

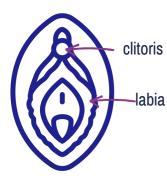




# FEMALE GENITAL MUTILATION (FGM) AND DISABILITY

## GLOSSARY

## Female Genital Mutilation (FGM):



#### Examples:





pains

lower

limbs





It is a practice that involves the **damaging of the external female genitalia** (private parts between the legs), notably the **clitoris**, for **non-medical reasons**. FGM is most often practised on girls under 18. It is abuse and a **violation of human rights**. It is practised in diverse communities around the world and is often about controlling the bodies and sexualities of women. This is **a form of gender-based violence**.

#### **Disability:**

The first article of the United Nations Convention on the Rights of Persons with Disability (CRPD) defines persons with disabilities as those who have long-term physical, mental, intellectual or sensory impairments. These impairments, in interaction with various barriers, may hinder their full, equal and effective participation in society.

There is a distinction between disability, which refers to the **interaction between someone's impairment and their environment** (human-rights-based approach) and the impairment itself (medical approach). Impairment is "an injury, illness, or congenital condition that causes or is likely to cause a loss or difference of physiological or psychological function."

#### **Holistic Health**

This is an **approach to health** that is focused on the person's **well-being as a whole**. This includes physical, psychological, emotional, social, spiritual and sexual health.

#### Accessibility

Accessibility is the characteristics, elements and functionalities of products, devices, services, systems and environments that **ensure equal access to persons with disabilities**, including those using assistive technologies. It is a **prerequisite** for persons with disabilities to **live independently** and participate fully and equally in society.





# HOW ARE FGM AND DISABILITY RELATED?



Female Genital Mutilation can happen to **anyone with female genitalia**. This means that **people and children with disabilities** can also be at risk or be Survivors of the practice.



Female Genital Mutilation can cause severe **life-long consequences** both on the physical and mental health of Survivors. These consequences, ranging from chronic infections and chronic pain to mental illnesses, can have a long-lasting **impact on the ability of Survivors to access and enjoy normal activities**. The consequences of FGM mean that it can create impairments in some Survivors, and thus lead to disability.



The **hostile environment** that **persons with disabilities** face (due to inaccessibility, stigma, discrimination, etc...) can make it **more challenging** to seek help and protection when at risk of being subjected to FGM. It can also create **specific needs** in terms of care and support for FGM Survivors with disabilities.



FGM and Disability are both **sensitive topics** that are often overlooked and misunderstood. FGM survivors with disabilities are **less likely to have their rights and needs advocated for and protected**.



Then, how can we provide for people at the intersection of FGM and Disability?



#### Providing for people at the intersection of FGM and Disability:



There is a **lack of research** on the overlaps between Disability and FGM. We need to collect more data about how they intersect to make sure to **include everyone** in our work.



**Information and services** for FGM Survivors should **be accessible to all**, including persons with disabilities, regardless of administrative status and/or financial resources.



Facilities delivering services should be accessible for persons with disabilities. Information on FGM support should be made available in **different accessible formats**. It includes easy-to-read, information in sign language, and information in braille and large formats.



**Healthcare providers** and **social workers** need to be **trained** on how to support persons with disabilities and FGM Survivors with a holistic health approach.



Prevention of FGM must seek to protect **all** people at risk. Helplines, safe houses and support centres must be **child-friendly**, **culturally sensitive and accessible** for all persons with disabilities.

# **WORDS MATTER!**

When referring to people who have had FGM, call them FGM Survivors, not victims.

When referring to persons with disabilities, there is **no consensus** on **identity-first** (disabled person) or **person-first language** (person with disabilities). The European Disability Forum uses "persons with disabilities".

FGM is a **harmful practice**; **avoid using words** like "inhuman", "barbaric", and "disgusting" **which can cause more hate** towards communities and Survivors.

Avoid terms that imply that persons with disabilities are not normal or of less value than others. Terms such as "handicapped people", "differently abled", "handicapable", and "special needs" are to be avoided.

To talk about FGM, **avoid using graphic language and images** that can be triggering for Survivors.

Assistive **devices** (wheelchairs, hearing aids...) **provide freedom** and do not constrain. Avoid terms such as "wheelchair-bound" and **defer to user-related terms** like "wheelchair user".

When in doubt: ask people/organisations directly what language they prefer!



