

THE LAW AND FGM/C Kurdistan Region of Iraq 2026



About Orchid Project

Orchid Project is a UK- and Kenya-based non-governmental organisation catalysing the global movement to end female genital cutting (FGC). Orchid Project's strategy for 2023 to 2028 focuses on three objectives:

1. To undertake research, generate evidence and curate knowledge to better equip those working to end FGM/C
2. To catalyse, support and strengthen regional networks to actively participate in the movement to end FGM/C
3. To influence global and regional policies, actions and funding to end FGM/C.

Orchid Project's aim to expedite the building of a knowledge base for researchers and activists is being fulfilled in the [FGM/C Research Initiative](#).

About Wadi

Founded in 1992, Wadi's mission is rooted in the fundamental belief that true development only occurs when individuals possess the power to decide their own futures. We don't provide aid—we support communities to find local resilient solutions rooted in our fundamental beliefs in human rights and equality. Our strategy remains consistent: we provide the platform, but the community provides the voice.

Wadi pioneered the fight against FGM/C in Iraqi Kurdistan through grassroots action, media campaigns, and lobbying at a local and international level. This work has never stopped, only evolved to include the myriads of other forms of gender issues in the area and we continue to work to empower women through literacy, education, vocational education, women's health access in order to combat the systemic roots of gender-based violence.

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WORKING TOGETHER TO END
FEMALE GENITAL CUTTING

Overview of Domestic Legal Framework

Overview of Domestic Legal Framework in Iraq	
<i>The Constitution explicitly prohibits:</i>	
x	Violence against women and girls
x	Harmful practices
x	Female genital mutilation (FGM/C)
<i>National legislation:</i>	
✓	Explicitly mentions FGM/C in the Kurdistan Domestic Violence Act (KDVA), although the term is not defined. However, this Act applies only in the Kurdistan Region and does not cover the rest of Iraq.
✓	Criminalises the performance of FGM/C under the KDVA. FGM/C may also be prosecuted under the Iraqi Penal Code in the rest of Iraq.
✓	Criminalises the procurement, arrangement and/or assistance of acts of FGM/C under the KDVA and the Penal Code
x	Criminalises the failure to report incidents of FGM/C
✓	Criminalises the participation of medical professionals in acts of FGM/C under the KDVA
✓	Criminalises the practice of cross-border FGM/C under the Penal Code
✓	A government strategy to end FGM/C is in place in both the Kurdistan Region and Iraq as a whole.

Introduction



Figure 1: Map of Kurdistan (1)

The Republic of Iraq is a federal, representative parliamentary republic. The 2005 Constitution recognises the Kurdistan Region and its existing authorities as a federal region (2). Iraq is administratively divided into 19 governorates; the Kurdistan Region is typically described as consisting of the governorates of Erbil, Sulaymaniyah, Duhok, and Halabja (3). While Iraq constitutionally recognises the Kurdistan Region's federal status (4), comparable constitutional recognition of Kurdish autonomous regions is not reflected in Iran, Turkey, or Syria in the same way.

Iraq gained independence in 1932, and the current constitution was adopted by referendum on 15 October 2005.

Iraq has a population of approximately 42 million. Arabs make up around 75–80% of the population, while Kurds account for around 15–20% ¹. Islam is the official religion, and an estimated 95–98% of the population is Muslim. Shia Muslims comprise around 61–64% of the population and Sunni Muslims around 29–34% ². Most Kurds are Sunni Muslims, and most residents of the Kurdistan Region of Iraq are Sunni Muslims (5).

¹ Remaining "other 5%" comprise Turkmen, Yezidi, Bedouin, Romani, Assyrian, Circassian, Sabaeen-Mandaean, Persian.

² Ibid. Remaining 1% are Christian which includes Catholic, Orthodox, Protestant, Assyrian Church of the East.

Note on Terminology

Local religious leaders in Erbil Governorate refer to FGM/C as either *khatana* or *khafedh*, which roughly translate as 'to reduce' or 'to lessen' (6). However, for consistency across Orchid Project's law reports in the Middle East, and when referring to all types of FGM/C, the term 'FGM/C' is used throughout this report.

Female genital cutting is classified into four major types by the World Health Organization (WHO):

Type 1: This is the partial or total removal of the clitoral glans (the external and visible part of the clitoris, which is a sensitive part of the female genitals), and/or the prepuce/clitoral hood (the fold of skin surrounding the clitoral glans).

Type 2: This is the partial or total removal of the clitoral glans and the labia minora (the inner folds of the vulva), with or without removal of the labia majora (the outer folds of skin of the vulva).

Type 3: Also known as infibulation, this is the narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the labia minora, or labia majora, sometimes through stitching, with or without removal of the clitoral prepuce/clitoral hood and glans.

Type 4: This includes all other harmful procedures to the female genitalia for non-medical purposes, e.g., pricking, piercing, incising, scraping and cauterizing the genital area (7).

Prevalence of FGM/C

Prevalence of FGM/C in the Kurdistan Region of Iraq varies across the three governorates, ranging from 62.9% in Erbil governorate to 4.6% in Duhok governorate. (8). A 2018 report found that 76–99% of participants had experienced Type I cutting (partial or total removal of the clitoral glans) (6). Among women aged 15–49 who reported having undergone FGC, 60.2% reported being cut before the age of seven (9).

