sahiyo

United Against Female Genital Cutting

Examining Intersections Between FGM/C and Other Social Oppressions:

A Research Project Brief



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Introduction

About the Critical Intersections Project

Founded in 2015, Sahiyo is an advocacy collective with the mission to empower communities to end female genital mutilation (FGM/C) and create positive social change through dialogue, education, and collaboration. In 2021, Sahiyo hosted the *"Critical Intersections: Anti-Racism and Female Genital Cutting (FGC)" webinar*, which led to a multi-part research initiative aimed at better understanding how FGM/C intersects with other social oppressions and social movements. The research project focused on exploring key questions, including:

1. How has systemic racism delayed substantial change on this issue of meeting progress toward achieving the U.N. Sustainable Development Goal (SDG) to end FGM/C by 2030?
2. Are there possible connections to other movements, such as the “MeToo” and “Black Lives Matter” movements, that can come into play?
3. How do multiple, intersecting systems of oppression shape the experience of FGM/C survivors and the effectiveness of prevention and advocacy efforts?

The Critical Intersections Research Project is a three-part series of reports aimed at understanding the intersectional components contributing to FGM/C's prevalence among global communities. This body of work also provides insights into creating effective cross-collaborative movements and support mechanisms for survivors.

About the Research Brief

To consolidate the three reports and make the findings more accessible, we have compiled this brief. The brief also includes recommendations with suggested action items for implementing the findings.

Intended Audience

The findings from this research project are intended for those working in the movement to end FGM/C, as well as policymakers, community organizations, and scholars working at the intersection of gender-based violence, racial justice, and human rights. By making these research findings accessible, we aim to provide valuable insights that inform advocacy efforts, shape policy interventions, and encourage cross-sector collaboration in the work to end FGM/C.



FGM/C & Intersectionality

Female genital mutilation/cutting (FGM/C) is recognized as a pressing human rights violation affecting over 280 million women and girls globally, and is practiced in over 94 countries[1]. The United Nations Sustainable Development Goals (SDGs) explicitly include "Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation" in SDG 5.3 as a focal point in achieving gender equality.

Survivors of FGM/C face complex combinations of mental and social consequences, which emphasizes the necessity of an intersectional analysis. Intersectionality, a concept initially conceived by the Combahee River Collective, is an analytical framework that highlights how overlapping systems of oppression—including racial, sexual, and patriarchal discrimination—amplify marginalization. For FGM/C-impacted communities, these intersecting oppressions operate as social determinants of health, underscoring the need for an intersectional approach to support survivors and prevent FGM/C by recognizing their unique challenges.



[1]At the time of compiling the original reports, UNICEF figures indicated FGM/C as a human rights violation affecting over 200 million women and girls globally. At the time of proposing this brief, UNICEF came out with updated figures that FGM/C impacts over 280 million women and girls globally.

There needs to be attention to intersectional identities and relationships that continue to threaten FGM/C-affected communities along the lines of migration, race, ethnicity, gender, sexuality, religion, class, age, etc.

- Advocate in FGM/C prevention and LGBTQIA+ rights; North America, Report 3, Page 24

Phase I - Scoping Review

As the first initiative of this research project, Sahiyo compiled an extensive body of works on the topic of oppressions intersecting with FGM/C, including peer-reviewed literature, editorials, opinion pieces, reviews, and social media communications; completed a systematic review of existing scholarship on these topics; and produced a paper exploring connections amongst the material and deriving relevant themes. The review is organized around seven core themes that intersect with FGM/C: Religion, Climate Change, Feminism, Race and Racism, Law and Policy, Queer Gender and Sexuality, and Bodily Autonomy. These themes serve as the basis for further exploration in Phases II & III of the project.

Religion

Religion maintains a complex intersection with FGM/C, particularly exemplified through the misconception that FGM/C is primarily an Islamic practice - a harmful narrative that has been proven to fuel Islamophobia. Despite the reality that FGM/C predates Abrahamic religions, it persists among some religious communities, pointing to an overlap of religious beliefs with social norms, with FGM/C sometimes being supported by controversial religious edicts. Besides Islam, other major world religions, including certain Jewish and Christian groups, have encouraged FGM/C as a religious practice. This intersection can lead to layered stigmatized experiences, including Islamophobia from outside the community and potential ostracization from within.

