



COUNTRY FOCUS

FRANCE

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COUNTRY CONTEXT

/ FACTS AND FIGURES

FGM first emerged in France as a result of the migration of practising African communities. The issue became the subject of public debate in 1982, when a baby, Bobo Traoré, died as a result of the procedure. Since 2000, the number of cases of FGM has gradually fallen, especially those carried out in France (Andro & Lesclingand, 2007). However, under-18s from practising communities remain at risk, particularly teenage girls - especially those travelling to parents' country of origin (CNCDH, 2013, §17).

According to a study by the United Nations High Commissioner for Refugees (UNHCR), France is the top country of asylum for FGM-affected women and girls (Schirrmesiter, 2013). Between 2008 and 2011, over 20% of female asylum-seekers in France came from FGM-practising countries. The most recent figures available indicate that countries in which FGM is most prevalent accounted for the highest number of individuals seeking asylum in 2012 (OFPRA, 2014, p. 53). Almost 4,000 girls benefitted from protective status in France against the risks of FGM by end-2014 (OFPRA, 2014, p. 35).


In the 1980s, it was estimated that 80% of mothers from FGM-practising countries had been mutilated, with a further 70% of girls mutilated or at risk (CNCDH, 2013, §15). By 2004, the number of mutilated adult women residing in France was estimated at 53,000 (Andro & Lesclingand, 2009, p. 2-3).¹ A 2007-09 Excision et Handicap (ExH) survey estimated that 11% of girls whose came parents from FGM-practising countries had been subjected to the procedure, of which 3% were born in France and 45% in a country with a high prevalence of FGM, mainly countries of West Africa, especially Mali, Senegal, Ivory Coast, Guinea-Conakry and Mauritania (Andro & Lesclingand, 2009). A further three girls in ten were deemed to be at risk of excision.²

Data collected by France's Maternal and Child Protection Centres indicate that the problem of FGM is not limited to the departments of the Greater Paris Region, which are most affected, but extends to other areas - in particular the regions of Normandy, Auvergne-Rhône-Alpes, PACA, Nord-Pas-de-Calais-Picardie, Champagne-Ardenne-Lorraine, Centre-Poitou-Charente, Pays-de-la-Loire, Languedoc-Roussillon-Midi-Pyrénées and, to a lesser extent, Brittany and Bourgogne-Franche-Comté (Gillette-Faye, 1998 and 2016).

1. Based on an average of 42,000 women born in an FGM-risk country arriving in France after the age of 15, and 61,000 women born in Europe to families from FGM-risk countries of origin
2. Survey of girls up to the age of 15 and not mutilated at the time of the survey, based on the stated intentions of the father and mother.

01

Country context



Neither national surveys on violence against women (ENVEFF, 2000) nor administrative and legal statistics (reporting, filing of complaints, etc.) collect data on FGM, resulting in a lack of up-to-date figures. However, the ongoing VIRAGE survey of violence against women does cover FGM, and is expected to contribute to a much fuller picture of the situation in France.

/ MAIN AFFECTED POPULATIONS

There is general agreement among anthropologists, ethnologists and sociologists that between the 1980s and 2000, FGM in France mainly concerned the Soninke community. However, many other FGM-practising communities now live in France, reflecting the fact that FGM is practised in many regions of the world (Gillette-Faye, 2016, p. 3).

LEGISLATIVE FRAMEWORK

/ INTERNATIONAL AND EUROPEAN AGREEMENTS

International Covenant on Civil and Political Rights (accession on 04/11/1980) and its optional protocol (accession on 17/02/1984)

- > International Covenant on Economic, Social and Cultural Rights (accession on 4/11/1980) and its optional protocol (ratified on 18/03/2015)
- > Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW - ratified on 14/12/1983) and its optional protocol (ratified on 09/06/2000)
- > International Convention on the Rights of the Child (ratified on 07/08/1990)
- > Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (ratified on 18/02/1986) and its optional protocol (ratified on 11/11/2008)
- > European Convention on Human Rights (ratified on 03/05/1974)
- > The Council of Europe Convention on combating violence against women and domestic violence (Istanbul Convention - ratified on 2014)
- > European Convention on the Exercise of Children's Rights (ratified on 19/09/2)

/ CRIMINAL LAW

FGM is not specifically classified as a crime or offence under French law. However, according to general provisions related to violence leading to mutilation, FGM is a crime punishable by a 10-year prison sentence and a 150,000-euro fine (Article 222-9 of the Penal Code). This sentence can be extended to 20 years if the act is committed on a minor under the age of 15 or by a relative or any other person with authority over the victim (Article 222-10). In cases where violence leads to unintentional death, the applicable sentence is 15 years' imprisonment (Article 222-7), extended to 20 years if committed on a minor under the age of 15 and 30 years when committed by a relative or any other person with authority over the minor (Article 222-8).