Research suggests that FGM/C is significantly more prevalent in Iraqi and Iranian Kurdish regions than it is in the Kurdish region of neighbouring Turkey.

Further information about FGM/C in the Kurdistan Region of Iraq is available at: <https://www.fgmc.org/country/iraqi-kurdistan/>

National Legal Framework

Iraq's legal framework is based on a mixed system of civil and Islamic law.

The **highest courts** are the Federal Supreme Court (FSC) and the Court of Cassation. The FSC's jurisdiction is limited to constitutional issues, the application of federal laws, ratification of election results for the Parliamentary Council of Representatives, disputes concerning judicial competency, and disputes between regions or governorates and the central government.

Subordinate courts operating at governorate level include Courts of Appeal; civil courts that deals with cases at first instance in personal status, labour, and customs law; and criminal courts that deal with felonies, misdemeanours, investigative and major crimes, juvenile, and traffic courts.

The Iraqi Constitution does not make any reference to FGM/C or harmful practices. However, Article 29(4) states: 'All forms of violence and abuse in the family, school, and society shall be prohibited.' Article 117(1) recognises the Kurdistan Region as a federal region, along with its existing authorities. The Kurdistan Region has its own Constitution and can pass and implement laws that apply only within the three governorates of the Kurdistan Region. Under the **Kurdistan Region Constitution** (approved by the Kurdistan Parliament in June 2009), **Article 27(5)** echoes the Iraqi Constitution stating that: '*All forms of discrimination, violence and abuse in society, school, and in the family shall be forbidden.*'

Applicable general laws

In Iraq as a whole, there is no specific law relating to criminalisation of those who perform FGM/C, though some Articles of the **Iraq Penal Code (1969 as amended in March 2010)** can apply.

However, the **Act of Combating Domestic Violence in Kurdistan Region (2011)** does make specific reference to FGM/C but only covers the three Kurdish governorates where FGM/C is known to occur.

Act of Combating Domestic Violence in Kurdistan Region (Law No 8 of 2011) (10)

Within the Act of Combating Domestic Violence, Articles 2, 3, and 4 are relevant to FGM/C. Article 2 defines domestic violence to include FGC. Articles 3 and 4 outline the specialised courts and protection orders available for those who experience any form of domestic violence, including FGM/C.

Article 2: *First: any person, bounded to a family relationship is prohibited to commit a domestic violence act including physical, sexual and psychological violence within the family. The following acts are regarded as examples of domestic violence acts: [...], 4-*

Female Genital Mutilation, [...]. Second: The victim of domestic violence shall have guarantees to protect him/her from violence.

Article 2 goes on to state that a lawsuit can be initiated by the victim or a person acting legally for her through the procedure of reporting the act to the court, or a responsible investigator in a police station, or the public prosecutor. Health, education and other workers in official positions may report on cases to help and support victims of domestic violence.

Article 3: provides for specialised courts to deal with acts of domestic violence and mandates the Ministry of Labor and Social Affairs to provide shelter to victims of domestic violence.

Article 4: Protection Orders

First: *The competent court shall issue a Protection Order, if necessary or when requested by a family member or whoever represents him/her, as temporary procedure to protect the victims of domestic violence, providing that the order contains the duration of the protection, and the court shall have the right to extend this duration whenever necessary.*

Second: *The requester of the protection shall have the right to waive it as per circumstances, and the court shall ascertain the waiver is submitted according to the willingness of the victim and it is in his/her favour.*

Third: *Protection Order shall include the following:*

- 1. A pledge from the defendant undertaking not to threaten, harm, or intimidate the victim or any other family members.*
- 2. Transferring the victim to the closest hospital or health centre for treatment when necessary or when requested by the victim.*
- 3. Preventing the defendant from entering the family house by an order from the court for a duration which the court sees appropriate when there is a risk to the plaintiff or any other family member.*
- 4. In case of violation of the Protection Order, the offender will be imprisoned for no more than 48 hours or pay a fine of no less than 300,000 Dinars.*

Procuring, Aiding and Abetting FGM/C

Various articles of the Kurdistan Region Domestic Violence Act (2011) cover performing, inciting, or assisting with FGM/C:

Article 6 (1) sets out penalties for **performing, inciting or assisting with** FGM/C on a minor with sentences ranging from a fine to imprisonment for up to three years.

The **Kurdistan Region Domestic Violence Act (2011)**, however, does not cover, or make any mention of:

- Allowing the use of premises, or providing or possessing tools to be used in FGM/C;
- Failing to report FGM/C, either before or after it takes place, to public authorities or others who may have the capacity to step in and prevent it taking place, or investigating and arresting someone who has performed and assisted with FGM/C on a girl or woman;
- Protection of uncut girls and women from discrimination and abuse by others for not undergoing FGM/C;
- Protection of witnesses to a reported occurrence of, or awareness of a plan to perform FGM/C.

Importantly, Article 8 states that the Iraqi Penal Code will apply 'in case there are no specific provisions stipulated in this Law.'

