

Understanding Female Genital Mutilation/Cutting (FGM/C) in Massachusetts – A Guide for Service-Providers

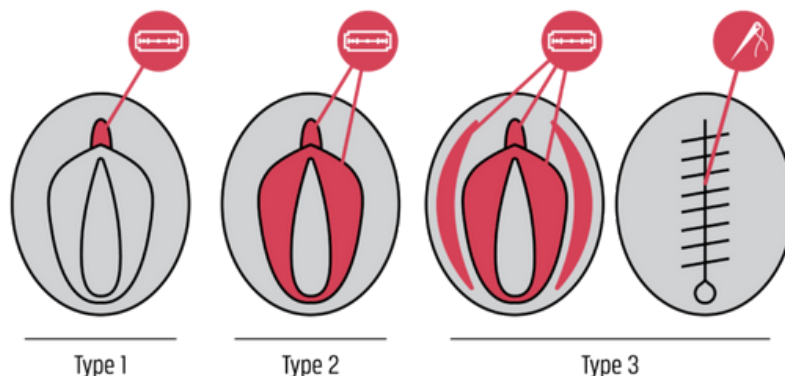
What is FGM/C?

The World Health Organization (WHO) defines FGM/C as **all procedures that involve partial or total removal of the external female assigned genitalia, or other injuries to the female assigned genital organs for non-medical reasons.** Communities impacted by FGM/C may use different terms for FGM/C that vary depending on specific cultures, religions, languages, and more. Other terms referring to the practice include *khatna*, *khafz*, *khitan*, *sunnah*, *bondo*, etc.

FGM/C is internationally recognized as a human rights violation and a form of gender-based violence. It is performed for a variety of reasons, including to control sexuality, to ensure virginity until marriage, to prevent promiscuity, tradition, culture, religion, false ideas around health and hygiene, social identity, and more. FGM/C typically occurs on minors, anywhere from infancy to adolescence or 0 to 15 years, although it also happens to adult women. The context and circumstances surrounding FGM/C can vary among and within communities impacted by FGM/C.

FGM/C happens globally, and it's happening in Massachusetts.

Different types of female genital mutilation



- **Type 1:** Removal of the clitoral hood with or without removal of part or all of the clitoris
- **Type 2:** Partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (excision)
- **Type 3:** Narrowing of the vaginal orifice with creation of a covering seal by cutting and appositioning the labia minora and/or the labia majora, with or without excision of the clitoris (infibulation)
- **Type 4:** Other – including pricking, piercing, cauterizing, etc.

Negative Impacts of FGM/C

Survivors of FGM/C may experience the following negative impacts related to undergoing FGM/C. Please note that all survivors' experiences are different, and not all survivors experience the same negative impacts.

Physical:

- **Sexual Health:** Pain during sexual intercourse, vaginismus (painful muscle contractions), and a lack of sexual pleasure. The physical damage can also cause long-term discomfort and issues with sexual function.
- **Childbirth:** Complicated childbirth, leading to disrupted labor, the need for a C-section, postpartum hemorrhage, and an increased risk of infant and maternal death. Infertility is due to physical damage to the genital area.
- **Urinary and Vaginal Health:** Chronic urinary tract problems, painful menstruation, and genital scars that result in cysts, infections, and pelvic pain, increased risk of vaginal and pelvic infections.
- **Death:** Complications from FGM/C, such as infections, excessive blood loss, and organ damage, can lead to death.

Psychological

- **PTSD:** PTSD may include symptoms like nightmares, flashbacks, and severe anxiety.
- **Depression/Anxiety:** Struggling with feelings of guilt, sadness, and shame. Fear of further harm, coupled with feelings of isolation, can lead to ongoing anxiety, heightened stress, or nervousness around sexual intimacy or healthcare visits.

- **Body Image Issues:** Negative or distorted view of one's body, particularly regarding sexual identity. Survivors may feel disconnectedness or dissatisfaction with their bodies, affecting self-esteem, and challenges in forming intimate relationships.

FGM/C Globally

FGM/C occurs in at least 94 countries around the world, according to a study by Equality Now, The U.S. End FGM/C Network, and End FGM European Network. At least 230 million girls and women alive today have undergone FGM/C, according to UNICEF.

FGM/C in the United States and Massachusetts

A 2023 study estimates that FGM/C impacts up to 577,000 women and girls in the U.S.

Massachusetts Prevalence

According to a 2013 Population Reference Bureau study, 14,211 women and girls in the state of Massachusetts have been affected by FGM/C.

According to a more recent study conducted by Sean Callaghan, Head of Research at Orchid Project, from 2015 to 2019, 9,416 women and girls were likely living with FGM/C and 697 girls were likely at risk of FGM/C in Massachusetts.

- The majority of those impacted by FGM/C reside in Middlesex, Suffolk, and Norfolk counties.
- Specifically, most of those impacted live in the greater Boston-Cambridge-Newton and Providence-Warwick metropolitan areas.
- Over 60% of the impacted population in the state identified as Egyptian (20.9%), Somali (17%), Ethiopian (13.8%), or Nigerian (13.7%).
- Girls at risk from the study are predominantly Egyptian, Somali, Ethiopian, Sudanese, and Liberian.

