

Female genital mutilation

The Executive Board,

Having considered the report on female genital mutilation,¹

SUBMITS to the Sixty-first World Health Assembly for its consideration the following resolution:²

The Sixty-first World Health Assembly,

Having considered the report on female genital mutilation;

Recalling resolution WHA47.10 on Maternal and child health and family planning: traditional practices harmful to the health of women and children;

[Reaffirming

OR

Reaffirming the goals and commitments contained in

OR

Recalling]

the Beijing Declaration and Platform for Action of the Fourth World Conference on Women (Beijing, 1995), the Programme of Action of the International Conference on Population and Development (Cairo, 1994) and their five- and ten-year reviews **[and related reports]**, as well as the United Nations Millennium Declaration 2000 and the commitments relevant to the girl child made at the United Nations General Assembly special session on children (2002), and in United Nations General Assembly resolution 60/1 on the 2005 World Summit Outcome;

Affirming that the International Covenant on Civil and Political Rights (1976), the Convention on the Elimination of All Forms of Discrimination against Women (1979) and the Convention on the Rights of the Child (1989), constitute an important contribution to the legal

¹ Document EB122/15.

² See document EB122/15 Add.1 for the financial and administrative implications for the Secretariat of the resolution.

framework for the protection and promotion of the human rights of girls and women, and recognizing the importance African States attach to the African Charter on the Rights and Welfare of the Child (1990) and the Solemn Declaration on Gender Equality in Africa (2004) in this regard;

Recognizing the entry into force of the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa, adopted in Maputo on 11 July 2003, whose provisions on female genital mutilation mark a significant milestone towards the abandonment of this practice;

Recalling also resolution 51/2 of the United Nations Commission on the Status of Women¹ on ending female genital mutilation (March 2007);

Recognizing that female genital mutilation violates the human rights of girls and women including their right to the enjoyment of the highest attainable standard of physical and mental health;

Noting that, whereas there is evidence of decline in the practice, it is still widespread in some parts of the world, with an estimated 100 million to 140 million girls and women having undergone the practice and at least another three million being at risk of undergoing the practice every year;

Deeply concerned about the serious health consequences of female genital mutilation; the risk of immediate complications, which include severe pain, shock, haemorrhage, tetanus, sepsis, urine retention, ulceration of the genital region and injury to adjacent genital tissue; the long-term consequences, which include increased risk of maternal morbidity, recurrent bladder and urinary tract infection, cysts, infertility and adverse psychological and sexual consequences; and increased risk of neonatal death for babies born to mothers having undergone female genital mutilation;

Also concerned about emerging evidence of an increase in carrying out female genital mutilation by medical personnel in all regions where it is practised;

Emphasizing that concerted action is needed in sectors such as education, finance, justice and women's affairs as well as in the health sector, and that many different kinds of actor must be engaged, from governments and international agencies to nongovernmental organizations,

1. URGES all Member States:

(1) to accelerate actions towards the elimination of female genital mutilation, including education and information necessary for full understanding of the gender, health and human rights dimensions of female genital mutilation;

(2) to enact and enforce legislation to protect girls and women from all forms of violence, particularly female genital mutilation, and ensure implementation of laws prohibiting female genital mutilation by any person, including medical professionals;

¹ Document E/CN.6/2007/L.3.

(3) to support and enhance community-based efforts to eliminate the practice of female genital mutilation, particularly ensuring men's and local leaders' participation in the process to eliminate the practice;

(4) to work with all sectors of government, international agencies and nongovernmental organizations in support of the abandonment of the practice as a major contribution to attainment of the Millennium Development Goals on promoting gender equality and empowerment of women, reducing child mortality, and improving maternal health;

(5) to formulate and promote guidelines for the care, particularly during childbirth, of girls and women who have undergone female genital mutilation;

[(6) to develop or reinforce social and psychological support services and care and to take measures to improve health

, including sexual and reproductive health care,

OR

care and services including those for sexual and reproductive health,

in order to assist women and girls who are subjected to this violence;]

2. REQUESTS the Director-General:

(1) to increase support to Member States for implementing actions to advocate for the elimination of female genital mutilation and other forms of violence against girls and women;

(2) to work with partners both within and outside the United Nations system to promote actions to protect the human rights of girls and women;

(3) to increase support for research on different aspects of female genital mutilation in order, inter alia, to achieve its elimination;

(4) to assist Member States with strengthening their health information systems for monitoring progress made towards elimination of female genital mutilation;

(5) to report every three years, to the Health Assembly, through the Executive Board, on actions taken by the WHO Secretariat, Member States and other partners.

Ninth meeting, 25 January 2008
EB122/SR/9

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