Iraqi Penal Code (no 111 of 1969) (as amended in 2010) (11)

Certain provisions of the Penal Code can be read as addressing and prohibiting FGM/C practices.

Article 383(1) criminalises any person 'who by himself or through another endangers a child under 15 years of age.'

Article 413: criminalises wounding that results in death, permanent disability, harm, or illness.

FGM/C could be regarded as wounding that causes harm to a girl and health consequences as she grows up and into adulthood.

Article 414: if there are aggravating circumstances such as if the act is premeditated and / or if the act is committed by three or more people who have agreed to carry out the assault.

If more than three people get together to procure, aid and abet the performance of FGM/C it could be classed as evidence of premeditation.

Medicalised FGM/C

FGM/C in Kurdistan is carried out by traditional birth attendants and midwives in more than half of cases. These practitioners include those licensed and trained by health authorities. A further 15.4% of cases have been found to be performed by 'other health staff' (12).

A 2019 study found that between 2011 and 2018 there had been an increase in the FGM/C prevalence among the wealthiest groups. The authors of the study surmised that with greater access to healthcare services and increased awareness of the adverse health consequences of FGM/C, health professionals have become increasingly involved in performing FGM/C, and that people with more financial capacity are choosing to medicalise FGM/C to avoid adverse health effects. Although medicalised FGM/C is prohibited by the law, the rapid growth of the poorly controlled private health sector might have contributed to an increase in FGM/C medicalisation (13).

The Kurdistan Domestic Violence Act 2011 makes specific reference to the involvement of medical staff in performing FGM/C describing it as an aggravating circumstance:

Article 6(4): *It is considered an aggravating circumstance for the purposes of punishment if the perpetrator is a doctor, pharmacist, chemist, midwife or one of their assistants and the court shall order banning this person from exercising his/her career for a duration of no more than three years.*

Cross-Border FGM/C

Iraqi-Kurdistan Region shares borders with Turkey to the north, Iran to the east, and Syria to the west, with Kurdish communities living along all borders, and FGM/C is reportedly practiced in these Kurdish border communities.³ It is not known to what extent there is cross-border movement between Iraqi-Kurdistan and these communities in Turkey, Syria, and Iran.

Under **Article 10 of the Iraqi Penal Code**, Iraqi citizens who commit any of the crimes listed above at Articles 383 and 410–416, outside the territorial jurisdiction of Iraq may be punished as though the offence were committed in Iraq:

Article 10: *Any Iraqi citizen who commits an act abroad and does so as principal or accessory to an offence that is considered a felony or misdemeanour under the provision of this code is punishable in accordance with its provisions if he is now in Iraq and if the offence is punishable under the laws of the land in which it is committed. This provision is applicable whether or not the offender has obtained Iraqi citizenship after the commission of the offence or whether he had Iraqi citizenship after the offence was committed and subsequently lost that citizenship.*

³ See Orchid's Country Reports on FGM/C in Turkey and Iran: <http://www.fgmc.org/turkey/> and <http://www.fgmc.org/iran>

Migrant Iraqis living in European and other countries where FGM/C is criminalised may find themselves being prosecuted if they seek to send girls back to Iraq for the purposes of FGM/C. In October 2024, a British court sentenced a 47-year-old man to 4.5 years in prison after he was convicted of conspiring to commit FGM/C against a young girl by sending her to Iraq to be subjected to the practice. Messages found on his phone showed him defending his plans for the girl, calling it 'normal' (14).

Penalties

Act of Combating Domestic Violence in Kurdistan Region (Law No 8 of 2011) (10)

Article 6 (clauses 1-3) prescribe specific penalties for FGM/C as follows:

- Inciting FGM – a fine of between 1-5 million Iraqi dinars (US\$765-US\$3,825);
- Performing or helping perform FGM – a prison sentence of 6 months and/or a fine of 2-5 million Iraqi dinars (US\$1,530-US\$3,825); and
- Performing or helping perform FGM on a minor female – a prison sentence of 1-3 years and/or a fine of 5-10 million Iraqi dinars (US\$3,825-US\$7,650).

In addition, if the perpetrator is a medical professional 'the court shall order banning this person from exercising his/her career for a duration of no more than three years.' (Article 6(4)).

Iraqi Penal Code (no 111 of 1969) (as amended in 2010) (11)

Article 383 (1) – for those 'who by himself or through another endangers a child under 15 years of age' the punishment is a prison term of up to three years or a maximum fine of 300 dinars.

Article 383 (3) – where the offence is committed 'by a parent of the victim or by a person who is responsible for the upbringing or care of such child' the punishment is imprisonment.

If the act against a child leads to disability or death, the punishment is the same as for those offences generally, set out in Articles 410-416 which deal with crimes of assault ranging in severity:

- Assault including 'by wounding' that results in the victim's death (Article 410), which is punishable by up to 15 years in prison;
- Assault 'by wounding' resulting in the victim's 'permanent disability' is an offence under Article 412:
 - Permanent disability' is defined as 'permanent loss in whole or part of any of the senses or bodily disfigurement that is not expected to disappear.'
 - If the offender intends to inflict a permanent disability, the penalty is a prison term of 15 years maximum (Article 412(1)).
 - If the permanent disability is an unintentional result of the assault, the penalty is a prison term of 7 years maximum (Article 412(2)).
- Assault 'by wounding' that results in the victim becoming harmed or ill is punishable by a maximum prison sentence of 1 year and/or a maximum fine of 100 dinars. (Article 413(1)).

