



## Female Genital Mutilation (FGM) in Africa and Around the World

By Mr. Cruz Melchor EYA NCHAMA

### Introduction

Definition: There are three forms of FGM:

1. Excision: The ablation of the prepuce and hood of the clitoris and the labia minora (clitoridectomy).
2. Infibulation or pharaonic circumcision: The complete ablation of the clitoris, the labia minora and the labia majora at the vaginal opening. The opening is then sewn together leaving only a small opening for menstrual flow and urine.
3. Introcision: This consists of widening the vaginal opening by tearing it downward using three fingers bound with opossum string.

Origins: The origins of FGM date back to antiquity, predating Christianity and Islam. Herodotus (482-425 B.C.) informs us, on page 104 of his book Inquiries, that FGM already existed in the 5th century before the Common Era, and was practiced by the Egyptians, the Phoenicians, the Hittites and the Ethiopians. However Herodotus did not know who started the practices.

The famous Egyptologist Cheick Anta Diop (1923-1986) stated that FGM was Egyptian in origin.

Reasons for FGM: There are no valid reasons for the practice of FGM. Each ethnic group or region gives its own:

- a. Women who are not excised are considered to be impure, dirty and incapable of mastering their sexual impulses.
- b. The belief that children are born with elements from both sexes: the male prepuce is perceived as a feminine element and the female clitoris is considered to be a masculine element. These elements are therefore removed at puberty, so that the sexual identity of the individual is free of any ambiguity.
- c. The clitoris can poison an infant during childbirth.
- d. Men refuse to marry non-excised women because they will cheat on their husbands; because the clitoris holds the penis prisoner during sexual relations; and because penetration is impossible with such women.
- e. The preservation of feminine virginity; sexual control of women; validation of maternal identity to the detriment of erotic identity; submission of women, first to their parents and later to their husband.

Since ancient times, FGM has been synonymous with controlling the female body by patriarchal society: the control of women's sexuality by men. This phenomenon has been seen on all continents. For example, during the Crusades of the Middle Ages (11-13th centuries) men invented the chastity belt, a belt fitted with a lock intended to prevent sexual relations and masturbation. Lords who left for the Crusades, concerned about their wives' conduct in their absence, locked them in metal belts to prevent any sexual relations.

Christian religions identify the sin of Onan with masturbation and teach that he was killed by God for it. Onan is a biblical person in the book of Genesis, the second son of Judah and younger brother to Er. According to the customs of the levirate, Onan was to take Er's wife Tamar as his own wife upon his brother's death, so that a child of their union would continue Er's line, as he did not have any children. Onan refused to make a child with Tamar and practiced coitus interruptus during sexual relations. By behaving thus, Onan violated the law of the levirate, and violated the Catholic concept of life as beginning with the mixing of sperm and ova. He wanted to maintain at all costs his right of primogeniture after the death of his older brother. The Catholic church clearly states that any sexual act not intended for procreation is a sin. Saint Jerome (340-420 Common Era) wrote that a pious bachelor was much better than a pious husband.

The sin of Onan began to be associated with masturbation at the beginning of the 18th century. In 1712, John Martin published a work in London entitled "Onania or the Heinous sin of self pollution". In 1760, Doctor Samuel-Auguste Tissot (Grancy, 20 March 1728 - Lausanne, 13 June 1797) published a work in Lausanne entitled "Onanism" (reissued in 1991 by the publisher La différence in Paris), in which he offers a "scientific" caution to Martin's book: i.e., the consequences of masturbation include languor, dizziness, melancholia, nervous disorders, stupidity, sexual impotence and even death.

In 1865, Doctor Isaac Baker Brown (1812-1873) published a work entitled "On the Curability of Certain Forms of Insanity, Epilepsy, Catalepsy and Hysteria in Females", in which he recommends the practice of female genital mutilation for the treatment of the diseases mentioned in his work. In other words, masturbation causes epilepsy, hysteria, etc. in women, and to treat these diseases the surgical procedure of clitoridectomy is needed. Doctor Brown describes how he successfully operated for the first time in 1854 on a patient who was his own sister. As we see, clitoridectomy was an integral part of European medicine during the 18th and 19th centuries. For example, a French doctor, Pierre Dionis, in his work "Cours d'opérations de chirurgie, démontrées au jardin royal à Paris" [*Surgical operation course demonstrated in the royal garden in Paris*] (published by Laurent d'Houry Paris 1707) presents the instruments that he used for clitoridectomy: a knife and a clamp.

A lively controversy ensued around the theories put forth by these authors. The positions taken by partisans and opponents were published in the scientific reviews of the time. Fortunately, at the end of the 19th century, these theories were rejected and the authors were repudiated by both public and scientific opinion.

