



TEXTS ADOPTED

Provisional edition

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Zero Tolerance for female genital mutilation

European Parliament resolution of 7 February 2018 on zero tolerance for Female Genital Mutilation (FGM) (2017/2936(RSP))

The European Parliament,

- having regard to Articles 8 and 9 of the Victim’s Rights Directive (2012/29/EU) of 25 October 2012¹ on the obligatory provision of support services to victims of violence, including those of FGM,
- having regard to Articles 11 and 21 of the Reception Conditions Directive (2013/33/EU) of 26 June 2013² which specifically mentions victims of FGM amongst vulnerable persons who should receive appropriate healthcare during their asylum procedure,
- having regard to Article 20 of the Qualification Directive (2011/95/EU) of 13 December 2011³, where FGM as a serious form of psychological, physical or sexual violence is included as a ground to be taken into consideration for international protection,
- having regard to its resolution of 6 February 2014 on the Commission communication entitled ‘Towards the elimination of female genital mutilation’⁴,
- having regard to its resolution of 14 June 2012 on ending female genital mutilation⁵, which called for an end to FGM worldwide through prevention, protection measures and legislation,
- having regard to the EU Annual Reports on Human Rights and Democracy in the World,
- having regard to the Council conclusions of June 2014 on preventing and combating all forms of violence against women and girls, including female genital mutilation,
- having regard to the Council conclusions of March 2010 on eradication of violence

¹ OJ L 315, 14.11.2012, p. 57.

² OJ L 180, 29.6.2013, p. 96.

³ OJ L 337, 20.12.2011, p. 9.

⁴ OJ C 93, 24.3.2017, p. 142.

⁵ OJ C 332 E, 15.11.2013, p. 87.

against women in the EU,

- having regard to the Commission Communication of 25 November 2013 entitled ‘Towards the elimination of female genital mutilation’ (COM(2013)0833),
- having regard to the Joint Statement of 6 February 2013 on the International Day against Female Genital Mutilation, in which the Vice-President of the Commission / High Representative and five Commissioners confirmed the EU’s commitment to combatting FGM in its external relations,
- having regard to the EU Action Plan on Human Rights and Democracy 2015-2019, in particular Objective 14(b),
- having regard to the 2030 Agenda for Sustainable Development, in particular target 5.3 on eliminating all harmful practices, such as child, early and forced marriage and female genital mutilation,
- having regard to the Gender Action Plan 2016-2020,
- having regard to the European Institute for Gender Equality report of 2013 on ‘Female genital mutilation in the European Union and Croatia’,
- having regard to the Council of Europe Convention of 2014 on preventing and combating violence against women and domestic violence (Istanbul Convention),
- having regard to its resolution of 12 September 2017¹ on EU accession to the Istanbul Convention on preventing and combating violence against women and domestic violence,
- having regard to the Declaration of the Council of Europe Committee of Ministers of September 2017 on the need to intensify the efforts to prevent and combat female genital mutilation and forced marriage in Europe,
- having regard to the UN General Assembly resolution of 20 December 2012 on ‘Intensifying global efforts for the elimination of female genital mutilations’ (A/RES/67/146),
- having regard to the Cotonou Agreement,
- having regard to the EU-UN Spotlight Initiative of 2017 on eliminating violence against women and girls,
- having regard to the question to the Commission on zero tolerance for Female Genital Mutilation (FGM) (O-000003/2018 – B8-0005/2018),
- having regard to the motion for a resolution of the Committee on Women’s Rights and Gender Equality,
- having regard to Rules 128(5) and 123(2) of its Rules of Procedure,

¹ Texts adopted, P8_TA(2017)0329.

