

GAO Highlights

Highlights of [GAO-16-485](#), a report to the Minority Leader, U.S. Senate

Why GAO Did This Study

More than 200 million girls and women alive today have undergone FGM/C in the 30 countries where available data show this harmful practice is concentrated. More than 3 million girls are estimated to be at risk for FGM/C annually in Africa. FGM/C comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs. It is rooted in the cultural traditions of many communities but has several adverse health consequences and the UN identifies it as a violation of human rights. In 2015, the UN General Assembly adopted a set of 17 Sustainable Development Goals for 2030 that included the elimination of FGM/C among its targets. UNFPA and UNICEF implement the Joint Program on FGM/C in 17 countries—the largest current international assistance effort to address FGM/C. State and USAID include FGM/C as part of their global strategy to respond to gender-based violence.

GAO was asked to review State's and USAID's efforts to address FGM/C abroad. This report (1) summarizes findings from recent U.S. and UN studies about factors contributing to FGM/C and approaches to addressing this practice and (2) examines State's and USAID's current efforts to address FGM/C abroad. GAO reviewed recent UN and USAID studies on assistance efforts to address FGM/C, analyzed related strategies and policies, and interviewed State and USAID officials. GAO also analyzed information on FGM/C-related projects and activities from USAID's overseas missions, and State and USAID bureaus.

GAO is making no recommendations in this report.

View [GAO-16-485](#). For more information, contact David B. Gootnick at (202) 512-3149 or gootnickd@gao.gov.

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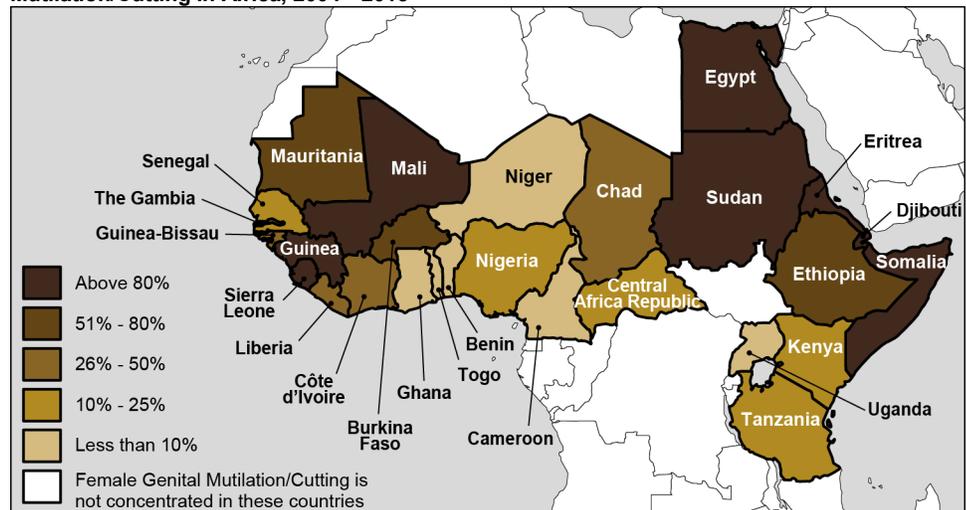
FEMALE GENITAL MUTILATION/CUTTING

U.S. Assistance to Combat This Harmful Practice Abroad Is Limited

What GAO Found

U.S. and United Nations (UN) studies since 2010 have identified a variety of factors contributing to the persistence of female genital mutilation/cutting (FGM/C). In many communities where FGM/C is prevalent, FGM/C is an influential social norm that ensures social acceptance and is commonly perceived as a religious obligation. In addition, medicalization of the practice—when it is performed by health care providers rather than traditional practitioners—increases the perception of legitimacy in some countries. Although the United Nations Children's Fund (UNICEF) reports that many countries where FGM/C is prevalent have passed laws banning the practice, enforcement is a challenge. The studies also have identified key approaches to addressing FGM/C, including efforts to implement community education programs, outreach and training for medical professionals, and the inclusion of FGM/C in broader gender equality and human rights programs.

Percentages of Girls and Women Aged 15 to 49 Who Have Undergone Female Genital Mutilation/Cutting in Africa, 2004–2015



Source: United Nations Children's Fund based on nationally representative surveys from 2004 to 2015 (data); Map Resources (map). | GAO-16-485

U.S. assistance efforts to address FGM/C are limited. The Department of State (State) and the U.S. Agency for International Development (USAID) each had one active standalone project in 2014, and the agencies also undertook some FGM/C-related efforts as components of projects with broader assistance goals. In addition, the U.S. government provides funding to the United Nations Population Fund (UNFPA) and UNICEF but, to date, has not contributed funds to the UN agencies' Joint Program on FGM/C. If congressional restrictions for UNFPA funding (such as the requirement for UNFPA to maintain U.S. funds in a separate account) are met, there are currently no specific legal restrictions that would prohibit U.S. funding provided to UNFPA from being available for the Joint Program on FGM/C. Competing development priorities, such as HIV/AIDS, leave little funding specifically for FGM/C, according to USAID officials.