



One cut too many

ISLAMIC RELIEF POLICY BRIEF ON
FEMALE GENITAL MUTILATION/CUTTING



Executive summary

This policy brief provides the vision and rationale for Islamic Relief to campaign for an end to FGM/C and guides intervention efforts to eradicate it. It calls for the realisation of the fundamental and God-given right of girls and women to live healthy, fulfilled lives free from violence and harm.

Female Genital Mutilation/Cutting (FGM/C) currently affects 130 million females, mostly within Africa, and a further two million are at risk of being cut every year.¹ It is a harmful practice, one that varies in its severity and is usually driven by a complex mixture of culture, tradition, religion and social pressure.

FGM/C causes gratuitous suffering and harm including immediate and long-term health risks, complications in childbirth and a denial of sexual pleasure. It violates the rights of women and girls to live free from harm, violence and discrimination.

In many Muslim communities FGM/C is attributed, at least partly to religion, with some holding the view that Islam requires FGM/C as an obligation. However FGM/C pre-dates Islam, it is not mentioned in the Qur'an and the Prophet Muhammad, peace be upon him, did not advocate for it. It is also a relatively unknown practice in large parts of the Muslim world.

Over the past 30 years Islamic Relief has been working to eradicate the root causes of poverty and human suffering, and our current global strategy includes a key focus on gender justice. Our 'end gender-based violence' campaign includes eradicating FGM/C, domestic violence and early/forced marriages.

The Islamic humanitarian values that drive our work include the sanctity of life and the human body, gender equality, the protection of children and the right to live free from fear and harm. These principles are enshrined in the Shari'ah, which safeguards the rights of all.

The killing of one soul without just cause is like killing the whole of humanity (Qur'an 5:32).

The loss of a single life, a lifetime of suffering or a denial of basic human rights is against the spirit of Islam. FGM/C poses all of these risks. FGM/C in any form, inflicted on any woman or girl, is one cut too many.

As part of our humanitarian imperative to end human suffering Islamic Relief as one of the world's largest independent Muslim NGOs, has a critical role to play in challenging the supposedly 'religious' justification for FGM/C in all its forms.

Our vision: *We will work to ensure justice for all through eliminating harmful practices like FGM/C and help make the world a place where every girl and woman is safe, healthy and free from harm.*

This policy brief highlights the suffering FGM/C causes, the reasons it is practiced, and explains why FGM/C is not an Islamic practice. It assesses intervention efforts by international NGOs and in light of this, proposes Islamic Relief's approach to eradicating FGM/C.

Specifically, this paper explores the link between FGM/C and Islam, arguing that there is no religious justification for the practice. On the contrary, the harm FGM/C causes makes a strong, religiously sanctioned case against it.

Islamic Relief's strategy for eradicating FGM/C involves two key aspects: including religion as part of the solution, and tailoring interventions to the specific needs and sensitivities of the community.

Islamic Relief's approach is based on evidence of two major gaps in FGM/C interventions: failure to adequately consider the social challenges and cultural context of communities where FGM/C is practiced, and a lack of understanding of how to de-link FGM/C from Islam where religion is a significant reason for the practice.

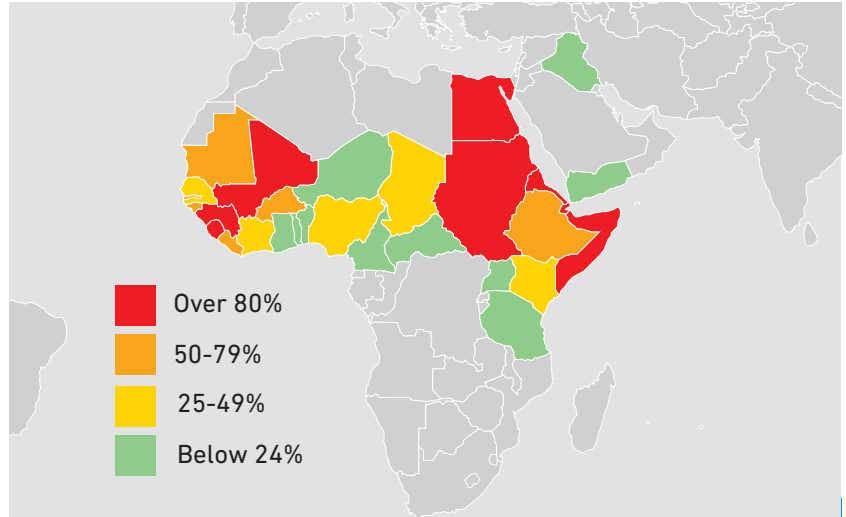
Islamic Relief will work with local scholars and religious bodies to promote greater awareness of the ways in which FGM/C violates a woman or girl's God-given human rights in Islam. We will do this sensitively and creatively, involving key people at all levels, encouraging debate on the issue and supporting community members to take the lead in combatting the practice.