- A. whereas the 2030 Agenda for Sustainable Development explicitly calls for the elimination of female genital mutilation alongside harmful practices under Goal 5 ‘Achieve gender equality and empower all women and girls’;
- B. whereas FGM is a practice underlined for special attention within Objective 14 ‘Promoting gender equality, women’s rights, empowerment and participation of women and girls’ of the EU Action Plan on Human Rights and Democracy 2015-2019;
- C. whereas the Gender Action Plan 2016-2020 (GAP II) under Thematic Priority B: ‘Physical and Psychological Integrity’ includes as an indicator the percentage of girls and women aged 15-49 years who have undergone FGM;
- D. whereas, as a detrimental practice of a transnational nature, FGM is now recognised as a global issue, with the 2030 Agenda on UN sustainable development goals identifying it as a harmful practice which is to be eliminated by the year 2030;
- E. whereas UNICEF’s 2016 statistical report states that a minimum of 200 million girls and women worldwide have undergone FGM, but the exact figure remains unknown;
- F. whereas FGM – still being traditionally practised in certain parts of the African continent but also in parts of the Middle East, Asia and Oceania – also poses a problem in the European Union, with severe consequences for the women and girls affected;
- G. whereas, although uneven, there has been progress over the past three decades, with the prevalence rates dropping by some 30 %; whereas this progress could nevertheless be offset by population growth, meaning that a greater number of girls and women will undergo the procedure;
- H. whereas local communities are often the greatest single influence on the decision by parents to cut their female children or by women choosing to undergo FGM;
- I. whereas although there is no religious requirement to perform FGM, a strong presence of religion in many practicing communities makes it necessary for religious and other leaders to be engaged in the movement against FGM;
- J. whereas, in order to devise an appropriate eradication strategy, this practice must always be examined in the local context;
- K. whereas FGM is often non-dissociable from other gender inequality issues and appears as only one of many violations against women’s rights such as: lack of access to education for girls, including comprehensive sex education; lack of work or employment for women; the inability to own or inherit property; forced or early child marriage; sexual and physical violence; and lack of quality healthcare, including sexual and reproductive health and rights services;
- L. whereas FGM shares the premise of control over women’s bodies with other forms of gender-based violence and violates a woman’s right to health, security and bodily integrity and, in some cases, even her right to life;
- M. whereas, while prevention represents a more desirable pathway to abandonment of FGM than prosecution given that offenders, aiders and abettors are frequently the parents of a victim, there is an evident need to also remove obstacles to the prosecution

of FGM cases, while taking into account the best interests of the child;

1. Notes a drop in the prevalence rates of FGM as a result of decisive actions and awareness-raising, and encourages all actors to continue their efforts in order to preserve the momentum in countries where FGM is prevalent;
2. Sees this momentum as an opportunity for international organisations and states to step up their efforts, primarily through creating links and connections between different regions, stakeholders and sectors in order to actively work together to achieve the abandonment of this and other practices that are harmful to a girl child, who may suffer the physical, psychological and emotional consequences for the whole of her life;
3. Recognises the invaluable work of the organisations working with communities on the ground both in the EU and outside on prevention and awareness-raising and in advocacy, and recognises that building bridges between them is a necessity if FGM is to become a thing of past;
4. Calls on the Commission and Member States to mainstream the prevention of FGM into all sectors, especially health including sexual and reproductive health, social work, asylum, education including sex education, law enforcement, justice, child protection, and media and communication;
5. Underlines that, under Article 38 of the Istanbul Convention, the Member States have the obligation to criminalise FGM, as well as incitement, coercion or procurement of a girl to undergo it, and that the Convention protects not only girls and women at risk from FGM, but also girls and women who suffer the lifelong consequences of this practice (in situations such as re-infibulation, asylum-related situations, access to care, etc.); stresses that the Istanbul Convention lays down that culture, custom, religion, tradition or so-called ‘honour’ cannot be a justification for any acts of violence against women;
6. Calls on the EU and those Member States which have not yet ratified the Council of Europe’s Istanbul Convention on preventing and combating violence against women to do so without delay so that the EU’s commitment complies with international standards promoting a holistic and integrated approach to violence against women and to FGM;
7. Is pleased to note that the criminal law in all Member States protects girls and women from FGM either explicitly or implicitly, but is extremely concerned about its apparent ineffectiveness, having witnessed only a handful of legal cases in the EU;
8. Notes with concern that the enforcement of laws and, specifically, prosecution is a challenge in all Member States and countries of origin; invites the Commission therefore to facilitate targeted training for relevant actors on detection, investigation and prosecution of FGM; calls on the Member States to be more vigilant when it comes to detecting, investigating and prosecuting cases of FGM;
9. Observes that criminal law and targeted training must go hand in hand with the efforts to raise awareness in order to disincentivise practitioners from continuing the practice;
10. Recognises that an important difference between FGM and other forms of gender-based violence is the lack of bad intention behind the act, and stresses that, while this can in no way serve as a justification, it must be considered in strategies aimed at