The period of limitation for prosecution of this crime is 20 years after the under-age victim reaches the age of majority (18 years of age) - i.e. 38 years of age (Article 7 of the Criminal Procedure Code).

The offender can be prosecuted even if the crime is committed abroad, if the victim is of French nationality or resident on French territory (Article 222-16-2 of the Penal Code). The parents of the victim can be prosecuted as accomplices (Article 113-5 of the Penal code, relating to complicity in any crimes or offences).

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Legislative Framework

Two specific offences were added to the Penal Code in 2013 to strengthen the protection of minors (under Law n°2013-711 of 5 August 2013). These are encouraging a minor to be subject to genital mutilation, for example, by giving gifts (Article 227-24-1 par.1 of the Penal Code), and encouraging other people to commit genital mutilation (Article 227-24-1 par.2).

The Criminal Procedure Code also permits civil action to be brought by associations working to combat sexual violence and attacks on physical integrity (Article 2-2) and associations defending or helping children in danger or the victims of abuse (Article 2-3).

Any competent authority, public officer or public employee who becomes aware of a crime or offence in the course of their duties must immediately notify the Public Prosecutor (Article 40 of the Code of Criminal Procedure). In addition, it is a criminal offence not to help a person in danger (Article 223-6 of the Penal Code).

/ LAW RELATING TO CHILD PROTECTION

Child protection is a collective responsibility. It is a criminal offence not to inform the authorities of abuse inflicted on a minor or the danger of such an offence occurring (Article 434-2 of the Penal Code).

The 2007 law on protection of children in danger provides for two types of protection: administrative protection, which is the responsibility of the Departmental Council and is governed by the Social Work and Family Code, and legal protection, which is the responsibility of the children's courts, governed by the Civil Code.

The chairperson of the Departmental Council is in charge of collecting, processing and evaluating information relating to dangers or risks of danger to the health, safety or morality of minors and of compromise or risk of compromise to their education or development, and of ensuring their protection (Article L226-3 of the Social Work and Family Code). The Departmental unit for collecting and evaluating information of concern (CRIP) receives data from children's social assistance services, maternal and child protection services and social work services, which can also carry out preventive and protective action in the interests of minors (Articles L221-1 and L226-1), through measures of educational and family support, in the home or via competent structures (Articles L222-3 and L222-4-2).

When a minor is in a dangerous situation and an emergency arises (for example, a confirmed risk of FGM or imminent departure for an FGM-practising country of origin), the Departmental unit and professional involved can report their concerns in writing to the Public Prosecutor associated with the juvenile prosecution service in the minor's place of residence (Article L226-4).

The Prosecutor applies to the Brigade for the Protection of Minors and, according to the result of an enquiry conducted in collaboration with the Forensic Medical Units³, the children's court judge, who can order an educational assistance measure (Article 375 of the Civil Code) and, if required, the temporary placement of the child in the care of the other parent, a member of the family, a trustworthy third

person or a competent service (Articles 375-1 to 3), as well as prohibiting the child from being taken out of the country, requiring her inclusion on the missing persons' list (Article 375-7, introduced in 2010) or requiring that she be presented for medical examination on her return to France.

In emergency situations, the Prosecutor can order the temporary placement of the child and subsequently apply to the children's judge (Article 375-5 of the Civil Code).

/ LAW ON ASYLUM

The right to asylum is governed by the Code of Entry and Residence of Aliens and the Right to Asylum (CESEDA), reformed in 2015 under Law n°2015-925.

A request for asylum and recognition of refugee status should be made via the Prefecture one-stop registration service, within four months of the day of arrival. Confirmation of an application for asylum allows the applicant to remain in France while the request is being processed by the Office for the Protection of Refugees and Stateless Persons (OFPRA). A completed and registered application is processed in six to 18 months, and a decision can be appealed at the National Court of Asylum (CNDA) within 30 days.