Race

Several racial dimensions surround FGM/C; for instance, the misconception that Type III FGM/C, the most physically invasive form of FGM/C, exclusively occurs in Africa or that FGM/C is an "African" practice, while Type I and II are the forms found in Asia and are less harmful, or that they should not be considered FGM/C but circumcision and less harmful.

These beliefs have detrimentally impacted funding for anti-FGM/C initiatives in contexts outside of the African continent. Though all forms of FGM/C are dangerous physically, psychologically, and sexually, the unequal distribution of attention and funding globally to address FGM/C fuels ideas that some forms are more damaging than others.

Overall, racial narratives surrounding FGM/C can be seen as influenced by colonial and Western hegemonies, a point further attested to by the prevalence of FGM/C among white Christian communities in the U.S. and exposing the double standard where FGM/C is deemed "barbaric" for communities of color, yet similar genital alterations, female genital cosmetic surgeries (FGCS), are accepted medical procedures in Western societies and labeled as a personal choice or aesthetic enhancement.

This is especially evident in how female genital cosmetic surgery, which is still a form of FGM/C, reinforces negative racial stereotypes, promoting the "othering" of some survivors and communities who did not fit the “image of who is a survivor” and alienating them further from broader movements of gender equity and reproductive justice.

Bodily Autonomy

Bodily autonomy is defined as having the agency to make decisions about one's own body without fear of someone else's coercion or violence. FGM/C survivors have been denied this agency, experiencing abuse and social control by those in power in their communities. While movements, like #MeToo, have created a space to discuss themes in sexual abuse and harassment openly, they have not always been inclusive of non-Western survivors. The perception of FGM/C as an "exotic" ritual isolates the physical and psychological strain survivors endure. Consequently, FGM/C survivors struggle to navigate healthcare spaces and find trauma-informed care to receive the comprehensive support they need.

"I've seen the issue of cutting be dismissed because it isn't perceived as something that affects white women."

- Report 3, Page 25

Queer Gender & Sexuality

LGBTQ+ survivors of FGM/C face a two-fold marginalization, as the dominant anti-FGM/C narrative often overlooks those who don't conform to cisgender-heteronormative femininity. Many non-binary survivors navigate complex identity perceptions while seeking healing, which underscores a need for the anti-FGM/C movement to create inclusive spaces for Queer journeys. Furthermore, problematic legislation, such as that occurring in the U.S., that conflates FGM/C with gender-affirming care fails to acknowledge the fundamental differences between gender-affirming care and FGM/C: consent, as well as the health benefits of gender-affirming procedures compared to the lack thereof for FGM/C, which is a culturally sanctioned abuse.

Feminism

Feminism, by its definition, calls for equality for all sexes; the question of how equality is achieved is nuanced across different communities, and FGM/C complicates this. Some women within impacted communities act as "accommodators," defending FGM/C as a source of empowerment and social acceptance, even as others "resist" it, creating an interesting dynamic where both sides may claim to practice feminism. This discussion also critiques Western feminism's dominant discourse on FGM/C, which often portrays affected women as thoroughly oppressed victims, a view that postcolonial African feminist scholars have deemed patronizing. Instead, these scholars advocate for understanding FGM/C as a symptom of broader socioeconomic injustices and emphasize an intersectional approach that centers the lived experiences of FGM/C-affected women. This perspective moves away from Western "saviorism" and promotes cultural relativism, allowing communities to determine how to end FGM/C while honoring their culture and ensuring the well-being of future generations.



"...you cannot tackle or address FGM if you are not talking about race, gender, and sexuality, because those three are quite key, very key to this conversation."