abandonment;

11. Deplores the rising medicalisation in certain countries and insists that this is an unacceptable answer to addressing the root causes, as already established by the UN and WHO; invites Member States to explicitly outlaw the medicalisation of FGM while raising awareness of medical staff about this problem;
12. Underlines that FGM is one of the most predictable forms of gender-based violence and invites the Commission and Member States to guarantee strong preventive action in refugee camps; calls on the Commission to further include prevention of FGM and other harmful practices within integration procedures and the Asylum, Migration and Integration Fund (AMIF) and to provide relevant information through the EU Asylum Agency;
13. Asks for the highest standards of protection for asylum seekers on grounds relating to FGM within the framework of the reform of the Common European Asylum System and the revision of the Asylum Directives, and through the role of the new EU Asylum Agency;
14. Looks forward to the establishment of the global network which will form connections between relevant actors from all parts of the world in order to bring ideas together and join forces; invites the Commission to provide support to this important network;
15. Calls on the Commission to respond to the calls by civil society for funding to be flexible enough that grassroots organisations which carry out their work in the community can apply for funding, that an array of girls' and women's rights issues can be addressed alongside FGM using a holistic approach, and that connections can be established between organisations working in the EU and those working in the practicing countries; welcomes in this respect the work of the End FGM European Network and its members, including through the Change Plus project, in training representatives of local communities to promote not only legislative change but also behaviour change in their communities;
16. Invites the Commission and Member States to keep data on the prevalence of FGM and its types, and to involve academia in the process of data collection, research and the education of future generations of professionals on FGM; recognises that the European Migration Network can play a role; considers that a joint research agenda on FGM would allow universities in practicing areas to connect with EU universities in order to organise exchange programmes, improve data collection and improve the capacities of future professionals in different sectors;
17. Invites the Commission and the Member States to include basic information on FGM and other practices harmful to a girl child in the educational programmes of those disciplines that play a key role in the prevention of FGM;
18. Stresses that, notwithstanding its local context, FGM should be seen in the context of gender-based violence and as a gender equality issue and should be tackled by a comprehensive approach so as to avoid the vilification of communities where it is practiced;
19. Emphasises that ensuring that all girls attend school, and developing the preconditions

for the economic empowerment of women, are the first steps towards elevating the position of women in practicing communities;

20. Draws attention to the potential and power of various communication avenues such as art, literature, new and local media to bring messages closer to the people; emphasises the importance of involving boys and men in creating new narratives on gender equality and in combating existing power structures through networks, peer programmes, information campaigns and training programmes;
21. Invites the Commission to assist Member States and practicing countries in setting up networks and integrated strategies for the prevention of FGM, including the training of social workers, medical personnel, community and religious leaders, and police and justice officers; recognises that no religion advocates this practice;
22. Calls on the Commission to include the issue of FGM and other practices harmful to women and girls in its human rights dialogues and diplomatic outreaches; calls on the EEAS and on the Member States to step up cooperation with third countries to encourage them to adopt national laws banning FGM and to support law enforcement authorities in ensuring implementation;
23. Notes with appreciation that the Delegations and the EEAS are trained each year on FGM within a children's rights or gender training framework, and invites the Commission to make its tools such as the 'United to end FGM' toolkit for different sector professionals widely known and available to the target populations;
24. Instructs its President to forward this resolution to the Commission and the Council of the European Union.