About FGM/C

Female Genital Cutting (FGM/C) is defined by the World Health Organisation (WHO) as 'all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons.'²

Around 130 million girls and women around the world are living with the effects¹ of FGM/C, mainly in Africa and the Middle East³ but also in Indonesia, Malaysia and elsewhere.¹ The type⁴ of FGM/C practiced varies among different communities, as does the age at which it is performed.

FGM/C is illegal in many countries but it can be difficult to monitor as it is usually carried out privately by traditional practitioners rather than medical professionals. This means it often takes place in unsanitary operating conditions, using non-sterile instruments such as razor blades, scissors and kitchen knives.



According to WHO, two million women and girls are at risk of being cut annually across Africa and in the Middle East.⁵

The four types of FGC

Type I: Clitoridectomy Partial or total removal of the clitoris.

Type II: Excision Partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (the labia are 'the lips' that surround the vagina).

Type III: Infibulation Narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the inner or outer, labia, with or without removal of the clitoris.

Type IV: All other harmful procedures to the female genitalia for non-medical purposes, e.g. pricking, piercing, incising, scraping and cauterizing the genital area.

Percentage of women living with FGM/C in the 29 countries in which it is concentrated:⁶

Over 80 %	50-79%	25-49%	Below 24%
Somalia	Gambia	Chad	Central African Republic
Djibouti	Ethiopia	Kenya	Tanzania
Egypt	Mauritania	Nigeria	Benin
Eritrea	Liberia	Senegal	Iraq
Mali	Guinea-Bissau		Ghana
Sierra Leone			Togo
Sudan			Niger
			Cameroon
			Uganda



FGM/C has no known health benefits but causes physical and psychological harm, and is a gross and fundamental violation of human rights.

¹The prevalence of FGC is better documented in Africa and the Middle East than Asia and elsewhere. However there is also evidence that FGC is practiced among migrant communities in Europe, the USA and Australia.



The suffering it causes

FGM/C inflicts gratuitous suffering on women and girls, the physical and mental effects of which can last a lifetime. The procedure is painful and can lead to shock, hemorrhaging, injury to adjacent tissue, incontinence, infections and even death.⁷

In the long term, FGM/C can cause abnormal menstruation, chronic vaginal and urine infections, cysts and formation of scar tissue, kidney failure and infertility. Women who have had FGM/C are also more at risk of complications during childbirth which if inappropriately addressed can lead to foetal distress and newborn and/or maternal death.⁸

Women who have been subjected to the most serious form of FGM/C (Type III) are 70 per cent more likely to suffer from postpartum haemorrhage – the leading cause of maternal deaths in Africa.⁹

FGM/C also reduces or eliminates female sexual enjoyment, and intercourse can be a painful experience. Some women need further surgery to open the lower vagina before they can have sexual relations or give birth.

Babies born to mothers who have had FGM/C (Type III) are 55 per cent more likely to die during or after birth and 66 per cent more likely to need resuscitation.¹⁰

Furthermore, FGM/C can have a traumatising psychological impact, affecting sexual relationships and leading to anxiety and depression.¹¹ Some women and girls feel they are not normal and FGM/C has a detrimental impact on their partners, marriages and family life.