- The penalty is increased to a maximum 3-year prison term and/or a maximum fine of 300 dinars if the assault results in the victim being harmed or contracting an illness that prevents them from carrying out their normal employment for more than 20 days (Article 413(2)).

Implementation of the Law

There do not appear to have been any cases of FGM/C being brought before the courts in Kurdistan Region or elsewhere in Iraq, under either the Kurdistan Domestic Violence Act or the Iraq Penal Code. Indeed, while there was support for the introduction of the Kurdistan Domestic Violence Act, there has been strong criticism by human rights groups of its failed implementation and enforcement (15).

Role of the state

In 2010, the High Committee for Issuing Fatwas in the Kurdistan Region of Iraq (KRI) issued a fatwa stating that FGM/C is not prescribed in Islam and that the practice predates Islam. While the fatwa did not explicitly prohibit FGM/C, it discouraged the practice. It stated that parents may choose to have their daughters undergo FGM/C, but emphasised that the practice is not encouraged due to its negative health consequences. (6).

In January 2025, Iraq's Parliament passed amendments to the country's Personal Status Law, giving Islamic courts greater authority over family matters, including marriage, divorce and inheritance. It has been argued that this has opened the door for girls as young as nine to be married (16).

Previously, Iraqi law set 18 as the minimum age of marriage. The changes passed in 2025 allow clerics to decide, according to their interpretation of Islamic law, when a girl is ready for marriage. Some have interpreted this as allowing girls in their early teens, or even girls as young as nine under the Jaafari school of Islamic law, to marry. The Jaafari school is followed by many Shia religious authorities in Iraq (35). In 2018, 7% of marriages involved girls under 15, and 28% of married girls were under 18 years of age (17).

Proponents of the changes defend them as a means of aligning the law with Islamic principles and reducing Western influence on Iraqi culture (18). Although the amendments concern family law rather than FGM/C directly, they reflect the broader role of religious authority in regulating the status of women and girls. This is relevant in the context of FGM/C: a 2017 study of local religious leaders in Erbil Governorate found that a majority of participants considered FGM/C to be required by religion (8); another study, conducted in 2019, found that 45% of mullahs did not support abandonment of the practice (9).

While there is no direct link between child marriage and the practice of FGC, the legal treatment of early marriage provides an indication of the broader legal standing of girls and the cultural environment in which FGC occurs.

FGM/C has been raised as an issue by **Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)** several times, when considering Iraq's Periodic Reviews. In their **Concluding Remarks on Iraq's 7th Periodic Report in 2019** (19), members of CEDAW made the following recommendations:

Para 20 (a): Adopt a comprehensive strategy to eliminate discriminatory stereotypes and all harmful practices, such as child marriage, temporary marriage (mut'ah marriage), forced marriage, female genital mutilation and crimes committed in the name of 'honour', which includes awareness-raising and educational efforts targeting the general public, religious and community leaders and the media, in collaboration with civil society and women's organizations;

Para 20 (c): *Strengthen preventive and protective measures to eliminate female genital mutilation, ensure that rehabilitation programmes and information are readily available to victims and ensure that relevant professionals are sufficiently trained to identify potential victims and that perpetrators are brought to justice.*

In 2023 Iraq submitted its **8th State Report to CEDAW** (20) in which it reported on progress towards the earlier recommendations:

Para 58: *The crime of female circumcision, which is of course understood to be a type of abuse, does not occur in central and southern Iraq and therefore no judicial decisions have been issued in that regard. It falls under the provisions of articles 412 and 413 of the Criminal Code and any other text applicable to that sort of criminal abuse, as no cases of female circumcision have been recorded by the branches of the Directorate for Family and Child Protection in Baghdad or the governorates. Article 2 of Act No. 8 (2011) on countering domestic violence in the Kurdistan Region defines female circumcision as a form of domestic violence; article 6 prohibits female genital mutilation and imposes penalties on any person who practises or incites it or is complicit in it.*

Para 59: *The National Strategy to Combat Violence against Women 2018–2030 is aimed at closing all gaps after 2014 and responding to Sustainable Development Goal 5. The Strategy will support efforts to eliminate all forms of violence against women and girls, including trafficking and harmful sexual and other practices.*

Iraq's National Strategy to Combat Violence Against Women 2018-2030 (21) referred to in Para 59 above includes FGM in its definition of sexual assault:

Sexual Violence: Any form of non-consensual sexual contact that does not result in or include penetration. Examples include attempted rape, as well as unwanted kissing, fondling, or touching of genitalia and buttocks. Female Genital Mutilation (FGM) is an act of violence that impacts sexual organs, and as such should be classified as sexual assault.