Important Note: An estimated 270 women and girls from the Dawoodi Bohra community live in Massachusetts and are not included in the population extrapolation calculation. Furthermore, Nigerian and Indonesian girls are likely underrepresented in this data since they are cut at a very young age, resulting in most girls being encoded as already living with FGM/C.

It is estimated that 1,643 women were living with Type 3 FGM/C in Massachusetts. While all survivors may require some level of medical and mental health support, those living with Type 3 would likely require additional medical attention.

Please be aware that the available data on FGM/C globally, in the U.S., and in Massachusetts are based on estimates and are most likely an under-representation of the true impact. This is attributed to several factors: existing methodological constraints, challenges in gathering prevalence data from all communities affected by FGM/C, and the significant silence and misunderstanding surrounding both the global prevalence and the diverse communities that continue this harmful practice.

Legislation in Massachusetts

Massachusetts Governor Charlie Baker signed Bill H4606, "An Act Relative to the Penalties for the Crime of Female Genital Mutilation," into law ([Chapter 149 of Acts of 2020](#)) on August 6, 2020.

Key Components of the Law:

- **Criminal Prohibition:** Illegal to perform FGM/C on a minor or transport a minor for FGM/C
- **Invalid Defenses:** Custom, ritual, or consent (from minor or parent/guardian) are NOT valid defenses
- **Medical Exception:** Medical procedures performed by licensed providers for health preservation or gender reassignment are not prohibited
- **Civil Remedy:** Survivors can file civil lawsuits against perpetrators within 10 years
- **Education and Prevention:** Requires the Commissioner to develop education programs and train healthcare providers

***In Massachusetts, female genital mutilation or cutting (FGM/C) is legally considered a form of child abuse. It is not specifically called out in the state's Mandatory reporting laws, but the Massachusetts Department of Children and Families (DCF) has confirmed that FGM/C is considered child abuse. Mandated reporters who have reasonable cause to suspect that a child is a victim of FGM/C are legally required to report it to the DCF.**

Criminal Penalty

- Imprisonment: Up to 5 years in state prison OR up to 2½ years in the house of correction
- Fine: Up to \$10,000
- Civil Liability: Victims can sue for actual, compensatory, and punitive damages; treble damages may be awarded for willful and malicious acts

HOPE MA - Holistic Organized Partnerships to End FGM/C in Massachusetts

HOPE-MA is building a coordinated statewide system through cross-sector collaboration that establishes survivor-led, culturally sensitive support networks embedded within existing community structures to address female genital mutilation/cutting (FGM/C). Our comprehensive approach improves health outcomes for survivors through accessible, trauma-informed care while preventing future cases by shifting societal norms toward bodily autonomy and gender equity. This vision unites healthcare, social services, law enforcement, and community organizations in a cohesive response framework that addresses both immediate needs and long-term systemic change throughout Massachusetts. To learn more, visit maendfgmc.org or linktr.ee/MASystemsofCaretoEndFGM.

Training & Technical Assistance Support in MA

- [Sahiyo](#)
- [The U.S. End FGM/C Network](#)
- [UMASS Chan Medical School](#)

How can you get involved in the prevention of FGM/C?

- Raise awareness about the harmful impacts of FGM/C
- Amplify the voices of survivors of and advocates working to end FGM/C
- Learn more about supporting survivors and communities impacted by FGM/C
- [Schedule a meeting](#) to discuss FGM/C education and training needs

Contact Us



info@sahiyo.org



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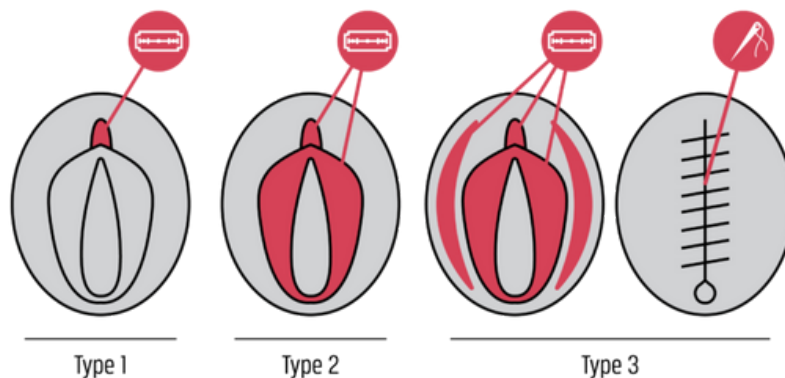
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FGM/C in the United States and Massachusetts

A 2016 study by the Centers for Disease Control and Prevention (CDC) estimates that FGM/C impacts over half a million women in the U.S.

Massachusetts Prevalence

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Training & Technical Assistance Support in MA

- Sahiyo: <https://sahiyo.org/programs/training-and-technical-assistance/hope-ma.html>
- The U.S. End FGM/C Network: <https://www.endfgmnetwork.org/>
- UMASS Chan Medical School: <https://www.umassmed.edu/che/>

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- Amplify the voices of survivors of and advocates working to end FGM/C
- Learn more about supporting survivors and communities impacted by FGM/C
- Schedule a meeting at <https://calendly.com/sahiyo-usa/introductory-ma-fgm-c-meeting> to discuss FGM/C education and training needs.

Contact Us



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