## I. Female Genital Mutilation in Africa

### The geography of excision and infibulation in Africa (1)

<b>Country</b>	<b>Capital</b>	<b>Excision</b> (Percent of the female population)	<b>Infibulation</b> (Percent of the female population)
Algeria	Algiers	No	No
Angola	Luanda	No	No
Benin (2)	Porto-Novo	Yes 29%	No
Botswana	Gaberone	No	No
Burkina-Faso (3)	Uagadugu	Yes 77%	No
Burundi	Bujumbura	No	No
Cameroon (4)	Yaunde	Yes 20%	No
Cape Verde	Praia	No	No
Central African Rep (5)	Bangui	Yes 36%	No
Chad (6)	N'Djamena	Yes 55%	Yes 5%
Comoros	Moroni	No	No
Congo	Brazzaville	No	No
Congo, Democratic Republic of (7)	Kinshasa	Yes 5%	No
Côte d'Ivoire (8)	Yamussukro	Yes 40%	No
Djibouti (9)	Djibouti	Yes 98%	Yes 90%
Egypt (10)	Cairo	Yes 97%	Yes 70%
Equatorial Guinea	Malabo	No	No

<b>Country</b>	<b>Capital</b>	<b>Excision</b> (Percent of the female population)	<b>Infibulation</b> (Percent of the female population)
Eritrea (11)	Asmara	Yes 88%	Yes 88%
Ethiopia (12)	Addis-Abeba	Yes 85%	Yes 80%
Gabon	Libreville	No	No
Gambia (13)	Banjul	Yes 80%	No
Ghana (14)	Accra	Yes 10%	No
Guinea (15)	Conakry	Yes 89%	Yes 20%
Guinea-Bissau (16)	Bissau	Yes 30%	No
Kenya (17)	Nairobi	Yes 32%	No
Lesotho	Maseru	No	No
Liberia (18)	Monrovia	Yes 60%	No
Libya	Tripoli	No	No
Madagascar	Antananarivo	No	No
Malawi	Lilongwe	No	No
Mali (19)	Bamako	Yes 92%	Yes 50%
Mauritania (20)	Nouakchott	Yes 71 %	No
Mauritius	Port-Louis	No	No
Morocco	Rabat	No	No
Mozambique	Maputo	No	No
Namibia	Windhoek	No	No
Niger (21)	Niamey	Yes 20%	Yes 5%
Nigeria (22)	Abuja	Yes 19%	Yes 5%

<b>Country</b>	<b>Capital</b>	<b>Excision</b> (Percent of the female population)	<b>Infibulation</b> (Percent of the female population)
Rwanda	Kigali	No	No
São Tome and prncipe	São Tome	No	No
Senegal (23)	Dakar	Yes 28%	Yes 10%
Seychelles	Victoria	No	No
Sierra Leone (24)	Freetown	Yes 85%	No
Somalia (25)	Mogadishu	Yes 98%	Yes 95%
South Africa	Pretoria	No	No
Sudan (26)	Khartoum	Yes 90%	Yes 90%
Swaziland	Mbabane	No	No
Tanzania (27)	Dodoma	Yes 10%	No
Togo (28)	Lome	Yes 30%	No
Tunisia	Tunis	No	No
Uganda (29)	Kampala	Yes 10%	No
Western Sahara	Aiùn	No information	No information
Zambia	Lusaka	No	No
Zimbabwe	Harare	No	No

**(1) These practices have been prohibited in Africa:**

- See Article 18 and Article 29 paragraph 7 of the African Charter on Human and Peoples' Rights, adopted by the eighteenth Conference of the Heads of State and Government of the Organization of African Unity, Nairobi (Kenya), on 27 June 1981 and entered into force on 21 October 1986.

- See also Article 1 paragraph 3 and Article 21 of the African Charter on the Rights and Welfare of the Child, adopted by the twenty-sixth Conference of the Heads of State and Government of the Organization of African Unity, Addis-Ababa (Ethiopia), on 11 July 1990 and entered into force on 29 November 1999.
- Finally, see Article 5 of the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa, adopted by the 2nd Ordinary Session of the Assembly of the Union, Maputo (Mozambique), on 11 July 2003 and entered into force on 25 November 2005.

Also for examination, at the international level, among others:

- Convention on the Elimination of All Forms of Discrimination against Women adopted and opened for signature, ratification and accession by the General Assembly in Resolution 34/180 of 18 December 1979; entered into force on 3 September 1981, in accordance with the provisions of Article 27.
- Convention on the Rights of the Child adopted and opened for signature, ratification and accession by the General Assembly in Resolution 44/25 of 20 November 1989; entered into force on 2 September 1990, in accordance with Article 49.

Despite these conventions at the African and international level, FGM is still practiced in Africa; this is why the authorities of the African Union and activists against the practice are glad that other countries are helping them combat this scourge.

**(2) Benin:** A specific law against FGM was adopted on 3 March 2003. At the continental level, country acceded: on 25 February 1986, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); on 30 May 1997, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); and on 13 October 2005, to the protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, on 12 March 1992 Benin acceded to the United Nations convention on the elimination of All Forms of Discrimination against women (New York, 18 December 1979); it also acceded, on 3 August 1990, to the Convention on the Rights of the Child (New York, 20 November 1989).

In Benin, the ethnic majority, the Fon, do not practice FGM. However, the Baatomu, Buriba, Nago, Yoruba and Waama do practice FGM.

Since 1982, the national section of the Inter-African Committee has been conducting a good awareness campaign against FGM.

**(3) Burkina Faso:** A law against FGM was proclaimed on 13 November 1996. Previously, in 1990, a presidential decree establishing a National Committee against FGM was created, providing for fines against persons known to be guilty of the excision of young girls or women. This Committee is the national branch of the Inter-African Committee. The National Committee created forty-five provincial committees to fight against the practice of FGM. At the continental level, the country acceded: on 21 September 1984, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); on 10 July 1992, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); and to Protocol to the African Charter on

Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level the country acceded, on 14 October 1987, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 31 August 1990, to the Convention on the Rights of the Child (New York, 20 November 1989). Burkina Faso is currently battling against FGM; emergency telephone numbers, "SOS excision", have been created across the country to inform the appropriate services on the preparation of sessions against excision; the press and television offer commentary on trials of the accused (excisers, intermediary relatives of the girls); those convicted are subject to prison time and heavy fines; and the reconversion of excisers to other paid work is provided.

