Human Rights Council
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Agenda item 3
Promotion and protection of all human rights, civil, political, economic, social and cultural rights, including the right to development

Resolution adopted by the Human Rights Council on 17 July 2020

44/16. Elimination of female genital mutilation

The Human Rights Council,

Guided by the purposes and principles of the Charter of the United Nations,

Reaffirming the Universal Declaration of Human Rights,

Recalling the International Covenant on Economic, Social and Cultural Rights, the International Covenant on Civil and Political Rights, the Convention on the Elimination of All Forms of Discrimination against Women, the Convention on the Rights of the Child and the optional protocols thereto, the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families and all other relevant international human rights instruments,

Reaffirming that the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women, together with the optional protocols thereto, constitute an important contribution to the legal framework for the protection and promotion of the human rights and fundamental freedoms of all women and girls,

Recalling General Assembly resolution 73/149 of 17 December 2018, on intensifying global efforts for the elimination of female genital mutilation, and all other relevant resolutions of the Assembly and the Commission on the Status of Women on measures to eliminate traditional practices that are detrimental to women’s and girls’ enjoyment of human rights, as well as Human Rights Council resolution 38/6 of 5 July 2018 on the elimination of female genital mutilation and other Council resolutions on the same topic,

Recalling also the Vienna Declaration and Programme of Action, the Programme of Action of the International Conference on Population and Development, the Beijing Declaration and Platform for Action and the outcome documents of their review conferences,

Recalling further the commitment made by States to achieve gender equality and the empowerment of all women and girls in the 2030 Agenda for Sustainable Development and the Addis Ababa Action Agenda of the Third International Conference on Financing for Development,
Recalling the annual commemoration of the International Day of Zero Tolerance for Female Genital Mutilation, on 6 February, with the aim to enhance awareness-raising campaigns and to take concrete action against female genital mutilation,

Recognizing that, like all other harmful practices, including child, early and forced marriage, female genital mutilation constitutes a human rights violation and a form of violence against women and girls that is mainly motivated and perpetuated by gender inequality and discriminatory social norms that jeopardize the recognition, enjoyment and exercise of their human rights and fundamental freedoms while posing a serious threat to their health and well-being, including physical integrity and mental, sexual and reproductive, maternal, newborn and child health,

Recognizing also that the practice of female genital mutilation has no documented health benefits and may, on the contrary, increase the risk of sickness and death, that it causes severe stress and shock, that it may give rise to post-partum and obstetric complications such as fistula or haemorrhage, and that it is likely to increase vulnerability to HIV and hepatitis B and C and to cause other health problems,

Recognizing further that all harmful practices, including female genital mutilation, when perpetrated against girl children, have particular detrimental consequences for their health and growth, and recalling in that regard the need to guarantee the right of girl children to be free from all forms of violence,

Recognizing that the practice of female genital mutilation continues to have an adverse effect not only on the economic, legal, health and social status of all women and girls but also on the development of society as a whole, while the empowerment of and investment in women and girls, the full enjoyment of their human rights and their full, equal, effective and meaningful participation at all levels of decision-making are key to breaking the cycle of gender inequality, discrimination, gender-based violence and poverty and are critical to, inter alia, sustainable development,

Recognizing also that harmful practices such as female genital mutilation are an impediment to the full realization of gender equality and the empowerment of women and girls and to the respect for, and protection and fulfilment of, all human rights and fundamental freedoms of women and girls and the development of their full potential as equal partners with men and boys, as well as to the achievement of the Sustainable Development Goals, and convinced that such harmful practices seriously impede the implementation of legislative and normative frameworks that guarantee gender equality and human rights and prohibit gender-based discrimination and violence,

Deeply concerned that, despite increased national, regional and international efforts, the harmful practice of female genital mutilation, like many other harmful practices, persists in all parts of the world, that it is exacerbated in humanitarian situations, armed conflicts, pandemics and other crises, and that new forms, such as medicalization and cross-border practice, are emerging,

Recognizing that the prevention and elimination of female genital mutilation is a national development, human rights and public health priority, thereby requiring a comprehensive and multisectoral approach based on States’ obligations under international human rights law and underpinned by the principles of, inter alia, accountability, participation, transparency, empowerment, sustainability, equality and non-discrimination, and international cooperation,

Considering that holistic strategies to prevent and eliminate female genital mutilation must be mainstreamed and coordinated both vertically and horizontally, and that horizontal coordination requires the joint participation of organizations across sectors, including education, health, justice, social welfare, law enforcement, immigration and asylum, and communications and media, while vertical coordination brings together stakeholders at the national, subnational and local levels, including, inter alia, parliamentarians, national human rights institutions, traditional community leaders and religious authorities, women and girls, parents, legal guardians and families, health-care providers, civil society, human rights groups, youth organizations and men and boys,
Recognizing that the practice of female genital mutilation constitutes torture or ill-treatment and must be prohibited, in accordance with regional and international human rights standards,

