



General Assembly

Distr.: General
6 September 2010

English only

Human Rights Council

Fifteenth session

Agenda item 3

**Promotion and protection of all human rights, civil,
political, economic, social and cultural rights,
including the right to development**

**Joint written statement* submitted by the Sudan National
Committee on Harmful Traditional Practices (SNCTP), a
non-governmental organization in special consultative status,
and the African-American Society for Humanitarian Aid and
Development (ASHAD) a non-governmental organization on
the roster**

The Secretary-General has received the following written statement which is circulated in accordance with Economic and Social Council resolution 1996/31.

[23 August 2010]

* This written statement is issued, unedited, in the language(s) received from the submitting non-governmental organization(s).

Female genital mutilation**

1. Phenomena of Female Genital Mutilation/Cutting:

- Female genital mutilation/cutting (FGM/C) refers to all procedures involving partial or total removal of the external genitalia or other injuries to the female genital organs for cultural or other reasons that are not medical necessities.
- FGM/C reinforces the inequality suffered by girls and women and is a violation of universally recognized human rights – including the rights to bodily integrity and to the highest attainable standard of physical and mental health.
- While health consequences vary, they commonly include failure to heal, inflammatory diseases and urinary infections.
- Gynecological complications that result from female genital mutilation/cutting can become particularly serious during and after childbirth, and include fistula. Increased susceptibility to HIV infection is a concern.
- The pain of the procedure is known to cause shock and long-lasting trauma, and severe bleeding and infection can lead to death. Girls who do not experience chronic pain, serious bleeding or blood poisoning after the procedure often suffer complications during pregnancy, experience great pain during sexual intercourse, and suffer other gynecological problems and traumas later in life.”

2. Facts and Figures:

- FGM/C occurs mainly in countries along a belt stretching from Senegal in West Africa to Somalia in East Africa and to Yemen in the Middle East, but it is also practiced in some parts of south-east Asia. Reports from Europe, North America and Australia indicate that it is practiced among immigrant communities as well.
- It is estimated that more than 130 million women and girls alive today have been subjected to female genital mutilation/cutting.
- Whilst Sudan has had a law since 1946 now banning the most severe form of FGM the law is clearly insufficient as it does not ban all forms of FGM, and as it has failed to prevent the tragic death of Enaam a Sudanese little girl died after FGM operation. It has also failed to protect Sudanese girls and women at large, for an estimated 89 per cent of Sudanese women are subjected to FGM, and mostly to the most severe form, type 3 which is known as ‘Pharonic Circumcision’.
- As a result of little Enaam’s death on December 14th a group of Sudanese civil society organizations led by the Sudanese Nurses Union took to the streets in Khartoum to protest against Enaam’s death. They marched from the hospital in which she died, to the Ministry of Justice, to demand a law specifically banning all forms of FGM in Sudan. Medical report said that Enaam died due to excessive bleeding and blood poisoning after being submitted to this cruel tradition.

** The Sudanese Forum for Peace and Human Rights (SFPHR), an NGO without consultative status also shares the views expressed in this statement.

3. Human Rights and FGM:

There are many international treaties and conventions that condemn harmful practices. They include the following conventions:

- The Convention on the Rights of the Child (1989).
- The Convention on the Elimination of All Forms of Discrimination against Women (1979).
- The African Charter on the Rights and Welfare of the Child (1990).
- A specific focus on female genital mutilation/cutting is found in UN General Assembly Resolution 56/128 on Traditional or Customary Practices Affecting the Health of Women and Girls (2001).
- The Protocol on the Rights of Women in Africa, or Maputo Protocol (2003). The Protocol calls for the elimination of all forms of gender based violence and explicitly prohibits FGM.

4. FGM/C in Sudan:

Although there is a decrease in FGM/C in Sudan from 90% to 69.4%, but the percentage is still high. The penalty for an FGM/C offence will be 10 years' imprisonment and compensation to the family if it caused the death of the victim. The attempt, assisting in the procedure and abetment will be penalized with two-year jail terms. Those propagating FGM/C and operating places where it is committed will also be punished and repeat offenders imprisoned for life.