Since the reform of 2015, the management and initial guidance of asylum-seekers is undertaken by a reception 'platform', coordinated by the Office for Immigration and Integration (OFII). Platform operators include activist associations, which provide applicants with social and administrative support. Applicants are also offered accommodation in the Centre for Asylum Seekers (CADA) or similar institutions.

Under French case law, "in a population where female genital mutilation is commonly practised, to the point where it is a social norm, non-mutilated children and adolescents make up a social group within the meaning of the Geneva Convention" (CE, 21 Dec 2012 n° 332491, Darbo-Fofana). As such, and as result of the risk of mutilation they are deemed to face in their country of nationality (assessed in light of "circumstantial elements, notably family, geographical, sociological"), such individuals should be attributed refugee status. This gives them the right to obtain a renewable 10-year resident's card, authorising them to live and work regularly in France during this period (in accordance with Articles L311-5-1 and 314-1 and CESEDA).

If the parents of such individuals are at risk of persecution or abuse because of their opposition to FGM, they may also claim refugee status. If this is not possible, parents can be granted subsidiary protection where conventional grounds for asylum cannot be established but where there is a risk of "inhuman or degrading treatment" on return to their country of origin (Article L712-1 of CESEDA). This entails the right to obtain a renewable one-year residence permit for a period of two years, for as long as the danger exists in the country of origin, authorising the holder to live and work regularly in France for the same period (Article L311-5-

3. All cases of excision reported to the Public Prosecutor's Office for children and adolescents are the subject of a police investigation by the Brigade for the protection of minors in Paris (or equivalent local services).

2 of CESEDA). If no protection is granted, OFPRA must invite the parents to present to the Prefecture of their place of residence the decision to grant refugee status to their daughter, and apply, in their own right, for a resident's card (Article L314-11 8°d of CESEDA).

The 2015 reform of France's asylum law makes special provision for FGM as a serious form of psychological, physical or sexual violence which must be identified during evaluations of the vulnerability of applicants, and taken into account in implementing their rights, including the period during which their application is processed, in order to determine specific needs in terms of accommodation (Article L744-6). However, the needs of women or girls who have been or are at risk of being mutilated are not necessarily related to the material conditions of their accommodation. In addition, when protection on the grounds of asylum is granted to a minor claiming a risk of genital mutilation, OFPRA will require the girl to undergo a medical examination to confirm the absence of mutilation. No observation of genital mutilation can lead to termination of the protection granted to the minor on the grounds of asylum. A minimum time-frame of three years between examinations must be complied with, except if there is suspicion of FGM or of the risk of its being practised (Article L752-3).

Two additional legal provisions are of particular interest in cases of FGM. First, the applicant has the right to attend an interview with OFPRA accompanied by a lawyer or a representative from an association defending human rights or the rights of aliens, asylum-seekers, women or children, or an association working against gender-based persecution (Article L723-6. Al 6). However, it should be noted that authorised associations are not necessarily expert in issues related to FGM. Second, the applicant has the right to a closed hearing with the National Court of Asylum (CNDA) (Article L733-1-1).

/ PROFESSIONAL SECRECY




According to the French Penal Code, professional secrecy does not apply in cases of FGM (Article 226-14). According to the Public Health Code, health professionals (doctors, midwives, nurses, etc.) are obliged to report to the competent authorities any knowledge of the abuse of a minor or a woman unable to protect herself, because of her age or physical/psychological condition.

Relevant articles regarding compulsory reporting and offences are Article 40 of the Code of Criminal Procedure and Articles 434-2 and 223-6 of the Penal Code (cf. supra § 3.2 Criminal law and § 3.3 on child protection).

POLICY FRAMEWORK

/ NATIONAL ACTION PLANS

Pursuant to Article 1 of Law n°2014-873, specifying that gender equality requires preventive and protective action to combat violence against women and infringements of their dignity, the fifth inter-ministerial plan for the prevention of violence against women (2017-19) sets out specific actions relating to the prevention of and fight against FGM (area 2.E, goal 25).