Why FGM/C is practiced

The origins of FGM/C are believed to stem from ancient Pharaonic culture and by the 7th Century AD, prior to the advent of Islam, it was practiced in different forms by some tribes in the Arabian Peninsula as well as parts of north- eastern Africa. The reasons behind the practice today are deep-rooted and complex, often shrouded in mystery and superstition as well as religious beliefs and cultural traditions. The most common reasons are:

- ▶ **A rite of passage** or coming-of-age ritual for girls as they enter puberty.
- ▶ **Improving marriage prospects** and attracting a higher bride price.¹²
- ▶ **Controlling sexuality** as it is thought that uncircumcised women are easily aroused and FGM/C prevents 'illicit' behaviour.
- ▶ **Fulfilling a religious obligation** for those who believe it is an act of faith and/or a religious purification ritual¹³
- ▶ **A symbol of cultural identity** for an ethnic group, which bonds them together.¹⁴

Many traditional societies hold on to FGM/C as a practice that has been observed by their people – without question – from time immemorial, while followers of various religions, including Islam and Christianity, argue that it is an unquestionable part of their faith.

What Islam says about FGM/C¹⁵

There is a great deal of confusion about the link between Islam and FGM/C. A lack of clarity exists on its status within Islamic teaching among many at the community level where FGM/C is practiced and among some of those working to eradicate it. For interventions in Muslim communities to be effective it is important to understand the Shari'ah (Islamic ethical and legal) position and make a robust, religiously sanctioned case against it.

FGM/C and the Shari'ah

The purpose of the Shari'ah is to safeguard humanity and protect the rights of all. In particular, it promotes human wellbeing through protecting the benefits of religion, life, intellect, progeny and wealth.

In Islam, for any action to be considered 'religious,' it must have a basis in the Qur'an or the sunnah (the established practices exemplified or approved of by the Prophet Muhammad, peace be upon him, recorded in hadith). Most Muslims also consider ijma (consensus of scholars) and qiyaas (analogical deduction) to be of great importance as sources of guidance.

The Qur'an and FGM/C

The Qur'an makes no mention of female circumcision – in fact it warns against bringing deliberate harm to oneself or others, and against temptations to change the form created by God.ⁱⁱ

The Sunnah and FGM/C

Hadith (sayings or description of behavior attributed to the prophet Muhammad, peace be upon him), have varying degrees of authenticity.ⁱⁱⁱ The few hadith that are thought to be relevant to FGM/C are mostly weak or inauthentic. One such hadith states that the Prophet, peace be upon him, came across an instance of female circumcision and suggested that the cut not be excessive. Based on this, some Muslims believe a 'lighter' type of FGM/C (Type I or IV) is a legitimate tradition (sunnah).

The hadith that are strong and authentic do not directly refer to female circumcision, let alone support it. They make a passing reference to circumcised organs – using the Arabic term for male circumcision (khitan) in fact, not female circumcision (khifaadh) – but this has tended to be interpreted differently where there is any contextual scope for linguistic ambiguity.

Sunnah in Islam is also based on the direct example of the prophet Muhammad, peace be upon him, and there is no evidence that any of the females of his household were 'circumcised,' or that the practice was common among the early Muslims.

Islamic scholars on FGM/C

The opinion of scholars is highly regarded in Islamic jurisprudence but on the issue of FGM/C there is no consensus (ijma) among the four main schools of thought.^{iv} Despite disagreement as to the status of the practice from scholars within the four main schools, the broad positions are:

- ▶ **Hanafi school** – Circumcision is a Sunnah (an optional act) for males and females.
- ▶ **Maliki school** - Circumcision is wajib (obligatory) for males and sunnah for females.
- ▶ **Shafi'i school** - Circumcision is wajib for both males and females.^v
- ▶ **Hanbali school** - they have two views:
(i) Circumcision is wajib for both (ii) Circumcision is wajib for males and honourable (makrumah) for females.

A key point to note is that in their understanding, the ijmaa (agreed) opinion of the early classical Islamic scholars on female circumcision was based on hadith references, and permitted female circumcision because it was perceived as a means of increasing sexual pleasure for the female during marital intimacy as well as easing the process of intercourse for both male and female. However, scholars differed concerning the level of authenticity of the hadith references. The approved

ⁱⁱ "I will mislead them, and I will create in them false desires; I will order them to slit the ears of cattle, and to deface the (fair) nature created by Allah." (Qur'an, 4:119)

ⁱⁱⁱ Hadith are classified by scholars of hadith science as 'weak' or 'strong' according to their authenticity, based on evidence of how reliably they can be attributed to the prophet Muhammad, peace be upon him.

