivors also face an increased risk of complications during childbirth, including maternal and newborn deaths. If a girl is forced to undergo an infibulation, where the vaginal opening is sewn almost completely closed following the cutting away of most of the genital tissue, she will likely undergo numerous surgeries throughout her life to open the scar tissue for sexual intercourse and childbirth. These surgeries put a survivor at further risk. The practice of FGM can indirectly or directly lead to death.

In 1996, the U.S. passed a federal law banning the practice of FGM (18 U.S. Code § 116 Female Genital Mutilation). The legislation was strengthened in 2013 with the passage of a provision to outlaw “vacation cutting,” the practice of knowingly taking a girl abroad to inflict FGM. In the fall of 2018, however, Judge Bernard Friedman of the United States District Court for the Eastern District of Michigan ruled that Congress did not have the authority to pass the law against female genital mutilation and dismissed key charges filed against a doctor and her accomplices who were charged with cutting 10 young girls in a clinic in Livonia, Michigan. It was the first case of its kind. To quote from his decision, Judge Friedman said that “as laudable as the prohibition of a particular type of abuse of girls may be...FGM is a ‘local criminal activity’ which, in keeping with longstanding tradition and our federal system of government, is for the states to regulate, not Congress.”

Fortunately, the STOP FGM Act of 2020 was unanimously passed by Congress in the last days of 2020 and signed into law on January 5, 2021, amending the original statute to clarify the constitutionality of the ban when FGM is performed in a situation of interstate commerce. Reestablishing the federal FGM ban is an important step towards protecting girls from this painful practice, however, it does not negate the importance of state legislation. In fact, the best way to ensure the safety of women and girls is to back up the federal ban with comprehensive state legislation. Gaps exist at the federal level leaving health care providers, educators, and law enforcement professionals who encounter minors at risk of FGM unprepared to take action. Education on the harms associated with FGM is also critical for communities to support prevention and work towards ending the practice. Existing civil remedies are unlikely to work in a situation of FGM as the statute of limitations is likely to pass before a girl who has been cut even learns that she has the right to stand up for herself in a court of law. State legislation



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can fill these gaps and ensure that survivors have access to necessary services. So, while AHA Foundation supports SB 1069, we believe Connecticut should not wait for the completion of a costly report to take stronger measures to end FGM in the state. **Instead, we strongly suggest Connecticut take action now to protect girls from this painful, harmful and unnecessary practice.**

Comprehensive legislation must be enacted to send a strong message that Connecticut stands against FGM as a form of gender-based violence. One girl cut is one too many.

About AHA Foundation

AHA Foundation is a 501(c)3 non-profit founded by women's rights activist Ayaan Hirsi Ali, and is the leading organization working to end honor violence that shames, hurts or kills thousands of women and girls in the U.S. each year, and puts millions more at risk. We ensure that women and girls of all races, cultures, religions, beliefs and backgrounds who are facing female genital mutilation, forced marriage, child marriage, or honor violence have a way out, and that survivors get the help they need to thrive.

Since 2010, the focus of the Foundation's programs includes: 1) compiling data on these crimes, which are not currently tracked by U.S. law enforcement or government agencies, 2) publishing reports and articles and organizing conferences about the continued oppression of women and girls in the U.S., 3) lobbying and outreach to expand and strengthen state and national legislation for the protection of women and girls, 4) training of law enforcement and service providers, and 5) connecting women and girls in crisis to appropriate services. AHA Foundation has trained over 3,000 frontline service providers on responding to cases of female genital mutilation, honor violence and forced marriage, and partnered with Crisis Text Line to create America's first honor violence and forced marriage helpline.