

## PRESS RELEASE

### UN agencies unite against female genital mutilation

**New York, 27 February 2008** – Expressing their commitment to the elimination of female genital mutilation, also called female genital cutting and female genital mutilation/cutting, 10 United Nations agencies pledged in a statement today to support governments, communities, and women and girls to abandon the practice within a generation, with a major reduction in many countries by 2015, the year the Millennium Development Goals are set to be achieved.

Female genital mutilation violates the rights of women and girls to health, protection and even life as the procedure sometimes results in death.

As the statement indicates, although decades of work by local communities, government, and national and international organizations have contributed to reducing the prevalence of female genital mutilation in many areas, the practice remains wide spread.

"If we can come together for a sustained push, female genital mutilation can vanish within a generation," said UN Deputy Secretary General Ms. Asha-Rose Migiro during the launch. "But this goal demands both increased resources and strengthened coordination and cooperation among all of us."

Between 100 and 140 million women and girls in the world are estimated to have undergone FGM and 3 million girls are estimated to be at risk of undergoing the procedures every year.

According to the ten UN agencies behind the statement, "The ambitious goal of eliminating female genital mutilation within a generation can be achieved by building on the progress of existing programmes and working hand in hand with communities. We have seen great success in people turning away from this harmful practice. To take these efforts to scale, we also need to see strong leadership on female genital mutilation at all levels."

The statement highlights the damaging effect of female genital mutilation on the health of women, girls and newborn babies. While excessive bleeding and shock are some of the immediate consequences, long-term health effects can include chronic pain, infections, and trauma.

Recent studies show that women who have undergone female genital mutilation have higher risks for caesarean sections, longer hospital stays, and postpartum haemorrhaging during childbirth. Their newborn babies have higher death rates during and immediately after birth as well.

The UN agencies said, "We are becoming increasingly concerned about the medicalisation of female genital mutilation. This is where the mutilation is performed by health professionals in health facilities. The argument that a mild form performed by medically trained personnel is safer is commonly heard in countries where female genital mutilation is practiced. But this should never be considered as an option."

The statement also points out that female genital mutilation is a manifestation of unequal relations between women and men with roots in deeply entrenched social, economic and political conventions.

The practice is believed to enhance a girl's chastity and chances of marriage by controlling her sexuality. As such, it not only infringes on women's sexual and reproductive health; it also perpetuates gender roles detrimental to women.

"We recognize that traditions are often stronger than law, and legal action by itself is not enough," said all the agencies involved. "Change must also come from within. This is why it is critical for us to join hands and work closely with communities and their leaders so that they can bring about sustainable social change."

The statement stresses that because female genital mutilation is a social convention, it can best be changed through working with the communities where it is practiced.

Within these communities, the decision to abandon the practice must be collective, explicit and widespread to bring about a positive change – and end female genital mutilation within a generation. There are a growing number of examples in countries around the world where this is happening, but this joint initiative is to support the scaling up of good examples to become common practice.

**Notes to the editor:**

The 10 agencies are: The Joint UN Programme on HIV/AIDS (UNAIDS), the UN Development Programme (UNDP), The UN Economic Commission for Africa (UNECA), the UN Educational, Scientific and Cultural Organizations (UNESCO), the UN Population Fund (UNFPA), the Office of the High Commissioner on Human Rights (UNHCHR), The UN Refugee Agency (UNHCR), UNICEF, the UN Development Fund for Women (UNIFEM) and the World Health Organization (WHO).

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