^{iv} The majority of Muslim communities where FGM/C is practised are Sunni and follow one of the four schools of Sunni thought.

practice was the removal of a part of skin (hood) that covers the clitoris. However there is difference on this and according to some it includes excess skin of the labia Minora. Unfortunately over time, and within some groups, the discourse changed to the detriment of women's wellbeing and this extended to a minority view outside of the madhahib (schools of jurisprudence) that the clitoris be removed or partly removed. The removal of the clitoris – or mutilation of any other part of the female genitalia – is not sanctioned in any of the four schools of thought, nor is FGM/C considered a means of reducing female sexual pleasure, as this directly violates a woman's human rights in Islam. Given that FGM/C is defined as injury for 'non-medical' reasons, one cannot use the term interchangeably with 'female circumcision' – which in the Islamic framework has a medical context. Even the minority of scholars who consider it obligatory require that the practice be performed at the direction of a medical professional - and certainly not against the will of the female.

Nevertheless, the fact that FGM/C has not been universally declared haraam (forbidden) in all its forms by any of the schools of thought means most subsequent scholars are reluctant to revisit the issue and explore the details, let alone outlaw it.^{vi}

FGM/C and male circumcision

Some proponents of FGM/C equate the practice with male circumcision but this has no basis in Shari'ah because analogical deduction (qiyas) in Islamic jurisprudence can only apply to 'similar' practices.

FGM/C is not comparable to male circumcision because: scholars agree that male circumcision is Islamic^{vii} while FGM/C is at best controversial; male circumcision involves the removal of a skin appendage while FGM/C involves cutting healthy organs; and there is no known harm associated with male circumcision, unlike FGM/C.

^v In the Shafi'i school of thought there were through the history of this school, three opinions on this issue, but the majority said it is wajib.

^{vi} This is despite the fact that religious rulings (fatwas) can adapt to their context, taking into account factors like time and place, available evidence, social norms and the changing needs of society.

^{vii} Male circumcision is an established practice from the time of the prophet Abraham, peace be upon him, whereas female circumcision pre-dates Islam.



The Islamic case against FGM/C

In making the Islamic case against FGM/C, an important point of principle is that rulings by scholars (fatwas) must help achieve the wider objectives of the Shari'ah, and should not be followed if they contradict the Qur'an and Sunnah.

The proven harm caused by FGM/C contradicts the objectives of the Shari'ah – to protect life and safeguard humanity – and that makes a strong Islamic case for advocating against it.

Another principle of Shari'ah is that a permissible (mubaah) practice can become prohibited (haraam) if it has proven harms. This gives Islamic scholars clear license to argue against FGM/C on the basis that it poses a huge health risk for women and damages their access to marital pleasure.^{viii}

In recent years there have been many rulings by leading Islamic scholars distancing FGM/C from Islam with some declaring it haraam^{ix} in all its forms. This includes a fatwa from the Sheikh of Al-Jami'at-Azhar Grand Imam Muhammad Sayyid Tantawy, who said female circumcision "has nothing to do with religion."^x



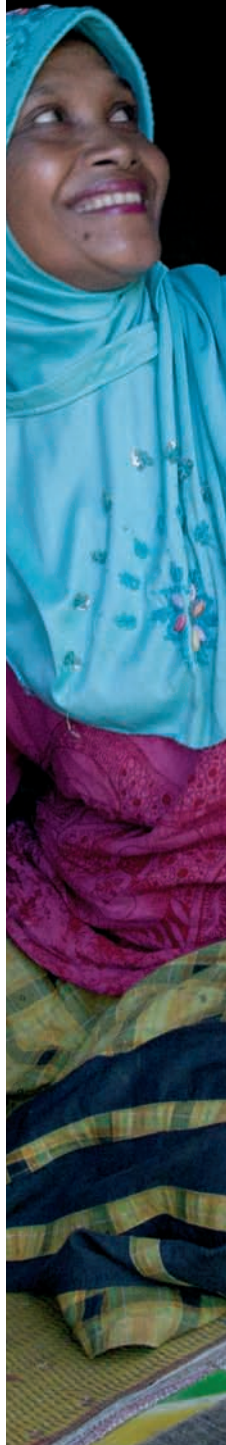
Two thirds of women, and almost two thirds of men, living in the 29 countries where FGM/C is most prevalent believe it should stop.¹⁹