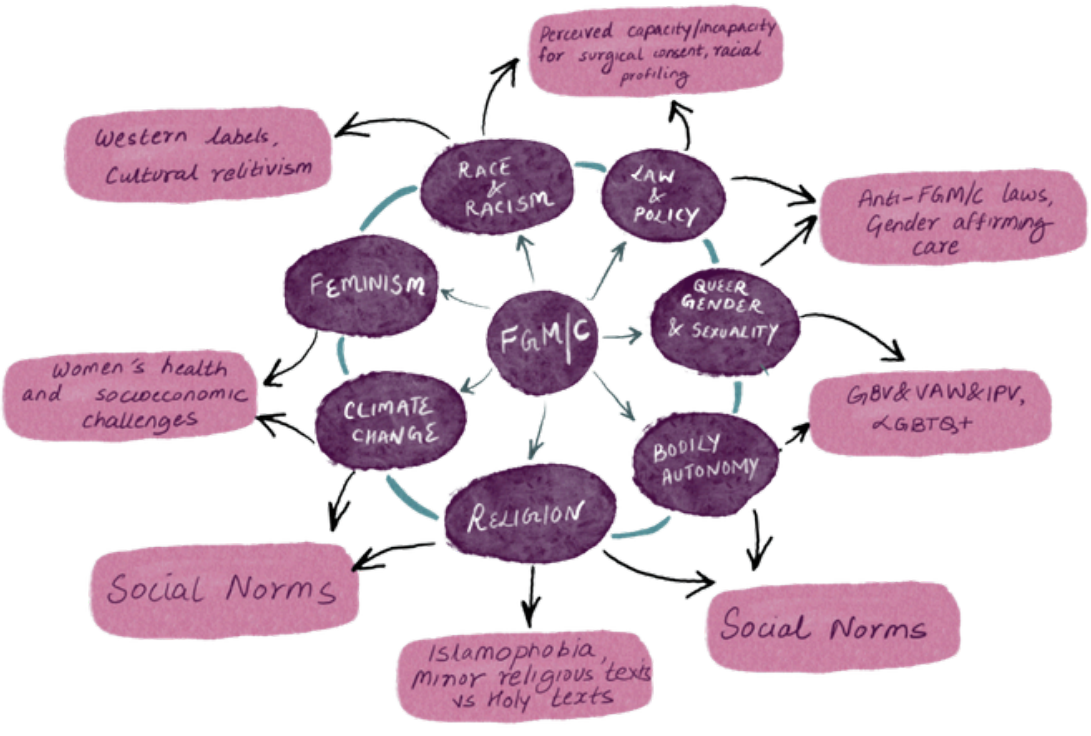
- Leyla Hussein,
Report 1, Page 12

Law & Policy

Legal intervention as a tool to end FGM/C can be supportive but also often produces mixed outcomes. Research on FGM/C laws reveals a debate. Criminalization may push the practice underground, making it more dangerous and more challenging to prosecute; however, simultaneous multi-level legislative measures are seen as necessary for ending FGM/C. Further research shows that legal sanctions disproportionately affect women, mirroring other forms of gender-based violence. Additionally, the involvement of law enforcement can have negative consequences, such as leading to the racial profiling of communities and persons involved.

Climate Change

Emerging literature identifies a link between climate change and the way social, environmental, and economic factors are exacerbated, and how these factors influence social norms like FGM/C within the most vulnerable populations. In marginalized communities heavily impacted by climate change, economic instability drives the commodification of FGM/C, promotes more child marriages due to access to dowry for girls, limits access to education, and overall, the inability to achieve social mobility. This results in girls being denied education, FGM/C practitioners monetizing the practice for their livelihoods, and an increase in child marriages as families seek survival through the economic support gained from girls' dowries.



Phase II & III - Original Research

At the onset of the project, an Advisory Committee was established to provide oversight and ensure the culturally competent framing of research and the review of data across all phases of the project.

During Phase II, a mixed-methods survey was distributed to over 100 experts, advocates, and organizations working in the movement to end FGM/C or related to adjacent social justice spheres. Survey data were analyzed using SPSS, along with qualitative coding of open-ended responses.

For Phase III, 29 semi-formal interviews were conducted with target individuals working in the FGM/C field or adjacent fields. The interview transcripts underwent qualitative coding, and a working group was established to jointly identify key themes that would support the development of a codebook for data analysis.

Participants in both parts II & III represented a broad spectrum of geographic regions, disciplines, and demographic identities.

Findings

The seven core themes from Phase I (Scoping Review)—religion, climate change, feminism, race and racism, law and policy, queer gender and sexuality, and bodily autonomy—provide a foundational framework for understanding the empirical analysis findings in Phase II & III. These report findings both corroborate the challenges and emerging opportunities the FGM/C movement has in fostering cross-collaboration and addressing intersectionality more effectively, as participants frequently discussed the siloed nature of the anti-FGM/C movement. A consensus also emerged on the necessity for cross-collaboration between FGM/C institutions and across other social justice movements to address intersectionality in FGM/C prevention and legislation.