In 2019–2020, the High Council of Women Affairs in the Kurdistan Regional Government, in collaboration with UNFPA/KRI, produced a plan for the elimination of FGC/FGM in the Kurdistan Region of Iraq, setting an overall goal and a specific objective with targets toward achieving elimination (22):

Overall Goal: *To assure the rights of girl children and their full development without maltreatment and gender-based violence in the form of Female Genital Mutilation (FGC) via eliminating the practice of FGM in KRI.*

Specific behavioural objective: Over the next 12 months in the Kurdistan Region of Iraq (KRI), 7,500 of an estimated 15,000 mothers who would otherwise have arranged female genital cutting/circumcision for their daughter (typically around age five) will choose not to do so. They will also maintain this decision in future. As a result, the

prevalence of cutting/circumcision is expected to fall to 5%, down from an estimated 10% in the previous 12 months.

The KRI goes on to admit the law relating to FGM/C (under the Domestic Violence Act, Article 6) has not been enforced and that despite there being '15,000 female circumcisions' taking place every year there have been no prosecutions and only one arrest (22 p.8). Regarding ways forward the Plan goes on to set out four key themes:

- Cutting is hurtful and very harmful;
- Cutting is un-Islamic;
- Cutting is illegal and is being prosecuted;
- 90% of the Kurdish population do the right thing and do not cut their daughters.

In March 2025, **CEDAW** members continued to raise in their List of Issues made in response to Iraq's State Report for the 8th Periodic Review, by asking for more information on implementation of the National Strategy and 'in particular their impact in addressing gender stereotypes and harmful practices' (23). The response of the Iraq Government is not available yet.

The **UN Committee on the Rights of the Child** has also been following up on progress. In their Concluding Remarks to Iraq's Combined 5th and 6th Periodic Review (July 2025) (24), under the Convention on the Rights of the Child, they recommended (para 30, p 9):

- *(d) To strictly enforce the criminalization of female genital mutilation, particularly in the Kurdistan Region, including by making its reporting mandatory, to support the victims and to ensure that those performing it are prosecuted and punished in accordance with the law;*
- *(e) To develop awareness-raising programmes to eliminate underlying social norms, value systems and attitudes that contribute to the practice of female genital mutilation, targeting households, local authorities, religious leaders, medical practitioners, teachers, educators and social workers, as well as judges and prosecutors.*

It is also worth noting that Iraq has been a member of the **Organisation of Islamic Cooperation (OIC)** since 1975. Iraq did not sign the Cairo Declaration on the Elimination of FGM (in June 2003). However in February 2025, the **OIC's Independent Permanent Human Rights Commission** (IPHRC) issued a statement on behalf of its membership on the occasion of the 'International Day of Zero Tolerance for Female Genital Mutilation 2025', in which it made an emphatic call for an end to all forms of violence against women, including Female Genital Mutilation in accordance with the international human rights standards. This statement is reproduced at Annex 4 (25).

This OIC IPHRC's statement calls on member states to take 'urgent and coordinated action to eliminate FGM' by a) enacting and enforcing legislation to eliminate FGM and other harmful practices, b) implementing effective measures to protect women and girls from harmful

practices and c) conducting widespread awareness and advocacy campaigns about the dangers of FGM and to dispel misconceptions regarding its religious basis.

Reference to ending harmful practices is also made in the **OIC's Plan of Action for the Advancement of Women** (OPAAW) which was adopted by OIC's Sixth Session of the Ministerial Conference on the Role of Women in the Development of OIC Member States held in Istanbul in November 2016 (26). The following statements reference this commitment:

Objective 6: Protection of Women from Violence: Combating all forms of gender-based violence, human trafficking and other harmful traditional practices against women and girls. Combating different forms of violence against women and girls including deprivation of opportunities and full enjoyment of their rights through preventive measures and provisions of rehabilitation to victims and punishment of perpetrators.

Section 6 (g): Contributing to eradication of all harmful practices, in particular, female genital mutilation through strong political support and involvement of religious and community leaders.

The matrices also set out mechanisms for implementation, including:

- Contributing to eradication of all harmful practices, in particular, female genital mutilation through strong political support and involvement of religious and community leaders (26 p. 34).
- Combating gender based violence in all its manifestations, including domestic violence, human trafficking, fighting harmful traditional practices and violence against displaced women (26 p.36).
- Integrate sexual and gender based violence response, including child violence in all humanitarian policies and develop channels of communication to denounce these harmful practices and provide necessary assistance to victims (26 p.40).

Civil Society Observations

Much of the progress that has been made on trying to eliminate FGM/C in Kurdistan Region and Iraq has been due to the efforts of WADI (27) , an international NGO which has been active in highlighting the prevalence of FGM/C since they conducted the first survey on the practice in Kurdistan in 2010. Over the past two decades they have been running the Stop FGM Middle East Campaign (28) and have submitted reports to both CEDAW and the CRC's Periodic Reviews of Iraq. They have also made films which are used by mobile teams working in villages in Kurdistan to inform local people about the harms of FGM, and in 2012 they launched an FGM/C hotline which provides social, psychological, medical and sexual advice to FGM/C-affected women throughout the region.