Expressing deep concern about the lack of effective measures for prosecuting perpetrators and for providing victims and survivors of female genital mutilation with access to remedies and redress, health care and health services, mental health and psychosocial counselling, legal assistance and socioeconomic reintegration services,

Noting that human rights accountability means not only the establishment of protection measures ensuring criminal liability and the provision of legal remedies but also the implementation of a broad range of other measures in the design, implementation and monitoring of policies, programmes and services to ensure women’s and girls’ enjoyment of human rights with the full, equal active and meaningful participation of women and girls at risk of and affected by female genital mutilation,

Noting with concern that many countries lack accurate and reliable data on female genital mutilation to inform planning and track progress in eliminating female genital mutilation due to the absence of indicators in administrative data systems, the absence of robust monitoring and evaluation frameworks to track progress and the absence of standard guidelines on data collection,

Bearing in mind the most recent global and national commitments made by States, including in the 2019 Ouagadougou call to action on eliminating female genital mutilation and the 2019 Cairo call to action for the elimination of child marriage and female genital mutilation in Africa, to accelerate efforts to ensure the global elimination of the practice of female genital mutilation by 2030,

Welcoming the growing global consensus on the need to take appropriate measures to prevent and eradicate female genital mutilation, and considering that this practice cannot be justified on religious or cultural grounds,

Welcoming also initiatives, such as the Saleema initiative launched by the African Union, to galvanize political action, increase allocation of financial resources and strengthen partnerships to end female genital mutilation,

Deeply concerned about studies indicating that the coronavirus disease (COVID-19) crisis could drive international, regional and national efforts away from the prevention and elimination of female genital mutilation and other harmful practices, which could result in delayed programme implementation and at least 2 million additional cases of female genital mutilation that could have been averted by 2030,

Reaffirming the obligations and commitments of States to respect, protect and fulfil the human rights and fundamental freedoms of women and girls and to prevent and eliminate the practice of female genital mutilation, and emphasizing in this regard the specific role of the different departments of government, the legislative branch and the judiciary at the national and subnational levels,

Bearing in mind that States have the primary responsibility for preventing and eliminating female genital mutilation and for achieving zero tolerance of the practice,

1. Takes note with appreciation of the report of the United Nations High Commissioner for Human Rights on the expert group meeting on the elimination of female genital mutilation;¹

2. Urges States to condemn all harmful practices that affect women and girls, in particular female genital mutilation, including medical acts performed within or outside of medical institutions, and to take all necessary measures to prohibit female genital mutilation and to protect women and girls from this form of violence;

3. Also urges States to ensure the protection of and provision of support to women and girls subjected to, or at risk of, female genital mutilation, and to address the underlying systemic and structural causes in which the harmful practice is rooted by establishing well-

¹ A/HRC/44/33.
defined, comprehensive, rights-based, gender-responsive and multisectoral prevention and response strategies that include supportive legislation and policy, programme and budgetary measures based on integrated, coordinated and collective approaches combining political commitment, civil society engagement and accountability at the national, local and community levels;

4. **Further urges** States to ensure that national action plans and strategies on the prevention and elimination of female genital mutilation are adequately resourced and include projected timelines for goals, and incorporate clear targets and indicators for the effective monitoring, impact assessment and coordination of programmes among all relevant stakeholders and promote their participation, including the participation of affected women and girls, practising communities and non-governmental organizations, in the development, implementation, monitoring and evaluation of such plans and strategies;

5. **Encourages** States to put in place national coordination mechanisms to prevent and eliminate female genital mutilation and ensure their sustainability and effectiveness by recognizing, preferably by law, their convening authority and by providing them with adequate financial resources and capacities so that they can oversee the implementation of comprehensive and multisectoral strategies, national plans, policies and programmes, and mobilize relevant actors, including girls, women, parents, legal guardians and families, women’s organizations, health-care workers, youth groups, human rights groups, religious and traditional leaders, community leaders, men and boys and other members of civil society and national stakeholders as appropriate to participate in the design, implementation and monitoring of national efforts to prevent and end female genital mutilation and provide care for women and girls who have undergone female genital mutilation;

6. **Also encourages** States to integrate the prevention of and response to female genital mutilation into national development plans and poverty reduction strategies through the active participation of all relevant ministries, parliamentarians, the judiciary, national human rights institutions, civil society organizations and other relevant stakeholders;