Systemic discrimination remains a significant barrier to providing relief for FGM/C survivors. FGM/C is often viewed as an "African issue," limiting access to culturally competent care and aid among non-African survivors.

Xenophobic views were also cited as deterrents for many migrants from reporting FGM/C both within their countries of origin and in diaspora contexts. Within many countries, anti-FGM/C efforts are seen as culturally imperialist or a form of colonial imperialism, leading to broad distrust of aid received by Western nations in many geographies.

Religious and patriarchal structures reinforce practicing FGM/C, thereby promoting control over women's bodies, sexuality, and roles in society. Genderqueer individuals face compounded challenges due to their marginalized gender identities, with limited institutional support and means of aid for survivors. As a consequence, survivors may face stigma, child marriage, or exclusion in their own communities. While advocacy is shifting more toward empowerment and centering survivor voices, there is still a need for more inclusive data collection for better representation of survivors when crafting anti-FGM/C initiatives.

From the survey's data, four main opportunities were identified:



1. Implementing collaborative community programming
2. Creating organizational partnerships
3. Cross-movement networking and education
4. Joint social media and public awareness campaigns

Several participants noted the need and value of broadening FGM/C into the discussion of feminist and GBV movements to increase FGM/C's salience. This included integrating the FGM/C movement within other social justice movements related to bodily autonomy, sexuality, sexual violence, and domestic violence, to name a few. Specifically, participants acknowledged the potential in aligning initiatives such as #MeToo and Black Lives Matter as a means to collaborate and bring attention to rights related to bodily autonomy and gender equity. Participants emphasized cross-collaboration as a way to elevate historically excluded groups as well, such as LGBTQIA+ and Intersex survivors, while also addressing the racialization of FGM/C and underscoring its global nature. Opportunities for cross-collaboration were suggested, including shared programming, education campaigns, and cross-sector partnerships. Despite these findings, the data found limited information on concrete examples of intersectional cross-collaboration between the anti-FGM/C movement and other social justice movements.

I realized that female genital mutilation is not just about maintaining sexual abstinence but also ensuring that I conform to cis-heteronormative standards of femininity

- Dena Igusti,
Report 1, Page 15

Limitations

Both Phase II and III demonstrated nuanced perspectives on gaps in anti-FGM/C legislation, and these limitations must still be addressed. Both studies used smaller sample sizes, with the majority of participants being cisgender Asian women based in North America, and fewer voices represented from Black communities, genderqueer survivors, and countries of high FGM/C prevalence. This demographic and geographic skew limits the generalizability of the results across all populations. Additionally, some intersectional themes were less explored in these original studies due to limited participant availability.

Recommendations

In the culmination of the report, the following recommendations were suggested as potential next steps in addressing the intersectionality of FGM/C and how to incorporate them in advocacy initiatives:

1. Coordinate with social service sectors across various social justice issues to **improve support and resources for survivors.**
2. **Improve language and framing of FGM/C** to limit racialization and/or exclusion of marginalized communities in terms of who is impacted by FGM/C.
3. Increase **education on how FGM/C intersects with other social justice issues** amongst anti-FGM/C organizations and practicing communities.
4. Implement **more diverse and equitable approaches to data collection, analysis, and dissemination.**



Recommendations with Example Action Steps

The following are the recommendations made from the culmination of the Critical Intersections Research Project, along with examples of how to implement some recommended next steps. Please note that this is not an exhaustive list of examples:

1 **Coordinate with social service sectors across various social justice issues** to improve support and resources for survivors.

<u>Example Action:</u> Build partnerships with racial justice organizations.

Collaboration with racial justice organizations to improve access to social services can create culturally competent and holistic approaches that support two goals: to mitigate challenges in acquiring survivor support, and injustice caused by racism.



For example, nearly all participants who mentioned law enforcement in their interviews cited disproportional number of negative interactions amongst police and communities impacted by FGM/C, often communities of color, around the globe. This reality necessitates creating a coordinated care framework with racial justice tenets built into its foundation, particularly in developing support systems for FGM/C impacted communities that are Black, Indigenous, and People of Color (BIPOC).

<u>Example Action:</u> Build partnerships with organizations supporting LGBTQIA+ communities.

