



DISMANTLING RACISM IN ANTI-FGM/C MOVEMENTS:

Path to Decolonial, Survivor-Led Advocacy Position Paper

March 2026



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NOTE OF CARE

This position paper addresses female genital mutilation/cutting (FGM/C), racism, and structural violence. It includes reflections and testimonies that speak to lived experiences of harm, exclusion, and injustice. For some readers, this content may be distressing or triggering.

We invite you to engage with this document at your own pace and in ways that feel safe for you. You are encouraged to pause, take breaks, or step away at any point. There is no expectation to read or absorb everything at once.

If you are a survivor or someone directly impacted by the issues discussed, please know that your well-being comes first. You have full agency over how, when, and if you engage with this material.

This paper is grounded in a Do No Harm approach. We recognize that even in naming violence and injustice, care must remain central. We encourage readers to seek support where needed, whether through trusted individuals, community spaces, or professional resources.

You are not alone in this work.

DECLARATION ON THE POWER OF LANGUAGE

Language is not neutral. It shapes what we see, what we name, and what we are willing to confront.

In this position paper, we are deliberate in our choice of words. We name female genital mutilation/cutting (FGM/C) as violence, not culture, not tradition, and not a “procedure.” We reject language that minimizes harm, obscures accountability, or sanitizes injustice. Euphemisms do not protect communities; they protect systems of harm.

We also name racism within anti-FGM/C movements as structural violence, not misunderstanding, not tension, and not isolated incidents. What is often described as “complexity” is, in fact, power. What is often softened as “partnership challenges” is, in reality, inequality.

Language has been used to racialize FGM/C as a “Black” or “African” issue, to justify surveillance of some communities while absolving others, and to determine whose pain is believed and whose is dismissed. These narratives are not accidental, they are produced, repeated, and maintained through systems of power.

We refuse these distortions.

We center language that is precise, accountable, and rooted in dignity. We use words that reflect the lived realities of survivors, not the comfort of institutions. We recognize that how we speak about FGM/C, about racism, and about each other, shapes policy, funding, protection, and ultimately, whose lives are valued.

This commitment is grounded in a Do No Harm approach. Language itself can cause harm when it erases, minimizes, or distorts lived realities. Equally, it can be a tool for care, truth, and transformation. A Do No Harm framework requires that we speak with intention, center consent and dignity, and ensure that our words do not reproduce the very violence we seek to end.

This is not simply a matter of terminology. It is a matter of justice.

*To dismantle violence, we must first name it clearly.
To shift power, we must challenge the language that sustains it.*

EXECUTIVE SUMMARY

Efforts to end female genital mutilation/cutting (FGM/C) cannot succeed without acknowledging and dismantling racism within the movement itself. Anti-Blackness, racial hierarchies, colonial power dynamics, and extractive leadership practices continue to undermine survivor safety, distort global narratives, and weaken collective impact.

Drawing from Sahiyo's Critical Intersections research project¹ and a December 2025 survivor-expert-led global convening in London², this position paper identifies racism within anti-FGM/C movements as structural violence embedded in funding systems and decision-making power structures. Survivor expert advocates described several intersecting ways that power, prejudice, and hierarchical narratives manifest, including forced proximity to harmful individuals, racialized narratives that pit communities against one another, and differential credibility assigned to survivors based on race, location, and perceived respectability. These patterns of harm and oppression are systemic and remain ongoing, thus, requiring an urgent call to dismantle racism within the movement.

Racism within anti-FGM/C movements manifests through:

- Who is seen as an “expert” versus a “beneficiary”
- Whose pain is amplified and whose is doubted
- Who controls funding, narratives, and access to decision-making spaces
- Whose safety is prioritized and whose is routinely compromised

This paper aims to:

- Document how systemic racism, colonialism, and power hierarchies manifest within anti-FGM/C movements
- Uplift survivor-led discussions of harm, exclusion, and resistance in global contexts
- Support collective reckoning within the movement around accountability, safety, and power structures
- Call for a decisive shift toward decolonial, survivor-led advocacy grounded in anti-racism and the redistribution of power.