Why FGM/C must end

FGM/C violates the rights of girls and women as enshrined in the Shari'ah¹⁷ as well as many national laws. It is widely recognised as a violation of internationally protected human rights, as stated in conventions on protecting the rights of the child and eliminating all forms of discrimination and violence against women.¹⁸

Shari'ah rights violated by FGM/C include:

- ▶ **The right to life and physical integrity**, especially where consent is not given, or where a mother or newborn dies due to complications caused by FGM/C.
- ▶ **The right to health**, which includes normal bodily functions – menstruation, sexual intercourse, childbirth – without complication.²⁰
- ▶ **The right to be free from gender discrimination**: God created men and women as equals but FGM/C is a form of control that subordinates women in society.
- ▶ **The right to information and education**, including the capacity to make informed health choices and the right to pursue education (FGM/C can be followed by early/forced marriage).
- ▶ **The right to protection for the child**: guardians have a moral responsibility to make decisions in the best interests of the child – which should never involve FGM/C.



^{viii} The Qur'an and hadith emphasise a woman's right to sexual pleasure in marriage, and it is endorsed and advocated by most religious leaders – including leading Shafi'i scholars – as a God-given right.

^{ix} By declaring FGM/C haraam, the practice can then be punishable, with some scholars proposing that it carries the same severity as one who deliberately severs the limb of another.

A young girl with dark hair, wearing a black top with a colorful pattern and a watch, is sitting on a wooden structure made of vertical planks. She is looking towards the camera with a slight smile. The background shows a wooden building and some greenery.

Why FGM/C is not Islamic:

- ▶ It is not mentioned in the Qur'an.
- ▶ The Prophet Muhammad (peace be upon him) never advocated for it, nor instructed it for any of his family, or anyone else.
- ▶ There are no authentic hadith linking the practice to Islam.
- ▶ The Qur'an warns against inflicting harm, or changing the form created by God.
- ▶ FGM/C violates the Shari'ah rights of women and girls, including physical health, sexual pleasure in marriage and psychological wellbeing.
- ▶ FGM/C was not permitted by any of the four schools of Islamic thought as a means of controlling women, restraining their sexuality or ensuring chastity.
- ▶ FGM/C is not a purification ritual in Islam, a rite of passage, or a practice that is thought to bring any health or spiritual benefit.
- ▶ FGM/C is a cultural practice, not an Islamic one, and Islam only allows for social customs (urf) if they do not contradict the Shari'ah.
- ▶ Even a practice that is permissible in Islam can become forbidden (haram) if the harm outweighs the benefit.
- ▶ Many scholars who understand what FGM/C entails, how it is currently practiced, and the un-Islamic drivers for it, have declared it haraam.

Why Islamic Relief must act

Islamic Relief has been working to alleviate global poverty and suffering for over 30 years, addressing its root causes and ensuring justice for all. Inspired by Islamic humanitarian values, Islamic Relief – one of the world's largest independent Muslim NGOs - works with all communities and particularly understands the religious and cultural context of Muslim communities.

It is our humanitarian imperative to end harmful practices, especially where they are wrongly attributed to religion. Islamic Relief has a critical role to play in targeting the supposedly 'religious' justification for FGM/C in all its forms - as part of general and multifaceted efforts to put an end to FGM/C as a whole.

The suffering caused by FGM/C has no religious or cultural justification - in any of its forms - and must be brought to an end.

Islamic Relief is committed to ending all forms of gender-based violence through its programmes and advocacy work, with a key focus on FGM/C, domestic violence and early/forced marriages. Eradicating FGM/C is also part of Islamic Relief's commitment to supporting reproductive health, and protecting children - given that it is often performed on girls and infants.