FGM is practiced by these ethnic groups: the Mossi (majority in the country), Gourmantché, Sénoufo, Peulh, Kasaboro, Gonin and Tourha.

**(4) Cameroon:** There is no specific law against FGM. Thanks to the testimony of an excised women from Mamfé (southwest) to the Cameroon Parliament on 29 June 2006, the women deputies decided to draw up a proposal against FGM; however, this law has not yet been adopted. At the continental level, Cameroon acceded: on 18 September 1989 to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); and also, on 23 June 1999, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); At this time, the country has not yet acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, Cameroon acceded, on 23 August 1994, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); and also, on 11 January 1993, to the Convention on the Rights of the Child (New York, 20 November 1989). The provinces in the extreme North, north of Adamaoua and of the southwest are involved in the practice of FGM.

Cameroon has a branch of the Inter-African Committee on Traditional Practices Affecting the Health of Women and Children. This section organizes awareness campaigns against FGM. Further, beginning in 2006, the Cameroon Red Cross initiated a project to fight HIV/AIDS and FGM.

**(5) Central African Republic:** A specific law against FGM was proclaimed in 1966; an order regarding FGM was published in 1996. At the continental level, the country acceded, on 27 July 1986, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it has not acceded to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); nor has it acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 21 June 1991, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 23 April 1992, to the Convention on the Rights of the Child (New York, 20 November 1989).

A national section of the Inter-African Committee on Traditional Practices Affecting the Health of Women and Children works to increase awareness of the population against FGM. In the Central African Republic, the Banda and Mandija ethnic groups practice FGM.

**(6) Chad:** A law against FGM was proclaimed in 2003. At the African level, Chad acceded, on 11 November 1986, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it

also acceded, on 4 April 2000, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); however, it has not yet acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 9 June 1985, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 2 October 1990, to the Convention on the Rights of the Child (New York, 20 November 1989).

In Chad, the National Committee in Traditional Practices Affecting the Health of Women and Children, organizes awareness campaigns on this subject. This Committee works against all traditional practices and in particular violence against women. The Committee laments the absence of sanctions against the authors of such violence. Awareness campaigns concern FGM as well as issues about the levirate, sororate, dietary taboos and sociocultural behaviors that are based on prejudices and stereotypes that deprive women of their fundamental rights. In Chad, the filmmaker Zarah Yacouba, produced a film in 1997 entitled "Feminine Dilemma" in which she shows the damages of FGM.

In Chad, FGM is practiced in the prefectures of Moyen-Chari, Logoni oriental, Guera, Zone centre and N'Djamena.

**(7) Congo, Democratic Republic of:** There is no specific law against FGM. At the continental level, the country acceded, on 28 July 1987, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981). It has not acceded to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); nor has the country acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 16 November 1986, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); and on 27 September 1990 to the Convention on the Rights of the Child (New York, 20 November 1989).

The practice of FGM is not known throughout the country. It is a very isolated practice in an area in the north among the Banda and B'Kawes ethnic groups.

**(8) Côte d'Ivoire:** A specific law against FGM was proclaimed on 18 December 1998. At the continental level, the country acceded, on 31 March 1992, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded, on 18 June 2007, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); but it has not yet acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 18 December 1995, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 4 February 1991, to the Convention on the Rights of the Child (New York 20 November 1989).

The Ivorian law of 18 December 1998 states that any damage to a woman's genitals, through total or partial mutilation, excision, desensitization or any other practice, if harmful to health, is subject to imprisonment of one to five years and to a high fine (360 000 to two millions francs CFA). The punishment is five to twenty years of prison if the victim dies as a result of the

operation. In addition, if the procedure is performed by a doctor, the doctor risks being banned from professional practice for up to five years.

The ethnic groups concerned are the Yacouba, Guéré, Wé, Gouro, Dioula and Malinké.

**(9) Djibouti:** FGM is prohibited with the revision of the country's penal code in 1994, entering into force in April 1995. At the continental level, the country acceded, on 20 December 1991, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981), but it has not yet acceded to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); however it acceded on 4 February 2005 to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 2 December 1998, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 6 December 1990, to the Convention on the Rights of the Child (New York, 20 November 1989).

Awareness campaigns against FGM are organized by the National Committee to Fight Traditional Practices, a section of the Inter-African Committee.

**(10) Egypt:** In 1958, a decree by President Nasser condemned the practice of FGM with imprisonment and a fine. In 1959, a ministerial resolution allowed partial clitoridectomy, with the condition that the woman consents and that the procedure take place in a hospital environment. On 8 July 1996, a decree by the Ministry of Health prohibited the practice of FGM by healthcare professionals; this decision was challenged in the courts by traditionalists and doctors. On 28 December 1997, the court of cassation decided in favor of a government prohibition of these practices; the decision stipulated that violators are liable for criminal and administrative sanctions.

At the continental level, the country acceded, on 3 April 1984, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded, on 22 May 2001 to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); however, the country has not yet acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003).

At the international level, the country acceded, on 18 September 1981, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 6 July 1990, to the Convention on the Rights of the Child (New York, 20 November 1989).

**(11) Eritrea:** A specific law against FGM was adopted in March 2007. At the continental level, the country acceded, on 15 March 1999, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded, on 25 January 2000, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); but it has not yet acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded on 5 September 1995, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 3 August 1994, to the Convention on the Rights of the Child (New York, 20 November 1989).