Many efforts have been conducted in to combat FGM/C in Sudan, among these efforts are:

- A national strategy was launched in Sudan in (2008-2018) with the aim of total abolition and zero tolerance within 10 years. The strategy addresses the religious, social, health, and cultural dimension of FGM/C.
- The National Council for Child Welfare, a government authority is coordinating the campaign in collaboration with UNICEF to abolish FGM/C in Sudan.
- The Sudanese medical council issued a very important decree to ban all types of (FGM) practice in Sudan. According to dr. imam Siddig, the secretary general of the council, this decree was issued after a broad and wide discussion. He stated that the council will strongly follow the implementation of this decree and any medical doctor to violate this decree will be harshly punished and this punishment can be suspension of the doctor's license.
- Inter African committee on traditional harmful practices and Sudan national committee on harmful traditional practices (SNCTP) has launched a continuous campaign for the past 25 years to abolish (FGM) not only in Sudan but also in the whole African continent.
- Dr. Balgis Badri comments on that by saying (FGM/C) punishment must extend to any medical personnel particularly the midwives.

5. FGM/C in Sudan: Critical analysis:

- The previous Sudanese council of ministers issued a decree on child rights law. Although that was a most serious and genuine development towards achieving child

rights in Sudan, but unfortunately the ministerial decree decided to omit FGM/C in the proposed law!?!.

- The council of ministers omitted article (13) out of the proposed child's law for the year 2009. Article (13) prohibits all forms of FGM/C because it was considered as one of the most serious form of harmful traditional practices against women and children in Sudan.
- Many human rights activist and women leaders said that the council of minister's decision is inconsistent to many official agreed documents i.e.: the article (32) of the national constitution, the strategic indicators for the period (2007- 2031) ,the National Population Policy 2002 issued by the council of ministers 48 for the year 2004, The National Policy for Women Empowerment issued by the Ministry of Social Welfare Women and Child Affairs in March 2007 and signed by the president of the Republic, Sudan medical council decision no. 366.
- It is obvious that the council of minister has been affected negatively by pressure exerted by some religious group advocating that FGM/C is part of Sunni.
- While this controversy is going for a long time trying to legalize FGM/C from an Islamic point of view, but most Islamic leaders issued fatwa that FGM/C is not part of genuine Islam.
- The ongoing practices in the Islamic countries like Saudi Arabia and other Islamic countries abandoned FGM/C.
- It worth mentioning that the Sudanese council of ministers issued a new law for child welfare. While the law can be considered as positive legal frame work for protection of child human rights but a tremendous efforts needs to be conducted to abolish FGM in Sudan as many reports speaks about the magnitude of FGM phenomena in Sudan.
- Sudan national council for child welfare is undertaking its mandate under the umbrella of the newly found ministry of social security to combat FGM in Sudan. Both the Ministry and the child council needs to be augmented to accomplish the mission of child rights protection in Sudan.

6. (ASHAD) and SUDAN (SNCTP) request to adopt the following recommendations:

- Bringing an End to Female Genital Mutilation in the Sudan.
- Do everything in your power to bring an end to the death and suffering of girls and women in Africa due to FGM.
- Urge all concerned parties to live up to these international obligations and genuine shariya jurisprudence in terms of FGM/C, as well as to ensure that adequate care and support is provided to girls and women who have undergone FGM.
- Demand a law specifically banning all forms of FGM in Sudan.
- Issue Information about protection against FGM/C at the birth of every girl and incorporated into school curricula.
- To focus on creating awareness, especially among influential communities, where the practice is particularly prevalent, to mobilize support for the collective abandonment of FGM/C throughout Africa.

- Focusing on ensuring that the high-profile areas are aware of the FGM act and of the punishment for engaging in the practice.
 - Appeal to support the Ministry of Social Security and the National Council for Child Welfare, and to augment both institutions so as to accomplish the mission of child rights protection in Sudan.
 - Launch a National campaign in collaboration with National NGOs and specialized UN agencies to abolish FGM/C in Sudan in specific and Africa in general.
-