¹Examining Intersections between FGM/C and other Social Oppressions: A Research Project (2025) available at <https://sahiyo.org/programs/research/critical-intersections.html>

²Sahiyo in London: Confronting Racial Hierarchies Within the Global Movement to End FGM/C available at <https://sahiyo.org/sahiyo-blog/sahiyo-in-london-confronting-racial-hierarchies-within-the-global-movement-to-end-fgm-c.html>

This position paper is intended to be a living document and will be updated as the movement continues to grow, learn, and better recognize, and address racism within the anti-FGM/C movement.

BACKGROUND & CONTEXT

FGM/C has been documented in more than 94 countries³, including the United States, challenging the widespread misconception that it is confined to a single region, religion, or culture. In reality, FGM/C crosses cultural and geographic boundaries, and the communities impacted are highly diverse. Dominant global narratives continue to frame FGM/C as a “Black,” “African,” or “immigrant” issue, reinforcing racialized stereotypes while erasing the experiences of many survivors around the world. Moreover, this erasure overlooks intersectional identities and the various contexts under which FGM/C happens.

From December 10-12, 2025⁴, Sahiyo, in partnership with Dr. Leyla Hussein, Global Advocacy Director of The Girl Generation, held a convening that embarked on a critical initiative to gather strategic insights on how to confront and dismantle anti-Blackness and racial hierarchies within the global movement to end FGM/C. Sahiyo’s recent research, stemming from the Critical Intersections research project, highlighted significant challenges, including racialized framings of FGM/C and the perpetuation of “severity hierarchies” that undermine solidarity and survivor support.

This convening built on the seven core themes identified in the Critical Intersections research project as shaping both FGM/C and resistance against it:



RELIGION



CLIMATE CHANGE



FEMINISM



LAW & POLICY



RACE & RACISM



BODILY AUTONOMY



QUEER GENDER & SEXUALITY

Convening participants agreed that without addressing these intersecting systems, anti-FGM/C work risks perpetuating further harm rather than dismantling it.

³ The time is now: End female genital mutilation/cutting, an urgent need for global response (2025) available at <https://equalitynow.org/resource/reports/the-time-is-now-end-female-genital-mutilation-cutting-an-urgent-need-for-global-response-2025-update/>

⁴ Reflections from London: Survivor-Experts on Healing, Solidarity, and the Future of the Anti-FGM/C Movement available at <https://sahiyo.org/sahiyo-blog/reflections-from-london-survivor-experts-on-healing-solidarity-and-the-future-of-the-anti-fgm-c-movement.html>

UNDERSTANDING POWER DYNAMICS: A FOUNDATIONAL FRAMEWORK

Before diving further into how racism manifests as structural violence within the FGM/C movement, understanding and discussing the influence of power dynamics and how it operates at the personal, organizational, and societal levels is essential⁵.

Power doesn't exist in a vacuum. It's shaped by systems of oppression that determine who is seen as credible, who gets access, and who gets to lead.

Race, gender, class, immigration status, disability, sexuality, and geography all play a role in how power is distributed. These identities don't operate separately, but they intersect, creating very different realities of who holds privilege and who is marginalized. Within anti-FGM/C work, this shows up in ways that mirror broader global inequities. Survivors from marginalized communities may hold deep lived expertise and insight, while still being denied decision-making power or institutional authority.

In practice, this looks like:

People from dominant groups (white, Western-based, institutionally credentialed) being more readily trusted, funded, and positioned as experts

People from marginalized communities (Black, Brown, immigrant, grassroots, survivor-led) having their expertise questioned and their access to power limited

Defining Power and Its Intersections

DEFINITION: Power is defined as having access to institutions and resources, the ability to exercise control, influence others, and reach decision-makers to achieve goals. Social identity —such as race, gender, class, and immigration status—directly shapes who has power and who does not.

PERSONAL POWER: Refers to an individual's self-awareness, confidence, and ability to influence their own life and the world around them. It is shaped by societal narratives and can be limited by systemic barriers.

⁵Navigating relationships and power dynamics in FGM/C work: Resource guide (2025) available at https://wafgmc.com/wp-content/uploads/2025/04/Updated-Navigating-Relationships-Power-Dynamics-in-FGM_C-Work-Resource-Guide.pdf

ORGANIZATIONAL POWER: Concerns how power is structured within institutions and groups, including who holds formal authority and how resources are allocated. It can either reinforce systemic inequalities or act as a catalyst for structural change.

SOCIETAL POWER: Encompasses the broad systems, policies, laws, and cultural norms that govern communities. While it dictates the distribution of other power types, it can be challenged by personal and organizational advocacy.