**(12) Ethiopia:** A specific law against FGM was proclaimed in 2004. At the continental level, the country acceded, on 22 June 1998 to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded, on 27 December 2002, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); but it has not yet acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003).

At the international level, the country acceded, on 10 December 1991, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 14 May 1991, to the Convention on the Rights of the Child (New York, 20 November 1989).

FGM is practiced among Christians, Jews and Muslims; all ethnic groups are concerned except several small minority groups like the Begas and Wellega.

**(13) Gambia:** There is no specific law against FGM. At the continental level, the country acceded, on 13 June 1983, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded, on 30 March 2001, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); and it acceded, on 6 September 2005, to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 16 April 1993, to the convention of the United Nations on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 8 August 1990, to the Convention on the Rights of the Child (New York, 20 November 1989). Note that the headquarters of the African Commission on Human and Peoples' Rights is located in Banjul, the capital of Gambia.

**(14) Ghana:** A specific law against FGM was adopted in 1994. In 1989, the President of the Republic, Mr. Rawlings, announced in a radiobroadcast speech that he was against the practice of FGM. Article 39 of the Ghana Constitution prohibits traditional practices that are harmful to a person's health and welfare. At the African level, the country acceded, on 1 March 1989, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded, on 15 July 2005, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); however, it has not yet acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 2 January 1986, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 5 February 1990, to the Convention on the Rights of the Child (New York, 20 November 1989).

**(15) Guinea:** A specific law against FGM was proclaimed in 1965 and revised in October 2001; prior to this law, the practice of FGM was prohibited by Article 265 of the penal code. At the African level, the country acceded, on 13 May 1982, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded, on 21 January 2000, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); however it has not yet acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 9 August 1982, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 13 July 1990, to the Convention on the

Rights of the Child (New York, 20 November 1989). In 1999, a young girl died subsequent to FGM in the Faranah region, which mobilized abolitionists; they organized a ceremony for the submission of knives from 40 excisers in November 1999 in the Kouroussa region.

The Coordination Cell on Traditional Practices Affecting the Health of Women and Children (CTPAWC) is the main organization fighting against these practices. The majority of the population practices FGM: Mandingue, Soussou, Peulh, Kpelle.

**(16) Guinea-Bissau:** An initial proposed law to prohibit FGM, presented in 1995, was rejected. However, the parliament had approved the recommendation to try those responsible for the practice when it caused the death of the person excised. Finally, a specific law against FGM was proclaimed in 2003. At the African level, the country acceded, on 6 March 1996, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); however it has not yet acceded to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990), nor has it acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 23 August 1985, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded to the Convention on the Rights of the Child (New York, 20 November 1989).

Since August 2003, a local NGO, "Sining Mira Nassique", has been engaged in the fight against FGM. The coordinator of this NGO, Mrs. Maria Augusta BALDE, organizes sessions for alternative excision in a camp of a neighborhood near the city of Bissau where 150 to 200 young girls who have not been excised, aged 9 to 13 years old, are brought together with the intention of reviewing early childhood education and fighting against FGM. In the camp, the girls are not excised, but are educated according to traditional rules, which consist of taking the steps to become a wife in the future, but which save them from FGM. Traditional excisers are also invited to participate in the experience.

The ethnic groups concerned by FGM are the Peulh and the Mandingue.

**(17) Kenya:** A specific law against FGM was proclaimed in 2001. At the African level, the country acceded, on 10 February 1992, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded, on 10 August 2000, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); however, it has not yet acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 9 March 1984, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 30 July 1990, to the Convention on the Rights of the Child (New York, 20 November 1989).

At the end of a colloquium organized in Nairobi, one participant, Mrs. Edna ADEN, stated that female genital mutilation increased the transmission of the HIV virus, as the officiants of the rite use non-sterilized equipment for multiple procedures. As part of this colloquium, a judge from the court of appeals, Mr. Effie OWUOR, promised that a draft of a law on childhood making FGM eligible to be tried in the courts, would soon be submitted to the Parliament; this was done in 2001.

To fight against FGM, the Kenyan NGO Maendeleo Ya Wanawake has proposed an "alternate rite" since 1996. Instead of undergoing excision, girls receive education on family life in a private setting, then participate in a public ceremony that confers adult status on them. Another NGO that is active against FGM is the Kenya National Council on Traditional Practices North Rift Chapter Denctrapp (SETAT); this is a national NGO affiliated with the Inter-African Committee.

On 18 September 2004, an international conference against FGM ended in Nairobi with an appeal to African governments to prohibit excision, a custom to which many African girls are victims.

In Kenya, not all ethnic groups practice FGM. However, all religions – Christian, Muslim and animist – do practice it. For this reason, religious authorities recently met in the city of Isiolo (North) to condemn FGM (20 June 2007). At this meeting, Mr. Cheikh Ali Dabaso, in the name of the Supreme Council of Muslims of Kenya stated that "FGM is neither an Islamic practice nor obligatory for Muslims, and we are resolved to preach against it and to eradicate all forms of it". Mr. Bahari, Isiolo deputy to the Kenyan Parliament, stated to the meeting that this traumatizing cultural practice was perpetuated by the false belief that it was approved by the Koran, with all of the consequences that result from such a belief. Mr. Baharia emphasized that religious associations and their leaders were major social actors who play an important role in the fight against this practice, as they are in direct contact with the communities. (see <http://www.grio.com/info10717.html>).