The loss of a single life, a lifetime of suffering or a denial of basic human rights is against the spirit of Islam. FGM/C poses all of these risks. FGM/C in any form, inflicted on any woman or girl, is one cut too many.

Efforts to eradicate FGM/C

Although wider awareness and research into FGM/C has increased in recent years, interventions aimed at eradicating the practice - by governments, human rights groups, UN agencies and other NGOs - have not always been effective.

There are several factors that prevent FGM/C being easily tackled, including: difficulty in monitoring the procedure as it is usually performed privately; inability of law enforcement agencies to enforce the law; and deep-rooted beliefs that are resistant to external intervention. There are often also wider social challenges where power relations are biased against women, gender-based violence is a norm and there is a lack of political will to address FGM/C.

Those working to eradicate FGM/C have employed a number of different strategies - from emphasising health risks to campaigning for human rights legislation - each of which has its benefits and limitations. International NGOs have often not understood - or engaged adequately with - the target community, which has led to resistance or change that is only short-lived.





Case study: Challenging FGM/C sensitively in Sudan

Islamic Relief is working to eradicate FGM/C in Sudan, where two thirds of all females undergo the procedure. A key part of our strategy is de-linking the practice from Islam and mobilising the community to lead the fight against it.

Sadig Sidieg, Islamic Relief's Child Protection Manager for Africa, says a sensitive, respectful and creative approach was needed.

"We held awareness-raising sessions on wider health issues, including FGM/C, and used mass media, group theatre and sports to explore the theme. Once a community is educated, they take the lead in encouraging friends, relatives and neighbours to join the movement for positive social change."

Sadig Sidieg says interventions must be framed in positive, aspirational terms, highlighting the benefits of an alternative approach rather than just criticising existing practices.

"Following our work in Khartoum State, we found the rates of the practice had fallen. A local imam confirmed he was opposed to the practice and supported Islamic Relief's work. We also found 82 per cent of mothers we spoke to - both formally and informally - were now openly opposed to the practice."

Islamic Relief's approach

Our vision: We will work to ensure justice for all through eliminating harmful practices like FGM/C and help make the world a place where every girl and woman is safe, healthy and free from harm.

Islamic Relief's strategy for eradicating FGM/C will involve two key aspects: including religion and faith as part of the solution, and tailoring interventions to the specific needs and sensitivities of the community.

Making the case with religious evidence

Islamic Relief will engage with communities and key stakeholders to raise awareness of the Islamic position on FGM/C and the ways in which the practice violates the Shari'ah. We will challenge beliefs and attitudes that wrongly attribute FGM/C to Islam and provide an alternative, religiously robust narrative to cultural norms.

Islamic Relief believes that religion has been misused to sustain FGM/C - but that religion can also provide the strongest case for ending the practice.

Islamic Relief will mobilise local scholars, religious bodies and other influential agents – male and female - to publicly de-link FGM/C from Islam. Where appropriate, this may involve training programmes for imams and community leaders. Islamic Relief will also work with religious bodies, academic institutions and governments to conduct research that will provide greater insight into the practice, as well as help develop policy positions and fatwas that support its abandonment.

Our advocacy and field teams will also work strategically with governments wherever possible to ensure FGM/C is criminalised, that legislation is enforced and that it has a real, lasting impact.

Tailoring interventions to local needs

Islamic Relief will take a multi-faceted approach to eradicating FGM/C, working with stakeholders at all levels and designing interventions to suit the specific needs of the target community. This involves understanding: the reasons for the practice; the type of FGM/C practiced and the attitude of the target community; the literacy level of the community; the 'gatekeepers' and key players to work with; the kind of approaches that may be most effective; and the reasons for the success or failure of previous interventions.

Islamic Relief will work sensitively and respectfully with local communities, understanding their traditions whilst creatively encouraging debate that will help eradicate the practice.

Islamic Relief will always aim to ensure its interventions are sustainable in the long-term by tackling the root causes and motivators for FGM/C and putting its effort into ensuring that the community takes ownership of the programmes aimed at eradicating it.