Manifestations of Power

Power can take different forms depending on how it is expressed and experienced. Four ways in which power is manifested include:

<p>POWER OVER</p> <p>A hierarchical and controlling form of power often associated with dominance, coercion, and oppression.</p>	<p>POWER WITHIN</p> <p>An internal sense of self-worth and purpose derived from recognizing one's own value.</p>
<p>POWER WITH</p> <p>Focuses on collaboration, solidarity, and shared decision-making.</p>	<p>POWER TO</p> <p>Relates to an individual's capacity to act, innovate, and create change.</p>

Power Dynamics in FGM/C Work

Power Over dynamics that impact FGM/C work can include:

- Fear of law enforcement and criminal profiling within impacted communities, often linked to immigration status.
- Hierarchical power of adults and authority figures over minors.
- Systemic power held by policymakers and government entities over the general public.
- Imbalances shaped by gender norms, patriarchy, and cultural or religious authority.
- Intersecting systems of oppression caused by racism, xenophobia, and class disparities.

The Power Over dynamics outlined above are the fertile ground in which racism and colonialist hierarchies thrive. The following section will detail how these foundational frameworks of power specifically give rise to and sustain racism as a form of structural violence, embedded in the anti-FGM/C movement's systems of funding, leadership, and narrative control.



RACISM AS STRUCTURAL VIOLENCE WITHIN ANTI-FGM/C MOVEMENTS

Black and Brown survivors consistently report being marginalized, attacked, or discredited whenever they challenge dominant narratives or power holders, particularly when those power holders are white women occupying leadership, donor-facing, or “gatekeeper” spaces. This narrative also hurts White survivors of FGM/C, who are often not believed when they disclose their survivor status since they don’t fit the typical assumptions of what a “real” survivor of FGM/C looks like. This harmful narrative hurts survivors globally. There is no singular “survivor” identity. Survivorship is shaped by diverse contexts, lived experiences, and structural inequities. Addressing racism as a form of structural violence requires challenging the tendency to generalize survivors into a uniform category and instead recognizing the complexity and intersectionality of their realities.

Racialized Framing, Language, and Erasure

Survivors consistently identified racialized framing as a significant form of harm. FGM/C is frequently narrated through a lens that associates violence with Black bodies and African communities, while minimizing or denying its presence in other communities around the world. This framing not only erases many survivors but also enables governments, donors, and institutions of power to distance themselves from responsibility.

Participants connected the racialized framing of FGM/C to broader double standards in how decisions about bodily autonomy are treated, noting that procedures on Black and Brown bodies are criminalized and pathologized, while similar interventions on White bodies are medicalized, normalized, or even sometimes celebrated.

“

A white friend and I once approached a plastic surgeon to ask about labiaplasty to see how the response might differ. Neither of us intended to go ahead with the procedure. I was told that if the surgeon performed it on me, we could both be arrested under the UK’s FGM Act. My friend, however, was simply asked which day and time she would like to schedule it. Two adult women asking the same question, yet treated under two completely different assumptions. The only difference between us was race. We cannot ignore conversations about race when addressing FGM and the ways Black and Brown bodies are regulated.

”

It is essential to foster critical conversations about how Black and Brown bodies are often constructed as deficient or deviant from an assumed White norm. Challenging these racialized perceptions is central to dismantling structural inequities within anti-FGM/C advocacy.

Language plays a central role in this process of perpetuating structural inequities. For instance, survivors from Asian communities explained how terms such as “sunat” or “circumcision” are often used to minimize violence and evade accountability, creating racialized distinctions such as “we don’t do what they do in Africa.” They emphasized that this linguistic minimization within these communities erodes solidarity, minimizes child sexual violence, and reinforces colonial hierarchies of harm.

“*Ever since I started speaking out about the harms of FGC, which is called khatna or khafz in my Indian community, practitioners have defended the cut by telling me, ‘We don’t do it the way it is done in Africa’, or ‘What they do is mutilation, but we do circumcision.’ This is obviously a very racist stance to take, gaslighting the experiences of many survivors in our community while allowing our religious leaders to propagate false distinctions between ‘mutilation’ and ‘circumcision’.*”

Law, Patriarchy, and Accountability

Legal responses to FGM/C were discussed by survivors with nuance, with participants emphasizing that laws can play a significant protective role for women and children. At the same time, survivors highlighted how systemic patriarchy often shapes the enforcement of these laws in ways that disproportionately punish women while shielding men from accountability. One survivor shared an example from The Gambia in which, following the death of an infant who had undergone FGM/C, the mother, grandmother, and cutter were arrested. The child’s father was neither questioned nor held responsible.