-  Consolidating the support mechanisms for victims of female genital mutilation and forced marriages, by renewing the partnership between the Ministry of Women's Rights and GAMS (Group for the Abolition of Genital Mutilation) with the signature of a new agreement on objectives for 2017-19.
-  Pursuing preventive actions on female sexual mutilations (FSM) among relevant public and professionals, thanks to the support of the Ministries in sharing basic and continuing formation tools among relevant professionals
-  Updating knowledge on epidemiology and scalable tendencies of the female genital mutilations phenomenon in France, and perpetuating a follow-up mechanism of the progression of its prevalence. The Ministry of Health will be supporting the study led by the National institute of demographic studies (INED) in order to update the assessment of the number of victims in France and adjust accordingly the preventive and care national strategies throughout 2018 and 2019.

Former Women's Rights Minister and government spokesperson Najat Vallaud-Belkacem, former Deputy Minister for French people abroad Hélène Conway-Mouret, former Secretary of State for Women's Rights Pascale Boistard, President of The High Council for Equality between women and men (HCEfh) Danièle Bousquet, deputy and President of the National Assembly Delegation for women's rights and equal opportunities, as well as deputy and member of the same commission Sébastien Denaja have signed the Excision, parlons-en ! association Charter.

Local prevention, awareness-raising and training initiatives are also being conducted by regional women's rights teams.

/ PROTOCOLS AND MULTIDISCIPLINARY GUIDES



There are no national protocols or multidisciplinary guides on FGM. However, the health and education sectors have each developed their own guides

-  Le praticien face aux mutilations sexuelles féminines (The Practitioner Faced with Female Genital Mutilation), Gynécologie Sans Frontières and Direction générale de la santé, 2016.
-  Comportements sexistes et violences sexuelles (Sexist Behaviour and Sexual Violence), 2014, Guidebook on resources for educational teams in junior and senior high schools, with a section on FGM.

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Policy Framework

In addition, two maternal and child protection centres in France have implemented protocols on local action:

-  How to Behave When Faced with Female Genital Mutilation, Seine-Saint-Denis region Maternal and Child Protection Centre.
-  How to Behave When Excision is Confirmed or in Cases of Risk of Excision for a Child or a Young Minor, Paris Maternal and Child Protection Centre (Directorate of the Family and Early Childhood, 2011).

/ INSTITUTIONS

The Inter-ministerial Mission for the Protection of Women who are Victims of Violence and the Fight against Human Trafficking (MIPROF) includes FGM in its action. A training kit on FGM and forced marriage for health professionals and social workers was published of November 25th 2016. [Download](#)

MILESTONES / PROMISING PRACTICES

/ MILESTONES

Awareness-raising campaigns and media coverage of trials (approximately 40 to date)⁴ have had a direct effect on decreasing the practice of FGM in France. Initially tried in criminal courts under the charge of assault and battery or involuntary manslaughter, FGM has since been qualified as a crime of mutilation, tried by the Court of Assize. This change was the result of the activism of associations bringing civil proceedings in the 1980s.⁵ Maternal and Child Protection Centres have also played an important role in the prevention of FGM over the same period.

The 2013 transposition of the Istanbul Convention into French law has further strengthened the legal framework, by defining new offences relating to FGM (cf. supra § 3.2 Criminal law).

France has also been a pioneer in approaches to the assistance of FGM-affected women, especially surgical reconstruction, which today is provided by several multidisciplinary centres with costs reimbursed by the state.

In 2013, activists committed to the prevention of FGM launched a large-scale mobilisation campaign entitled *Excision, parlons-en!*, which one year later became a network association.

/ TRAINING

FGM has been included in introductory training programmes for medicine, midwifery and nursing at French universities since 2006, in accordance with General Directorate for Health FGM campaign circulars DGS/SD 2C n°2006-529 of 13 December 2006 (training of health professionals) and DGS/SD n°2007-98 of 8 March 2007 (training of medical students). FGM is also included in optional training for public and independent health professionals, through conferences and other activities, and is encouraged for social workers. For more information, including training for teachers and educational teams, visit the Académie de Paris website.

/ EXAMPLES OF BEST PRACTICES (PUBLIC INSTITUTIONS)

- Interactive map of reception, counselling and guidance facilities for combating violence against women (see Ministry of Families, Children and Women's Rights: [open](#); [download](#))

4. According to Linda Weil-Curiel, lawyer, CAMS (Commission for the Abolition of Genital Mutilation), consulted on 31/03/2016. France was the first country in Europe to file law suits regarding FGM, as early as 1979. Convictions of female-excision practitioners and parents were obtained, including compensation for victims.