FGM concerns the ethnic groups of the Boran, Kalenjin, Kamba, Kikuyu, Kisi, Maasai and Somali. It is more widely practiced in rural areas than in cities.

**(18) Liberia:** There is no specific law in Liberia against FGM. At the African level, the country acceded, on 29 December 1982, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); but it has not acceded to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); nor has it acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 17 July 1984, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 4 June 1993, to the Convention on the Rights of the Child (New York, 20 November 1989).

The conventions we just cited constitute the legal basis for the fight against excision in Liberia. Thus Article 242 of the penal code can be applied.

The National Association on Traditional Practices Affecting the Health of Women and Children (NATPAH), affiliated with the Inter-African Committee, is the main NGO that organizes awareness campaigns against FGM.

The ethnic groups concerned by this practice are the Bassa, Gola, Kissi, Mano, Mende and Vai. FGM is more often practiced in rural areas of the country than in the cities.

**(19) Mali:** There is no specific law against FGM. At the African level, the country acceded, on 22 January 1982, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded, on 14 August 1998, to the African Charter on the Rights and Welfare of the Child

---

(Addis-Ababa, 11 July 1990); and it acceded, on 3 February 2005, to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 10 September 1985, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 20 September 1990, to the Convention on the Rights of the Child (New York, 20 November 1989).

The order of 4 June 2002 created the National Program to Fight Excision (NPFE). The NPFE is a service of the Ministry in charge of the Promotion of Women, Children and the Family, with a rank of central service. At the regional level it is represented by focal points within the Regional Directorates for the Promotion of Women, Children and the Family. A presidential decree of 12 October 2002 established the organizational and operational modalities of the National Program to Fight the Practice of Excision.

A project to support the fight against the practice of excision, to last 4 years (2004-2008), was initiated in Bamako in August 2004 with the financial participation of the Mali government in cooperation with the government of the Grand Duchy of Luxembourg. This project will cost US\$ 686 263. In the project, NGOs participate in promoting awareness by the population: the Association for the Protection and Promotion of the Family in Kayes, the Network of Traditional Communicators for Development, the Mali Association for Women of Protestant Churches, Action Against Hunger and Disease, the Association of Djiguissème Women of Kayes, the Association for the Promotion of Women of Sabalibougou, the Mali Association for the Monitoring and Direction of Traditional Practices (affiliated with the Inter-African Committee) and Women in Law and Development in Africa. Awareness workshops are organized as part of the project with elected municipal officials, community leaders and religious leaders. In Mali, the practice of excision is found throughout the country and in all religions. Thus 94% of Muslims, 88% of traditional religions and 85% of Christians practice excision. In a comparison of ethnic groups, FGM is practiced by 95% of the Peulh, Sarakolé/Soninké, Malinké and Bambara, 84% of the Dogon, 47% of the Sonraï and 16% of the Touareg.

**(20) Mauritania:** There is no specific law against FGM. At the African level, the country acceded, on 26 June 1986, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded, on 14 December 2005, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); and it acceded, on 14 December 2005, to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, Mauritania acceded, on 10 May 2001, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 16 May 1991, to the Convention on the Rights of the Child (New York, 20 November 1989).

The Mauritanian Association on Traditional Practices Affecting the Health of Women and Children (MATPHWC) sponsored a study that was actually an advocacy in favor of a law against FGM. The ethnic groups concerned by FGM are the Soninké, Peulh (95%) and Maures (30%).

**(21) Niger:** A law was proclaimed against FGM on 13 June 2003. At the African level, the country acceded, on 21 July 1986, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded on 5 March 1997 to the African Charter on the Rights and Welfare of

the Child (Addis-Ababa, 11 July 1990); however, on 11 June 2006, deputies to the National Assembly rejected the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003) by a vote of 42 against and 31 for, with 3 abstentions. The majority of the members of parliament did not agree with articles 6 (Marriage), 14 (Right to health and the control of reproductive function) and 21 (Right of succession).

At the international level, the country acceded, on 8 October 1999, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 30 September 1990, to the Convention on the Rights of the Child (New York, 20 November 1989).

The Nigerian Committee on Traditional Practices led a survey in 1992 that was completed in 1998. This survey revealed that FGM practices were found among these ethnic groups: the Peulh, Gourmantché, Djerma/Songhai, Wogo, Kourteg and Touareg.

An awareness campaign led an exciser, Mrs. Salmon Himadou de Tillabéri, to decide in March 2003 to renounce the knife and to convert to another profession.

**(22) Nigeria:** There is no specific law against FGM. At the African level, Nigeria acceded, on 22 June 1983, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded on 2 May 2003, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); and it acceded on 18 February 2005, to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded on 13 June 1985, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded on 19 April 1991, to the Convention on the Rights of the Child (New York, 20 November 1989).

In terms of adopting a law against FGM, the draft of a law on "violence against women: female genital mutilation" was adopted by the House of Representatives. This draft was submitted to the Senate for approval.

In Nigeria, the Inter-African Committee on Traditional Practices (Nigeria section) is the main NGO that organizes workshops across country to influence opinion against FGM. Another NGO, Women in Law and Development in Africa, works primarily on violence against women; it organized the 16-day campaign about violence against women. The ethnic groups concerned by FGM are the Ibo, Ibibio, Efuk, Ogoni, Osu, Undoni and Yorouba.