An education curriculum from LGBTQIA+ focused organization could support an understanding of how to address the needs of FGM/C survivors who identify as LGBTQIA+. Our research indicates that the FGM/C movement has historically focused its programming around cisgendered women and girl survivors of FGM/C, thus excluding LGBTQIA+ survivors.





<u>Example Action:</u> Broaden the focus of FGM/C into wider feminist and GBV movements.

Organizations focused on ending more widely known forms of GBV (e.g. domestic violence and sexual assault) can utilize their trauma-informed skills to support survivors of FGM/C via their programs (e.g. crisis lines, support groups, counseling) and locate resources for those at-risk of FGM/C. This particular partnership could also provide access to shelters, job resources, and more for those affected by FGM/C at their most vulnerable.

2 **Improve language and framing of FGM/C** to limit racialization and/or exclusion of marginalized communities in terms of who is impacted by FGM/C

<u>Example Action:</u> Uplift that FGM/C is not exclusive to one particular faith or community.



Given the strong connection between social norms and religion, providing culturally competent services that acknowledge the role religion plays in a survivor's or community member's life is essential. Particularly important, because refusing to undergo FGM/C or speaking out against it can lead to social ostracism.

Therefore, building partnerships with diverse religious affiliations that support ending FGM/C can ensure all affected populations have access to empathetic communal assistance and spiritual guidance if they desire it.

<u>Action Item:</u> Expand framing of FGM/C beyond the current cisgender and heteronormative standards to better support LGBTQIA+ FGM/C survivors.

Recognizing the parallels between IGM and FGM/C—such as the lack of consent, violations of bodily autonomy and child rights, cisgender and heteronormative constraints, and the resulting trauma—could help build a stronger, more inclusive movement against medically unnecessary harm to children.

3 **Increase education on how FGM/C intersects with other social justice issues** amongst anti-FGM/C organizations and practicing communities.

<u>Action Item:</u> Partner with learning institutions to build curriculum on FGM/C.

Training educators on FGM/C and integrating these teachings into school curricula reinforces the understanding that harmful practices like FGM/C are a global issue.

This approach ensures that all children and youth—not just those considered "at-risk"—along with their guardians, gain essential knowledge about prevention, available resources, and support systems. Further, this type of curriculum can teach children about bodily consent and autonomy, which in turn builds potential collaboration between the movement to end FGM/C and bodily autonomy movements like #MeToo, SRH, and anti-GBV.

<u>Action item:</u> Provide education on gender-affirming care for youth to denounce misinformation about FGM/C.

Conflating the human rights abuse of FGM/C with medically necessary care for a marginalized community promotes transphobic rhetoric, and this type of discrimination isolates LGBTQIA+ survivors of FGM/C. Providing context on what FGM/C is and isn't can be helpful in ensuring FGM/C is not weaponized to further marginalize other vulnerable communities.



4 Implement **more diverse and equitable approaches to data collection, analysis, and dissemination.**

<u>Action Item:</u> Expand ways in which data are collected, including informal methods.



Expanding data collection to include accessible, informal methods such as storytelling enables a more inclusive understanding of FGM/C's impact. Informal methods accommodate diverse literacy levels, cultural contexts, and languages, making participation easier for those who may feel uncomfortable or alienated by formal surveys or interviews.

Storytelling, for instance, allows survivors to express experiences in their own words, capturing the nuanced, emotional, and context-specific aspects often missed by structured methods and may address power dynamics at play in more traditional research/interviewee positions.

<u>Action Item:</u> Include FGM/C survivors of various demographic backgrounds within research on the topic.

Research should explore survivors of FGM/C and their intersectional identities (as survivors come from at least 92 countries around the globe) by seeking to be inclusive of survivors and FGM/C impacted community members coming from various backgrounds (Equality Now et al., 2020). This can include:

1. *Making data collection tools more accessible by providing multiple language options.*

2. *Asking demographic questions about economic status, educational level, sexual and gender orientations, race/ethnicity, geographic location, religion, and more.*

3. *Involving members of FGM/C impacted communities as data collectors and reviewers of the research before publication (as Sahiyo U.S. incorporated with our Advisory Committee for this research project) to ensure the data collection, analysis, and dissemination is sensitive to and relevant for those who the research is about.*

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