5. Women's League of International Law in France, SOS Femmes Alternative - French support association for women who are victims of violence, CAMS (Commission for the Abolition of Genital Mutilation).

04

Milestones /
promising practices












- > International directory of accommodation centres for women who are victims of violence (see Ministry of Foreign Affairs and International Development - currently being updated: open)
- > Shared practice in combating FGM and violence against women (see Excision, parlons-en ! network of structures presented in § 6 and 7.1)

/ EXAMPLES OF BEST PRACTICES (CIVIL SOCIETY)

All structures and associations included in the Excision, parlons-en ! network of structures implement best practice. For example:

- > Protéger la Prochaine Génération (Protecting the Next Generation): Equilibres et Populations: integrated pilot project promoting the elimination of FGM in Mali (Kayes district) and the Greater Paris Region, connecting members of the Malian diaspora with communities in villages of origin that are gradually ending FGM, strengthening the process of ending FGM in Mali and France. (Overall presentation: Open; detailed presentation: Open)
- > Map to guide women who are victims of violence in the Greater Paris Region (Hubertine Auclert Centre: Open)

ADVICE AND SUPPORT

-  **GAMS** (Group for the Abolition of Female Genital Mutilation, Forced Marriage and Other Traditional Practices Detrimental for Women and Children's Health): Open
-  **CAMS** (Commission for the Abolition of Genital Mutilation): Open
-  **Excision, parlons-en!**: Open
-  **Femmes Solidaires**: Open
-  **SOS Africaines en Danger**: Open
-  **Family Planning**: Open
-  **Reproductive Health Institute**: Open
-  **Saint-Denis Women's Centre** (Delafontaine hospital - opening scheduled for summer 2016): Open
-  **Women's helpline** (Violences Femmes Info) telephone 3919: Open
-  **Children's helpline** (Allo Enfance En Danger) telephone 119: Open
-  **Ministry for Foreign Affairs and International Development** (Office for the Protection of Minors and the Family) for advice prior to travel and abroad; consular protection. (Forced marriage: Open. Illicit transfer of children: Open. Email to report FGM: mariageforce.fae@diplomatie.gouv.fr)

05

Advice and Support

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/ ADDITIONAL COUNTRY-SPECIFIC RESOURCES











-  Stop Violences Femmes (public government website on types of violence against women, including FGM) [Open](#)
-  Greater Paris Region Regional Delegation on Women's Rights and Equality (DRDFE) [Open](#)
-  GAMS (documentation and bibliography) [Open](#)

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References

-  [Excision, parlons-en !](#) Open
-  [Hubertine Auclert Centre \(regional resource centre for gender equality\).](#) Open
-  [Equality Library \(resources on equality and violence against women, including FGM\).](#) Open
-  [Fédération nationale solidarité femmes \(FNSF\).](#) Open
-  [Gynécologie Sans Frontières.](#) Open

/ BROCHURES AND OTHER DOCUMENTS

-  [Les mutilations sexuelles féminines. Un crime puni par la loi](#) (national information brochure). 2014. Download
-  [Agir face aux female genital mutilation](#), general information brochure, DRDFE. Open; Download
-  [La protection des minors: un devoir déontologique à appliquer avec discernement](#), factsheet on excision and forced marriage, Défenseur des Droits, 2014. Open
-  [Fiche réflexe: Prévenir les risques d'excision avant les vacances scolaires \(factsheet for professionals\)](#) *Excision, parlons-en!*. Download
-  [Mutilations sexuelles féminines. Filles et garçons: Parlons-en](#) (factsheet for young people), DRDFE. Download
-  [Mutilations sexuelles féminines : sexualité, soins et prévention](#) (proceedings of information day, 8 February 2011). DRDFE. Download
-  [L'adolescence face aux mutilations sexuelles féminines](#) (proceedings of information day, 3 February 2012). DRDFE. Download
-  [Données et bonnes pratiques.](#) Lettre de l' Observatoire national des violences faites aux femmes n° 9. (2016). Download
-  [Mutilations sexuelles féminines /excision](#), Développement et Santé n° 205, 2014. Download
-  [Guide pour la mise en œuvre de la Convention internationale des droits de l'enfant à partir de l'approche genre](#), Adéquations. (2014). Download

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