**(23) Senegal:** A specific law against FGM was proclaimed on 14 January 1999. At the continental level, the country acceded, on 25 October 1982, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded, on 30 October 1998, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); and it acceded, on 30 January 2005, to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 5 February 1985, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 31 July 1990, to the Convention on the Rights of the Child (New York, 20 November 1989).

On 5 April 1984, the President of the Republic M. Abdou Diouf proclaimed during the opening of a colloquium on traditional practices affecting the health of mothers and children in Dakar, that the decline of the survival of excision should be accelerated through education, not anathema.

Another conference was held in Casamance (Senegal) in 1996, on traditional practices harmful to women's health, with the participation of States and NGOs from eight western African nations, to exchange experiences and strengthen strategies and programs to fight these practices. They recommended involving leaders in religion and customs, members of parliament, local elected officials, communicators, artists, social workers, law and order forces, healthcare agents and educators in the fight. They also recommended adopting specific texts to penalize the practice of female genital mutilation; and they recommended harmonizing national legislation with international treaties concerning the rights of women and children. Following this conference, the Senegalese Minister of Health launched a prevention campaign against FGM, on 22 April 1997.

In June 1998, the government submitted to parliament the draft of a law prohibiting FGM. During the debate of this draft law, some religious leaders exhorted the Muslim deputies to vote against it. One deputy stated: "My religion forbids me from voting against this law; excision is a religious problem. Prohibiting it challenges Article 19 of the Constitution, which gives citizens the right to exercise religion" (see the newspaper *Soleil* of 15 January 1999). In December 1998, during the debate about this law, 120 young girls aged 8 months to 10 years were forcibly excised in the Kédougou region (eastern Senegal).

To popularize the new law, adopted on 14 January 1999, the NGO ENDA-Third World, in collaboration with the Free Clinic and the Belgian cooperation section in Dakar, published a comic book, "Bintou's Choice". This comic book explained the damages of excision on women's health, the medical risks, and the conflicts it creates between couples. The brochure ended with a quiz that reminded readers that there was a law condemning the practice.

The ethnic majority in Senegal (the Wolof) do not practice FGM. All of the other ethnic groups do: the Peulh, Toucouleur, Soninké, and Serer. Many NGOs activate for the abolition of FGM, such as the Senegalese Committee on Traditional Practices, Tostan Women in Law and Development in Africa, the Association of Women Jurists, the National Committee Against Violence to Women, and the African Assembly for the Defense of Human Rights (RADDHO). Members of Senegal's parliament, supporting the NGOs, also led an awareness campaign against the practice.

**(24) Sierra Leone:** There is no specific law against FGM at the national level. At the African level, the country acceded, on 27 January 1984, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded, on 18 June 2002, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); however, it has not yet acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded on 11 November 1988, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 18 June 1990, to the Convention on the Rights of the Child (New York, 20 November 1989).

In Sierra Leone, there was a terrible civil war between March 1991 and January 2002 for the control of diamond-rich areas; during this period, many child soldiers were involved in the conflict.

For this reason, in the spring of 2005, the Ministry of Social Welfare, Gender and Children's Affairs drew up a draft law intended to protect the welfare of children. In terms of FGM, which was one of the subjects addressed in the draft law, there were two viewpoints in the debate in parliament: traditionalists and abolitionists.

For the traditionalists: "Female genital mutilation is an integral part of the national culture, and should not be prohibited because it helps prepare girls for marriage and reduces sexual promiscuity."

For the abolitionists: "All traditions are not necessarily good. FGM causes numerous physical and psychological complications in girls; excisers use non-sterilized blades to incise genital organs, and there is practically no post-operative medication."

On 12 June 2007, the parliament voted on this draft law: the traditionalist view won over the abolitionist view. The law is silent on the question of FGM. The Sierra Leone Vice-Minister of Social Welfare, Women's Affairs and Childhood, Mrs. Menumatu Koroma, stated to the press that "female genital mutilation is a part of our culture and should therefore not be eradicated at this time".

There is a powerful secret society of women in Sierra Leone who support the practice of FGM: the Bando secret society. All campaigns against FGM conducted by NGOs are blocked by this society. "It is not an easy task. Sometimes I am hooted at and showered with sarcasm. At critical times, I am chased from areas where the practice is much more widespread," laments Mrs. Ann Maria Coulker, a major abolitionist and president of Katanya Women's Development Association (KADWA). She has recruited hundreds of young girls and placed them in job training centers. The girls learn sewing, dying, weaving, soap making and embroidering. Between training sessions, she organizes conferences and discussions on the harmful effects of FGM.

To fight FGM in Sierra Leone, the filmmaker Brima Sheriff produced a film entitled "Sebatu's Initiation". This film presents the two opposing sides (traditionalists and abolitionists) on the issue of FGM and lets the public decide. But the film does vividly illustrate the harmful effects of FGM. Another NGO that works to end FGM is the Center for Safe Mother Hood Youth and Child Organisation (CESMYCO).

FGM is practiced by all of the ethnic groups of the country except the Krio (Creoles).

**(25) Somalia:** Somalia has been a country without a State since 27 January 1991 when the General-President of the Republic, Mr. Muhammed Siyad Barré, fled Mogadishu and obtained political asylum in Nigeria, where he died on 2 January 1995. The date of 27 January 1991 also marks the beginning of the war that continues to this day; despite Operation "Restore Hope", the intervention by the United Nations blue helmets, and the recent intervention of the Ethiopian army, Somalia continues to be divided between Somaliland, which proclaimed its own independence in 1997; Puntland, which proclaimed itself to be an autonomous region in 1998; various ethnic groups that each control a portion of the territory; and a virtual Somalia, with Mr. Abdullah Youssouf Ahmed as president of the Republic.