7. **Urges** States to identify and make available adequate and specifically designated resources to prevent and eliminate female genital mutilation across relevant sectors, including health, nutrition, protection, justice, governance and education, for the effective implementation of related policies, programmes and legislative frameworks;

8. **Also urges** States to respect, protect and promote the human rights of all women and girls, and to adopt and expedite the implementation of laws, policies and programmes that protect and enable the enjoyment by them of all human rights and fundamental freedoms, including with regard to sexual and reproductive health;

9. **Calls upon** States to take comprehensive, multisectoral and rights-based measures to prevent and eliminate female genital mutilation by:

   (a) Addressing the root causes of gender inequality, including gender stereotypes and negative social norms, attitudes and behaviours, the socioeconomic drivers of violence and unequal power relations in which women and girls are viewed as subordinate to men and boys, which perpetuate female genital mutilation, by developing and implementing, inter alia, awareness-raising programmes that provide accurate information about the negative impact of female genital mutilation on women and girls and society at large, including through social media, the Internet and community communication and dissemination tools;

   (b) Placing special emphasis on formal and informal education, in particular for young people, including girls, and for parents, legal guardians and families, and religious, traditional and community leaders, about the harmful effects of female genital mutilation and, in particular, encourage men and boys to become agents of change within communities by being more involved in information and awareness-raising campaigns, intergenerational dialogues and peer education and training programmes, with the full, equal, effective and meaningful participation of women and girls who have been subjected to or are at risk of being subjected to the practice;

   (c) Facilitating the creation of safe spaces, online and offline, where girls and women can connect with peers, mentors, teachers and community leaders and express themselves and articulate their aspirations and concerns, and where girls, in a manner
consistent with their evolving capacities, and women participate meaningfully in decisions affecting their lives;

d) Developing, supporting and promoting educational programmes on human rights, gender equality, health and life skills that challenge the negative stereotypes and harmful attitudes and practices that sustain female genital mutilation and perpetuate violence and discrimination against women and girls;

e) Training social workers, teachers, medical personnel, community and religious leaders and relevant professionals, ensuring that they provide competent and supportive services to all women and girls who are at risk of or who have undergone female genital mutilation and encouraging them to report to the appropriate authorities cases in which they believe that women or girls are at risk;

f) Ensuring that universal health coverage integrates the prevention and treatment of the health risks and health complications associated with female genital mutilation, including through access at the primary health-care level to the mental, sexual, reproductive, maternal, newborn and child health-care services needed for women and girls affected by or at risk of female genital mutilation;

g) Ensuring a more holistic and coordinated approach to the humanitarian-development nexus by integrating the prevention and response to female genital mutilation into humanitarian preparedness and response, including in the continuum of essential services for gender-based violence;

h) Stopping the medicalization of female genital mutilation, which implies drawing up and disseminating guidance and legal provisions for medical personnel and traditional birth attendants so that they are able to respond to social pressures in their interaction with local communities to perform medicalized female genital mutilation, and to provide an adequate response to the chronic mental, psychosocial and physical health problems of the millions of women and girls who have undergone female genital mutilation, as these problems hinder progress in the field of health in general and in the protection of human rights, including the right to the enjoyment of the highest attainable standard of physical and mental health;

i) Protecting and supporting women and girls who have been subjected to female genital mutilation and those who are at risk, including by developing interdisciplinary, accessible, sustained and coordinated social, legal and psychological support services and appropriate remedies and ensuring health-care services, including for mental, sexual, reproductive, maternal, newborn and child health;

j) Conducting specialized awareness-raising and training programmes for health-care providers, including those working with immigrant communities, to address the unique health-care needs of women and girls who have undergone female genital mutilation or other harmful practices, and providing specialized training also for professionals within child welfare services and services focused on the rights of women, and within the education and police and justice sectors, and for politicians and media personnel working with refugee and migrant girls and women;

10. Urges States to take measures to develop and strengthen accountability systems in the context of comprehensive and multisectoral strategies, policies, plans and budgets to prevent and eliminate female genital mutilation, including by:

a) Adopting national legislation prohibiting female genital mutilation, in accordance with international human rights law, and ensuring its strict application, while working to harmonize their laws in order to effectively combat the cross-border practice of female genital mutilation, including by strengthening transnational police and judicial cooperation in the exchange of information on victims and perpetrators of female genital mutilation, in accordance with national laws and policies and international human rights law;

b) Ensuring timely and effective remedies for women and girls at risk of or affected by female genital mutilation, including by informing women and girls about their rights, removing all barriers to access to legal assistance and remedies, providing gender- and age-responsive training for law enforcement officials and other relevant authorities, and
ensuring child-friendly justice, the best interests of the child and the right to privacy at all stages of proceedings;