Other civil society organisations which have been involved in campaigning for the end of FGM in Iraq include the Êzîdi Women's Freedom Movement-(TAJÊ), and Amnesty International

which has campaigned for enforcement of Kurdistan's Domestic Violence Act, and for similar legislation to be put in place in the rest of Iraq (29).

Human Rights Watch have also taken up the issue with publication of a report in 2010 entitled '*They Took Me and Told Me Nothing: Female Genital Mutilation in Iraqi Kurdistan*' (30) highlighting the experiences of women and girls who undergo FGM/C in the region. The final part of their report called upon the KRI government (KRG) to enact legislation which outlaws the practice and launch a 'public awareness campaign' which discusses the dangerous physical and mental consequences of FGM/C. The 2011 Kurdistan Domestic Violence Law may have resulted from this and other civil society organisations (CSO) campaigning.

However, after the passing of the Kurdistan Domestic Violence Law which bans FGM/C and officially recognizes the practice as a form of violence against women, some religious leaders demanded the then President of KRI (Massoud Barzani) refuse to sign the bill into law. Consequently, the President did not sign the bill; however, it nonetheless entered into force and was published in the government's Official Gazette in August 2011. While the legislation is therefore in effect, its implementation and the extent to which it effectively outlaws FGM/C in the region remain contested. 'In general, the law has not been implemented,' the head of the Interior Ministry's Directorate to Follow Up on Violence Against Women, told Human Rights Watch. This was supported by a member of the Women's Affairs Committee in the KRG parliament who said 'The Family Violence Law, in almost all its aspects, has not yet begun to support women on the ground, and this is especially true of the FGM issue. Nothing is happening, and no one is even really talking about plans to implement it (31).'

Furthermore, a lawyer from the Women's Law Association (WOLA), a women's legal aid organisation based in Sulaymaniyah, stated that 'It is a good law, but there is no real effort on the part of the government to implement it – not even the first stages (31).'

There has also been concern that the uncertain situation as to the legality of FGM/C might be driving the practice underground. A senior member of WADI said, 'It used to be much easier to get women to speak about FGM. We often find that, after we tell them FGM is now illegal, they become nervous about admitting it. Even if a woman tells us she had FGM performed on her daughter, she will not tell us who did it anymore.' Even in areas where villagers were openly defiant of the law just after it was passed, the practice appears to now be performed in more secrecy than before, he said (31).

In its 2025 World Report, the international NGO Human Rights Watch documented ongoing human rights violations and systemic challenges for NGOs and other civil society organisations across the country. It highlighted abuses relating to freedom of expression, gender-based violence, impunity for state and militia actors, and the dire conditions in detention facilities and camps for internally displaced persons (IDPs) (32).

CSOs and NGOs began to emerge in Iraq in 2003 following the fall of the old regime and collapse of state institutions. Since then, the Iraqi CSO sector has grown exponentially. In 2010 a law was introduced to govern NGOs and CSOs. This included requirements to register,

declare sources of both foreign and domestic funding, and set out intended operational activity. Concern has been expressed, however, that the NGOs Directorate is controlled by the Iraqi Council of Ministers, and therefore subject to political influence with regard to registration and funding (33).

With regard to the collection of much needed data to establish FGC prevalence and the context in which it occurs, in 2021 the NGO Directorate issued official letter No. 34766 to all local and foreign organisations requiring that they submit all questionnaires for government approval before distribution. If an organization conducts a survey without prior government approval, it will be deemed to have violated regulations and be dissolved. It has been suggested that this regulation poses a significant restriction on the ability of CSOs and NGOs to collect data, particularly if it relates to culturally and politically sensitive issues (34).

Impact of the Kurdistan Domestic Violence Act (2011) – an NGO perspective

In discussion with Orchid researchers, international NGO WADI said the passing of this Act enabled them to train medical professionals, work with police, social workers and communities, and create a system of referrals, all of which had been impossible previously. The law was also useful in involving men in Wadi's FGM/C prevention strategies.

By highlighting how the law protects any member of the family affected by violence, regardless of gender, there was a shift in men's understanding and perspective on the purpose of the law. WADI insisted the law should not be used to threaten or create fear in communities. Rather it should be used as an entry point for discussing the health harms and illegality of FGM/C.

However, WADI pointed out there are shortcomings with implementation of the law. It requires an FGM/C lawsuit to be filed by the 'first related persons or the victim themselves.' This poses a problem as it is often children who are victims of FGM/C and children are unable to file lawsuits. Also, many perpetrators of FGM/C are family members so there is reluctance to take legal action against a close relative. The law does not allow a third party to bring a case against a perpetrator.

Wadi was aware of only four cases of FGM/C being taken to the police, but none of these led to prosecution as the perpetrators were old midwives and elderly women, and officials thought it was better not to get into legal issues with them. Regardless, Wadi believes 'it's important for people to know that there's this law and this law is there for you to use it.'

Conclusions

Iraqi-Kurdistan Region has legislation criminalising FGM/C in the form of the **Domestic Violence Act (2011)**; it also criminalises procuring, aiding and abetting performance of FGM/C.

Article 2 criminalises acts of domestic violence 'including physical, sexual and psychological violence within the family' and specifically criminalises FGM/C.