In 1978, a specific law against FGM was adopted. But with the current division of the country, this law is useless. At the continental level, the country acceded, on 20 March 1986, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); but it has not acceded to the African Charter on the Rights and Welfare of the Child (Addis-Ababa 11 July 1990); nor has it acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, Somalia has not acceded to the United Nations Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); nor has it acceded to the Convention on the Rights of the Child (New York, 20 November 1989). In November 1999, the parliament of the entity of Puntland approved a law making these practices illegal.

In Somalia's current situation, it is difficult to organize awareness campaigns against FGM inside the country. But some refugee women are working against these practices.

**(26) Sudan:** The law against FGM was proclaimed in 1946, under the joint Anglo-Egyptian administration (1899-1956). Excisers were strictly convicted by the courts, and some were trained to become midwives. After independence, this law went unheeded. At the African level, Sudan acceded, on 11 March 1986 to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); but it has not yet acceded to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); nor has it acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, Sudan has not acceded to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); however, it acceded on 3 August 1990, to the Convention on the Rights of the Child (New York, 20 November 1989).

Since the United Nations General Assembly proclaimed 25 November "international day to eliminate violence against women" (17 December 1999, resolution A/FES/54/134), in Sudan many NGOs have organized awareness campaigns on this subject. The fight against FGM is conducted within the framework of violence against women. Some universities have introduced seminars concerning the fight against excision into their programme. Of these, the Al-Ahfad University for young women, founded in 1907, has been at the forefront of women's emancipation. Its gender department offers a seminar dedicated to the fight against harmful traditions, in which excision is a significant part. The students write dissertations on this theme.

An NGO that is very active in Sudan, AZZA, organizes awareness campaigns in collaboration with a New York-based NGO, Equality Now. Azza travels across the country, beginning in the poor neighborhoods of Khartoum. FGM is practiced throughout the country except in the South, Christians and animists.

**(27) Tanzania:** The law on sexual crimes adopted in 1988 prohibits FGM. At the African level, Tanzania acceded, on 9 March 1984, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it acceded, on 9 May 2003, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); and it acceded, on 7 May 2007, to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 20 August 1985, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18

December 1979); it also acceded, on 10 June 1991, to the Convention on the Rights of the Child (New York, 20 November 1989).

Beginning in 1999, Tanzanian radio has produced a radio drama series entitled “Twende na wakati” (let’s go with the times), whose 30-minute episodes are broadcast twice a week. In these broadcasts “Twende na wakati” deals with subjects like fertility, mother and child protection, AIDS, sexually-transmitted diseases, the need to provide education for young girls, the fight against domestic violence and against all kinds of cultural discriminatory practices such as excision. The primary result of this project has been the increased consciousness of these societal subjects in the rural world.

Pastor Zakayo is a well-known Tanzanian who has organized many awareness campaigns against FGM; he has also taken actions with the national police in the name of the 1998 law, to protect young girls in danger of being excised. A New York-based NGO, Equality Now, in collaboration with local NGOs, is also organizing many public awareness campaigns.

In Tanzania, abolitionists, schools and the police work together to fight against FGM. In July 2004, for example, Pastor Zakayo was informed that a man had taken his daughters out of school to subject them to FGM. When he alerted the police, they came to the village to stop the ceremony and insisted on speaking to the school director, the village head and to the community that was about to participate in the event. A policeman then accompanied the anti-FGM activists to convince parents to abandon this practice. Thanks to this intervention, the three girls were spared FGM and remain intact.

One of the local NGOs that is very active against FGM is the National Committee on Traditional Practices.

The regions concerned by FGM are: Arusha (81%), Dodoma (68%), Iringa (27%), Kilimandjaro (37%), Mara (44%), Morogoro (29%) and Tanga/Singida (25%).

**(28) Togo:** On 30 October 1998, the National Assembly voted unanimously on a law to prohibit the practice of FGM. At the African level, the country acceded, on 22 November 1982, to the African Charter on Human and Peoples’ Rights (Nairobi 27 June 1981); it also acceded, on 18 May 1998, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990); and it acceded, on 26 October 2005, to the Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, Togo acceded on 26 September 1983, to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 1 August 1990, to the Convention on the Rights of the Child (New York, 20 November 1989).

A women’s association was created in 1992, the Women, Democracy and Development Think Tank and Action Group (GF2D). The primary aim of this NGO is access to rights for women in rural settings. Since 1994, the GF2D association has been sending 300 volunteer female “parajurists” to both rural and urban areas, who popularize rights and organize free legal consultations.

The Togolese singer Pierrette Adams has effectively raised awareness by singing against FGM.

In Togo, FGM is practiced in the northern part of the country by the ethnic groups the Chamba, Tem, Gourma, Mossi, Peulh, Moba, Tchakosi and Kabyé.

**(29) Uganda:** There is no specific law against FGM. However, in 1996, a court ruled in favor of the prohibition of this practice, on the basis of the terms in section 8 of the Charter for Children proclaimed that year, which made it illegal to subject a child to social or customary practices that are harmful to health. At the African level, Uganda acceded, on 27 May 1986, to the African Charter on Human and Peoples' Rights (Nairobi, 27 June 1981); it also acceded, on 21 October 1994, to the African Charter on the Rights and Welfare of the Child (Addis-Ababa, 11 July 1990), but it has not yet acceded to the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo, 11 July 2003). At the international level, the country acceded, on 22 July 1985 to the Convention on the Elimination of All Forms of Discrimination against Women (New York, 18 December 1979); it also acceded, on 17 August 1990, to the United Nations Convention on the Rights of the Child (New York, 20 November 1989).