“*FGM is sustained by harmful gender norms and expectations that place the burden of compliance on women and girls. What we see in cases like The Gambia is that women are both the victims of FGM and the ones prosecuted, while men’s roles and responsibilities are ignored. Addressing FGM requires transforming these unequal power dynamics, ensuring that accountability does not fall solely on women, but that men are equally engaged and held responsible in dismantling the norms that perpetuate this practice.*”

This story was shared to illustrate how responsibility is frequently placed solely on women, reinforcing gendered power imbalances rather than addressing the roles of men and broader systems of power. Yet, fostering accountability in efforts to end FGM/C requires holding men equally responsible. This includes actively engaging men in open, community-based conversations about FGM/C and their role in challenging and transforming harmful norms.

Participants also stressed that education, long-term community transformation, and survivor-led accountability are more effective, sustainable, and less harmful systemic responses. Criminal law on its own does not end FGM/C. In many contexts, it increases fear and drives FGM/C underground, deepening the sense of taboo, stigma, and shame.

White Feminism and Harm

This analysis does not deny or invalidate that White women can be and are survivors of FGM/C. Rather, participants distinguished between survivor lived experiences and the harm caused when White women with no direct ties to affected communities occupy significant space in leadership, donor-facing, and gatekeeping roles within the movement. The following critiques focus on power, proximity, and accountability, not identity alone.

Convening participants described how some actors operate from a colonialist “savior” lens, positioning themselves as rescuers of racialized communities rather than collaborators who are accountable to them. In multiple global advocacy spaces, including UN convenings, White women without lived experience have continued to:

- Take up space in platforms meant for grassroots and survivor-led leadership
- Speak about communities rather than with them
- Police tone, language, and legitimacy of Black women’s advocacy and experiences
- Retaliate against Black and Brown women who name racism or challenge authority



These dynamics are not abstract and can often create real harm, including:

- Loss of funding for small, grassroots organizations
- Increased surveillance or backlash against community-based activists, including survivors
- Emotional and physical safety risks for survivors forced into hostile and unsafe spaces
- Retraumatization through public attacks, silencing, or gaslighting

Reductionist narratives often frame Black and Brown women's bodies as sites of saviorism, positioning them as passive subjects in need of rescue rather than as agents, leaders, and experts in their own right. Being required to remain in these spaces to secure funding or institutional legitimacy forces Black and Brown advocates to accept ongoing exposure to harm as a condition of participation. This in itself is a form of violence.

“White feminism has too often positioned itself as the rescuer of ‘other’ women, without interrogating the power it holds. When anti-FGM/C advocacy centers Western savior narratives rather than survivor leadership, it reproduces harm. Solidarity cannot be paternalistic. It must be accountable, intersectional and willing to confront racism within its own house.”

Funding, Compensation, and Racism

Funding inequity emerged as one of the most urgent and systemic issues discussed at the convening by participants. Large international NGOs frequently receive substantial grants while grassroots and survivor-led organizations based directly within impacted communities are positioned as beneficiaries rather than equals. They are often denied funding for administrative infrastructure and excluded from leadership and decision-making.

Survivors named the lack of compensation for survivor expertise as the “glamourization of suffering.” Lived experience is exploited for panels, reports, and donor engagement while survivors struggle to meet basic needs. Participants emphasized that compensation for expertise, funding for mental health and community well-being, and unrestricted, trust-based funding must be treated as non-negotiable.

Funding inequity is not accidental but racialized, as judgments about who can be trusted with funding reveal whose knowledge is recognized and whose is marginalized. Survivors further stressed the need to coordinate and collaborate strategically to influence donors, many of whom continue to operate with narrow, racialized narratives of FGM/C that shape harmful funding priorities and policies.