Article 3 refers to the setting up of specialised courts to deal with cases of domestic violence.

Article 4 sets out the procedure and terms on which Protection Orders can be issued against potential victims of domestic violence that includes FGM/C, and penalties for violation of such an Order.

Article 6 sets out the penalties for contravening the Act; penalties will be imposed on those who incite and assist in FGM/C as well as those who actually perform the cutting. It also provides for FGM/C that is carried out by a medical professional, who may be banned from practising their profession for up to three years.

Article 8 states that the Iraq Penal Code will apply 'in case there are no specific provisions stipulated in this Law'.

However, this legislation only applies to the Iraqi-Kurdistan Region, not to the whole of Iraq.

Outside of the Kurdistan Region, the **Iraq Penal Code** could apply to FGM/C performed on a girl or woman. It may be considered as a criminal act under **Article 383(1)** which refers to violence against a child under 15 years of age, or, under **Articles 410-416**, FGM/C could be regarded as an assault from wounding that results in death, permanent disability or harm or illness. The assault will be held to be aggravated if it is premeditated and / or carried out by three or more people; this could cover those who procure or assist in FGM/C as well as those who perform the cutting. Penalties for wounding range from a prison sentence of 1 year and/or a maximum fine of 100 dinars up to 15 years imprisonment.

Recommendations

Research demonstrates that while important, legislation against FGM/C should be part of a holistic, multi-sectoral approach to effectively work toward elimination of the practice. Enforcement of the law without a holistic approach can lead to fear and pushing the practice underground.

The following recommendations, therefore, should be considered alongside holistic and multi-sectoral approaches to ending the practice.

1. Fully implement the Kurdistan Domestic Violence Act 2011 and strengthen it by criminalising those who provide tools and premises used in FGM/C, as well as failure to report a planned or past incident.
2. Introduce a law that explicitly prohibits and criminalises FGM/C across all of Iraq. This law should cover perpetrators; procuring, aiding and abetting FGM/C; providing tools and premises for the purposes of FGM/C; and failure to report a planned or past incident of FGM/C. Alternatively amend Iraq's Penal Code to define and make specific reference to FGM/C as a criminal offence. Guidance on the features that should be included in a law against FGM/C are set out in Orchid Project's Model Law report, which is available [here](#).
3. Develop Ministry of Health guidelines on the dangers of FGM/C for all professional medical, health and welfare staff working in hospitals and clinics, including midwives, doctors and nurses, and forbid the practice from being undertaken in health facilities, with penalties for doing so that include their licence to practice medicine being withdrawn.
4. Put in place Iraqi national and Kurdistan regional policies and resources to provide widespread education on FGM/C and its harmful consequences to the health of women and girls.
5. Strengthen border controls, particularly along the borders between the Iraqi-Kurdistan region and neighbouring Kurdish communities in Iran and Turkey, to deter perpetrators from entering Iraq with the intention of practising FGM/C, and to deter practitioners from exiting Iraq with the intention of undertaking FGM/C in neighbouring countries.
6. Undertake a national statistical and disaggregated survey of the whole of Iraq to reliably determine prevalence and features of the practice of FGM/C, including surveying those who have already undergone FGM/C or are at risk of undergoing FGM/C, and assessing the extent to which medicalisation of the practice is taking place.

Appendix 1: International and Regional Treaties

Convention	Signed	Ratified	Acceded	Reservations on reporting
Convention on the Elimination of All forms of Discrimination Against Women (1979) (CEDAW)			13 August 1986	1. Approval of and accession to this Convention shall not mean that the Republic of Iraq is bound by the provisions of article 2, paragraphs (f) and (g), nor of article 16 of the Convention. The reservation to this last-mentioned article shall be without prejudice to the provisions of the Islamic Shariah according women rights equivalent to the rights of their spouses so as to ensure a just balance between them. Iraq also enters a reservation to article 29, paragraph 1, of this Convention with regard to the principle of international arbitration in connection with the interpretation or application of this Convention. 2. This approval in no way implies recognition of or entry into any relations with Israel.
Organisation of Islamic Cooperation (OIC) – Cairo Declaration on the Elimination of FGM/C (CDEFGM/C) (2003)	N/A	N/A	N/A	N/A
Convention on the Rights of the Child			15 June 1994	The Government of Iraq has seen fit to accept [the Convention] ... subject to a reservation in respect to article 14,

Child (1989) (CRC)				paragraph 1, concerning the child's freedom of religion, as allowing a child to change his or her religion runs counter to the provisions of the Islamic Shariah.
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'Signed': a treaty is signed by countries following negotiation and agreement of its contents.

'Ratified': once signed, most treaties and conventions must be ratified (i.e. approved through the standard national legislative procedure) to be legally effective in that country.

'Acceded': when a country ratifies a treaty that has already been negotiated by other states.