The NGO that organizes awareness campaigns in the region concerned by the practice of FGM is the Uganda National Committee on Traditional Practices (NCTPU) affiliated with the Inter-African Committee.

In Uganda, only a small ethnic minority excises children: the Sebei. A true awareness campaign began in 1996, led at the time by the Minister of State in charge of equality of the sexes and community development, Mrs. Jane Francis Kuka. She traveled throughout the districts of Kapchorwa, Karanoja, Tororo and Masindi where FGM is practiced.

## II. Countries outside Africa that practice FGM

- Saudi Arabia (the southwest of the country)
- Australia: The Aboriginal people, Pitta-Patta, practice incision
- United Arab Emirates (in the areas of Nagad, Kuwet, Bani, Tamin, Kara, Atije, Adwan)
- India (only Daudi Bohra Shiite Muslims)
- Indonesia (in the areas of Madura, southern Sulawesi and eastern Java)
- Iran (Kurds only)
- Iraq (Kurds only)
- Jordan (southwest of the country, near Akaba)
- Malaysia (symbolic incisions)
- Oman (notably in the region of Dhofar)
- Pakistan (only Daudi Bohra Shiite Muslims)
- Peru (the Aboriginal people Conibos, branch of the Panos, practice introcision)
- Singapore (among Malays)
- Sri Lanka (some cases among Muslims)
- Syria (Kurds only)
- Turkey (Kurds only)
- Yemen (23% of women in the interior and 69% in coastal regions)
- African and Asian emigrants in Europe and America

### **Sanctions and Tolerance of FGM in Some Western Countries**

<b>Country</b>	<b>Sanctions: Penal Code</b>	<b>Sanctions: Specific Laws</b>	<b>Tolerance in hospitals</b>
Germany	X		
Belgium		1990 and 2000	
Canada		1992	
Denmark	X		
Spain	X		
United States		1996	
Finland	X		
France	X		
Italy			X
Norway		1995	
New Zealand		2002	
Netherlands	X		
Portugal	X		
United Kingdom		1985	
Sweden		1983	
Switzerland	X Article 122		
European Parliament		2001	

## BIBLIOGRAPHY

1. Nouredine ABDERRAHIM, P. Stanley YODER et Arlinda ZHUZHINI :  
L'Excision dans les Enquêtes Démographiques et de santé : une analyse comparative  
ORC Macro  
Calverton, Maryland, USA  
December 2005
2. Emmanuel BABATUNDE  
Women's rites Versus Women's rights : a study of circumcision among the vetu yoruba of  
southwestern Nigeria  
Trenton, New Jersey, Africa Wold Press, 1998
3. Kesso BARRY  
Desso, la Princesse Peuhle  
Ed. Sehers, Paris 1988
4. Abangah DAGOMA  
L'excision, cette mal aimée du Tchad  
Polycopie, 1990
5. Alan DAVID  
Infibulation en République de Djibouti  
Thèse n° 131, Université de Bordeaux  
Bordeaux : l'Amicale des Etudiants en Médecine, 1978
6. Waris DIRIE  
Fleur du désert  
Ed. Albin Michel, Paris 1998
7. Discrimination à l'égard des femmes : la convention et le Comité  
Série droits de l'homme, Fiche d'information n° 22  
Campagne mondiale pour les droits de l'homme  
Centre pour les droits de l'homme  
Nations Unies, Genève et New York, 1995
8. Cruz Melchor EYA NCHAMA  
Développement et droits de l'homme en Afrique  
Editions Publisud, Paris 1991
9. Pierrette HERZBERGER-FOFANA  
Les Mutilations Génitales Féminines  
Université Erlangen-Nuremberg, Juillet 2000
10. Sidibé KANDJI

L'Excision. De la circoncision négro-pharaonique à la clitoridectomie sémito-orientale. Des sources traditionnelles islamiques

In Présence Africaine n° 160, Paris 1999

11. Elizabeth KIRBERER, Kate RANDOLPH et Nahid TOUBIA  
Intersection Between Health and Human Rights : The Case of Femele Genital Mutilation  
Rapport de l'atelier Violence against Women  
The National Council on International Health (NCIH)  
New York, 1995

12. Marie-Hélène MOTTIN-SYLLA  
Excision au Sénégal (Préface de Joseph KI-ZERBO)  
Série études et recherches, n° 137  
ENDA, DAKAR 1990

13. Demba Aboubakar PAMENTA  
La Blessure  
Edition Togouna, Bambako 2006

14. Parliamentary Assembly of the council of Europe  
Resolution 1247 (2001)  
Female Genital Mutilation

15. Jean PLIYA  
L'Excision dans les sociétés africaines  
In Le Matinal, Cotonou, 4 novembre 1998, p.3

16. Fatou SOW  
Mutilations génitales féminines et droits humains en Afrique  
Etudes féministes, Paris, Dakar 2004

17. Nahid TOUBIA  
The Social and Political Implications on Female circumcision : the case of Sudan  
In Women and the Family in the Middle East  
University of Texas Press, 1994

Cruz Melchor EYA NCHAMA