“

The sidelining of survivor-led grassroots organizations is a legacy of racist-colonial funding policies that have no place in the 21st century. As survivors who have put in the time to become experts on the nuances of FGM/C in our own communities, we are best placed to lead effective efforts to end the practice. Yet many funders require fiscal sponsors or corporate bank accounts that are not straightforward to obtain in our socio-political contexts. Fiscal sponsorship can take 10 to 15 percent of already small grants, significantly limiting our capacity. What we need are funders who trust us with the lion's share of resources and who are willing to work transparently and collaboratively, ensuring accountability without penalizing grassroots organizing.

”

Survivor Leadership, Tokenization, Safety, and Consent

A core conclusion of the convening was that true inclusion is not possible without a genuine sense of safety. Survivors who access international platforms frequently face tokenization, pressure to homogenize diverse regional experiences, expectation to perform trauma publicly, exposure to hostile and unsafe environments, and backlash from communities of origin.

“

I recall a time where I was asked to create a video message about my experience with FGM/C and call for an end to it. I said I was a survivor in a monotone voice, and I wanted to show my passion and strength in working to end it. After the cut, the feedback I received was that I looked too happy. They wanted me to look sad and angry, to show I was a victim. I refused - but the conversation made me feel icky and I did not work with them ever again.

”

These harms are deepened when survivors are placed in rooms with individuals or institutions that have perpetuated violence, racism, or silencing.

Consent also emerged as a foundational principle. Survivors must have the agency, safety, and structural support to say no to media, panels, research participation, and funding conditions at any time. Consensual engagement is central to a movement that is rooted in being ethical and anti-racist.

Participants discussed the urgent need for a global survivor network, mentorship systems linking together grassroots and larger organizations, and shared institutional knowledge to reduce isolation, burnout, and exploitation.

SEVEN CORE THEMES: A FRAMEWORK FOR ANTI-RACIST TRANSFORMATION

The seven core themes outlined below emerge from Sahiyo's Critical Intersections research project. These themes also illuminate how racism operates as a form of structured violence within anti-FGM/C work and demonstrate that racism does not function in isolation, but is embedded within legal frameworks, funding priorities, health systems, and narratives of consent and capacity. By understanding these themes as interconnected and nuanced, we can better understand how racial hierarchies are reproduced within policy, advocacy, and service provision and, in turn, identify pathways for systemic, anti-racist transformation.



Religion

Religious leaders are often positioned as gatekeepers of women's and children's bodies, in particular in patriarchal societies, in which religious teachings, sermons, or texts can be used to further "justify" FGM/C. Additionally, looking to religious leaders over survivor experts further siloes and reduces FGM/C as a "cultural practice," ignoring its intersections in racism, colonialism, sexism, and other marginalizations. Participants highlighted how overemphasis on engaging male-dominated religious authority often silences survivors, retraumatizes them, and shifts strategy toward negotiation rather than ending violence. Harm is further exacerbated by donor reluctance to challenge religious actors who they may deem essential to the movement to end FGM/C.

Key insight: Survivors should not be required to negotiate their bodies or safety with religious authorities.



Climate Change

Participants discussed the often-ignored links between extractive development, environmental harm, and the complex ethics of accepting funding from donors who have caused harm. Climate justice models, such as community-led hubs, collectives, and participatory funding⁶, were also identified as potential templates for more ethical and sustainable FGM/C movement building.

Key insight: Funding sources and development models must be examined for environmental and community harm.



Feminism

Feminism was named a critical framework in helping survivors identify FGM/C as a form of sexual and gender-based violence. At the same time, the concepts of “Western” and “White” feminism are frequently weaponized to discredit survivors and feminist resistance, particularly in racialized and religious contexts.

Key insight: Intersectional feminism is not foreign interference or a form of neocolonialism; it is a tool for naming harm, reclaiming bodily autonomy, and building collective resistance to dismantle interlinked systems of oppression.



Race & Racism

FGM/C is often framed as a “Black,” African, or immigrant issue, erasing the experiences of survivors from all over the globe. Racial double standards criminalize Black and Brown bodies while medicalizing or excusing similar practices (such as labiaplasty) on white bodies.

Key insight: Racism structures who is protected, punished, believed, or erased.



Law & Policy

Focus on criminalization alone was critiqued as sometimes harmful. Laws often punish mothers and grandmothers while leaving male perpetrators and power holders within families and communities untouched.

Key insight: Legal responses must prioritize child protection and survivor safety without reinforcing racialized state violence.