Recommendations

1. To ensure all interventions are based on extensive understanding of how and why FGM/C is practiced in the target community.
2. To learn from past interventions, assess the effectiveness and appropriateness of possible interventions and ensure programmes are tailored to the specific challenges in the target community.
3. To identify key players at all levels and form alliances, particularly with 'gatekeepers' and those who influence public opinion, in order that they can become community educators and agents for change.
4. To involve the community as implementers of programmes and ensure interventions target all stakeholders including religious scholars, women, youth, teachers, health workers, law enforcement agencies and the relevant government departments.
5. To ensure that where religion is used to justify the practice, local scholars and religious bodies are adequately engaged to de-link the practice from faith.
6. To ensure interventions are sensitive to local beliefs and customs whilst challenging FGM/C from within the framework of religion, human rights, gender justice and child protection.

Endnotes

¹ http://www.unicef.org/media/files/FGM-C_Report_7_15_Final_LR.pdf

² (WHO) (2013), 'Factsheet: Female genital mutilation' www.who.int/mediacentre/factsheets/fs241/en/

³ WHO (2013), 'Topics: Female genital mutilation and other harmful practices'

⁴ Classification of four types of FGM by WHO: <http://www.who.int/reproductivehealth/topics/fgm/overview/en/>

⁵ WHO FGM/C fact sheet No 241- 2000

⁶ UNICEF, November 2014 http://www.unicef.org/protection/files/00-FMGC_infographiclow-res.pdf

⁷ Female Genital Mutilation and Obstetric Outcome: WHO collaborative prospective study in six African countries (WHO, 2006) [www.who.int/reproductive-health/fgm/index.html]

⁸ <http://www.nhs.uk/Conditions/female-genital-mutilation/Pages/Introduction.aspx>

⁹ <http://www.who.int/mediacentre/news/releases/2006/pr30/en/>

¹⁰ For rate is 15% higher for those with FGC Type I and 32% higher in those with FGC Type II. See <http://www.who.int/mediacentre/news/releases/2006/pr30/en/>

¹¹ <http://www.nhs.uk/Conditions/female-genital-mutilation/Pages/Introduction.aspx>

¹² See Dr. Ashenafi Moges, 'What is behind the practice of FGM?' p.3

¹³ Lovel H., N. Bedri, Z. Mohamed, Y. Njikam, R. Moran, C. McGettigan, M. Khaled, M. Magied, and E. Dorkenoo. (2004) 'The practice of re-infibulations in the Sudan: Findings from systematic search of English and Arabic Literature'

¹⁴ Population Council 2007. Dr. Ashenafi Moges "What is behind the practice of FGM?"

¹⁵ For a more in-depth discussion, see Ibrahim Lethome Asmani & Maryam Sheikh Abdi's paper, 'De-linking

Female Genital Mutilation/Cutting from Islam'. USAID and Population Council 2008

¹⁶To read more see 'Female Circumcision: Between the Incorrect Use of Science and the Misunderstood Doctrine', International Islamic Center for Population Studies and Research, Al Azhar University, 2013

¹⁷ No Peace Without Justice (2005), 'Sub-regional Conference on Female Genital Mutilation: Towards a political and religious consensus against FGM' [www.npwj.org/FGM/Sub-Regional-Conference-Female-Genital-Mutilation-Towards-a-political-and-religious-consensus-a-7]

¹⁸ Some of these include:

- Convention on the rights of the Child (CRC). Premised on what is in the best interest of the child and clearly obligates State parties to protect children from all forms of physical or mental violence, injury or abuse.
- Convention on the elimination of all forms of discrimination against Women (CEDAW) premised on non-discrimination, and more specifically on:
 - Rejection of violence against women as it impedes the advancement of women and maintains their subordinate status.
 - Equality of women and men under the law; protection of women and girls through the rule of law.

These are in line with the UN Security Council resolutions 1325 and 1820.

- The 1948 Universal Declaration of Human Rights
- The 1966 International Covenant on Civil and Political Rights
- The 1966 International Covenant on Economic, Social and Cultural Rights.

¹⁹ http://www.unicef.org/media/files/FGM-C_Report_7_15_Final_LR.pdf

²⁰ WHO 'Female Genital Mutilation and Obstetric Outcome: WHO collaborative study in six African countries (accessed on 10th April 2009)





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