(c) Establishing or strengthening mechanisms to enable safe reporting of cases that are likely to occur or have occurred and to provide referrals to needed services and accurate gender-sensitive and age-appropriate information about female genital mutilation;

(d) Taking, within the general framework of integration policies and in consultation with affected communities, effective and specific targeted measures for refugee and migrant women and girls, their families and their communities in order to protect women and girls everywhere from female genital mutilation, including when the practice occurs outside the country of residence;

(e) Assisting professional associations and trade unions of health service providers in adopting internal disciplinary rules prohibiting their members from engaging in the harmful practice of female genital mutilation;

(f) Ensuring that national strategies and coordination mechanisms to prevent and eliminate female genital mutilation include transparent forms of monitoring, review and oversight of policies, programmes and budgets in order to improve the quality and responsiveness of prevention and response services;

(g) Ensuring that adequate monitoring mechanisms are in place at the national and local levels to track progress in protecting women and children from harmful practices and in realizing their rights;

(h) Developing the capacity of national human rights institutions to investigate human rights violations relating to the practice of female genital mutilation and to monitor progress in preventing and eliminating this harmful practice;

(i) Systematizing the collection of data on female genital mutilation disaggregated by, inter alia, age, geographical location and ethnic and migrant status, encouraging research, particularly at the university level, transparency, accountability and data-sharing by relevant stakeholders and between countries, using the results of research to strengthen public information and awareness-raising activities, and measuring the effectiveness and impact of existing policies and programmes and the progress made in eliminating female genital mutilation;

(j) Promoting, as appropriate, the free, active, informed and meaningful participation of civil society organizations and of women and girls at risk of or affected by female genital mutilation in social accountability mechanisms to monitor policies, programmes, budgets and services designed to prevent and eliminate female genital mutilation, as well as the effective implementation of public declarations of abandonment;

(k) Taking all necessary measures to enable the equal participation of affected girls and of youth-led organizations, including, but not limited to, providing youth-friendly information on participation processes, making available financial resources to girls and youth-led organizations to cover costs related to their participation, and ensuring that their participation is not instrumentalized or deemed irrelevant by dominant entities within participatory processes;

11. Calls upon States to take a comprehensive, rights-based, gender-responsive and multisectoral approach in the prevention and response to female genital mutilation in the context of the COVID-19 pandemic and to pay attention to the specific needs of women and girls, in particular those in vulnerable situations, in terms of, inter alia, accessibility and adequacy of information about the pandemic, the ability to maintain social distance, and access to testing and treatment as well as to essential health-care and other services, such as safe spaces, shelters and other social protection services, while ensuring that the front-line health and social workers assisting them have access to adequate means of protection from the virus;

12. Calls upon all States to engage in dialogue and to consult with States and other relevant stakeholders, including United Nations bodies, specialized agencies, funds and programmes, to prioritize female genital mutilation as a globally relevant issue and to increase their development cooperation efforts – technical and financial assistance, and
South-South and triangular cooperation – for the effective implementation of comprehensive and multisectoral strategies, policies, programmes and action plans to prevent and eliminate female genital mutilation, and encourages States and development cooperation agencies to consider increasing their financial support for the Joint Programme on Female Genital Mutilation/Cutting: Accelerating Change of the United Nations Population Fund and the United Nations Children’s Fund, and for all of the other initiatives and activities at the local, regional and international levels;

13. **Urges** States to implement the commitments made in the context of the most recent global and regional conferences for the elimination of female genital mutilation and to report on progress in meeting these commitments in the context of existing national, regional and international human rights and sustainable development reporting and review processes;

14. **Decides** to convene a high-level panel discussion on the multisectoral prevention of and response to female genital mutilation at its forty-seventh session, inviting States, civil society organizations, United Nations agencies, women and girls and other relevant stakeholders to share good practices in developing comprehensive, gender-responsive, rights-based and multisectoral coordination, planning, financial and monitoring arrangements to prevent and eliminate female genital mutilation on the basis of the human rights principles of accountability, participation, transparency, empowerment and equality and non-discrimination, and ensuring the sustainability of international, regional and national efforts to end female genital mutilation in the context of global pandemics and economic shocks, and requests the United Nations High Commissioner for Human Rights to prepare a summary report on the panel discussion, to be submitted to the Human Rights Council at its fiftieth session;

15. **Also decides** to continue its consideration of the question of female genital mutilation in accordance with its programme of work.

28th meeting
17 July 2020

[ Adopted without a vote. ]