⁶ Community-led resilience hubs are locally governed spaces that coordinate resources, mutual aid, and emergency response to strengthen climate preparedness and sustainable community resilience. Collectives refer to collaborative, cross-sector partnerships in which community members, organizations, and institutions share decision-making authority to address systemic challenges. Participatory funding is a funding model in which impacted communities directly shape how resources are allocated, shifting power from traditional donors to those directly affected by the issue.



Queer Gender & Sexuality

The FGM/C movement has historically centered cisgender women, marginalizing LGBTQI+ and gender-expansive survivors. Queer and trans survivors face compounded stigma, are accused of “promoting homosexuality,” and are often forced to choose between survivor spaces and gender-affirming care. Anti-rights movements are actively linking anti-LGBTQI+ agendas with pro-FGM/C rhetoric. On the other hand, anti-trans movements in the United States are conflating FGM/C with lifesaving gender-affirming care for trans and nonbinary individuals while diminishing existing resources for FGM/C survivors.

Key insight: Ending FGM/C cannot be separated from struggles for gender equity, sexual autonomy, and LGBTQI+ rights.



Bodily Autonomy

Participants emphasized that FGM/C is oftentimes specifically violence against children, not just “women’s issues.” Survivors challenged narratives that reduce them to tragic symbols or demand constant public disclosure. Bodily autonomy includes the right to consent, refusal of medical/surgical interventions, access to pleasure, and defining one’s own healing journey.

Key insight: Bodily autonomy must be centered across prevention, care, language, and survivor engagement and leadership.

RECOMMENDATIONS

Adopt Survivor-Led Governance

Survivors, especially Black, Brown, LGBTQI+, and grassroots leaders, must hold decision-making power, not just advisory roles.

Establish Accountability Mechanisms

Institutions must implement clear consequences for racist harm, including exclusionary or abusive behavior by individuals in positions of power.

Transform Funding Models

Shift toward trust-based, participatory funding that directly resources grassroots and survivor-led organizations within impacted communities and includes well-being costs.

Redefine Expertise

Lived experience and community leadership must be recognized as expertise that is equivalent to academic and institutional credentials.

Guarantee Survivor Safety and Consent

No survivor should be required to share space with individuals or institutions that perpetuate harm as a condition of funding, legitimacy, or professionalism.

CONCLUSION

Racism within anti-FGM/C movements is not incidental; it is systemic. It manifests through funding systems, leadership hierarchies, media narratives, legal enforcement, and decisions about whose expertise is valued and whose is dismissed. It shapes who is believed, who is protected, who is punished, and who is erased.

As outlined throughout this position paper, racialized framing negatively impacts global understanding of FGM/C and weakens solidarity. Colonial power dynamics and white saviorism undermine grassroots leadership. Funding inequities exploit survivor labor while withholding sustainable, meaningful support. Criminal legal responses, when detached from community-led accountability, can reinforce racialized state violence. Tokenization and unsafe advocacy spaces compromise survivor autonomy and well-being.

The seven core themes identified through the Critical Intersections Research Project demonstrate that these harms are interconnected. Religion, climate justice, feminism, race, law, queer identity, and bodily autonomy are overlapping systems through which systemic racism is created and allowed to persist. Ending FGM/C cannot be separated from dismantling racial hierarchies and redistributing power within the movement itself.

A decolonial, survivor-led approach requires more than just representation. It demands measurable shifts in decision-making power, funding control, definitions of expertise, and accountability mechanisms. It requires centering safety, consent, and collective care not only in programming, but in organization of the movement.

This paper is both a call to action and a commitment to continued reckoning. Ending FGM/C with integrity requires transforming the structures that shape the movement. Only through anti-racist, survivor-led leadership can the movement build a future rooted in dignity, equity, and justice.

Until it is acknowledged and dismantled as a form of violence, efforts to end FGM/C will remain incomplete.

ACKNOWLEDGEMENTS

This position paper is made possible by the dedicated advocates and survivors who provided us with their time, invaluable expertise, and experiences in their interviews and convenings. Also thank you to Wallace Global Fund for funding this project.

Special thanks to Jess Ayden from Healing Equity United for their valuable input and guidance in uplifting how power dynamics play a role in racial structures and social movements.

Lastly, we would like to acknowledge the countless hours dedicated to this project by our group of Sahiyo staff and volunteers, and valuable project partners.

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