Annex 2: CEDAW General Recommendation No 14: Female Circumcision

FGM/C – UN CEDAW Committee General Recommendation No. 14 UN CEDAW COMMITTEE General Recommendation No. 14 (ninth session, 1990) Female circumcision

The Committee on the Elimination of Discrimination against Women, Concerned about the continuation of the practice of female circumcision and other traditional practices harmful to the health of women,

Noting with satisfaction that Governments, where such practices exist, national women's organizations, non-governmental organizations, and bodies of the United Nations system, such as the World Health Organization and the United Nations Children's Fund, as well as the Commission on Human Rights and its Sub- Commission on Prevention of Discrimination and Protection of Minorities, remain seized of the issue having particularly recognized that such traditional practices as female circumcision have serious health and other consequences for women and children,

Taking note with interest the study of the Special Rapporteur on Traditional Practices Affecting the Health of Women and Children, and of the study of the Special Working Group on Traditional Practices,

Recognizing that women are taking important action themselves to identify and to combat practices that are prejudicial to the health and well-being of women and children,

Convinced that the important action that is being taken by women and by all interested groups needs to be supported and encouraged by Governments,

Noting with grave concern that there are continuing cultural, traditional and economic pressures which help to perpetuate harmful practices, such as female circumcision,

Recommends that States parties:

Take appropriate and effective measures with a view to eradicating the practice of female circumcision. Such measures could include:

- The collection and dissemination by universities, medical or nursing associations, national women's organizations or other bodies of basic data about such traditional practices;

- The support of women's organizations at the national and local levels working for the elimination of female circumcision and other practices harmful to women;
- The encouragement of politicians, professionals, religious and community leaders at all levels, including the media and the arts, to co-operate in influencing attitudes towards the eradication of female circumcision.

The introduction of appropriate educational and training programmes and seminars based on research findings about the problems arising from female circumcision;

- Include in their national health policies appropriate strategies aimed at eradicating female circumcision in public health care. Such strategies could include the special responsibility of health personnel, including traditional birth attendants, to explain the harmful effects of female circumcision;

Invite assistance, information and advice from the appropriate organizations of the United Nations system to support and assist efforts being deployed to eliminate harmful traditional practices;

- Include in their reports to the Committee under articles 10 and 12 of the Convention on the Elimination of All Forms of Discrimination against Women information about measures taken to eliminate female circumcision.

Annex 3: Role of the State (UN: CEDAW/C/GC/31/Rev.1CRC/C/GC/18/Rev.1)

In 2019 the Committee on the Elimination of Discrimination against Women and Committee on the Rights of the Child issued Joint General Recommendation No. 31 of the Committee on the Elimination of Discrimination against Women/General Comment, and No. 18 of the Committee on the Rights of the Child (2019), on harmful practices.

Available at: [g1913442.pdf](#) or [www.documents.un.org/doc/undoc/gen/g19/134/42/pdf/g1913442.pdf](#)

The objective of this Joint General Recommendation/General Comment is to clarify the obligations of States party to the Conventions by providing authoritative guidance on legislative, policy and other appropriate measures that must be taken to ensure full compliance with their obligations under the Conventions to eliminate harmful practices.

This Joint Recommendation/General Comment sets out a framework that States should follow in order to eliminate harmful practices. Of particular note are the recommendations as set out below:

Article 39. The Committees recommend that the States parties to the Conventions:

- (a) Accord priority to the regular collection, analysis, dissemination and use of quantitative and qualitative data on harmful practices disaggregated by sex, age, geographical location, socioeconomic status, education level and other key factors, and ensure that such activities are adequately resourced. Regular data collection systems should be established and/or maintained in the health-care and social services, education and judicial and law enforcement sectors on protection-related issues;
- (b) Collect data through the use of national demographic and indicator surveys and censuses, which may be supplemented by data from nationally representative household surveys. Qualitative research should be conducted through focus group discussions, in-depth key informant interviews with a wide variety of stakeholders, structured observations, social mapping and other appropriate methodologies.

Article 55. The Committees recommend that the States parties to the Conventions adopt or amend legislation with a view to effectively addressing and eliminating harmful practices. In doing so, they should ensure:

- (a) That the process of drafting legislation is fully inclusive and participatory. For that purpose, they should conduct targeted advocacy and awareness-raising and use social mobilization measures to generate broad public knowledge of and support for the drafting, adoption, dissemination and implementation of the legislation;
- (b) That the legislation is in full compliance with the relevant obligations outlined in the Convention on the Elimination of All Forms of Discrimination against Women and the Convention on the Rights of the Child and other international human rights standards that prohibit harmful practices and that it takes precedence over customary, traditional or religious laws that allow, condone or prescribe any harmful practice, especially in countries with plural legal systems;
- (c) That they repeal without further delay all legislation that condones, allows or leads to harmful practices, including traditional, customary or religious laws and any legislation that accepts the defence of honour as a defence or mitigating factor in the commission of crimes in the name of so-called honour;
- (d) That the legislation is consistent and comprehensive and provides detailed guidance on prevention, protection, support and follow-up services and assistance for victims, including towards their physical and psychological recovery and social reintegration, and is complemented by adequate civil and/or administrative legislative provisions;
- (e) That the legislation adequately addresses, including by providing the basis for the adoption of temporary special measures, the root causes of harmful practices, including discrimination on the basis of sex, gender, age and other intersecting factors, focuses on the human rights and needs of the victims and fully takes into account the best interests of children and women;
- (f) That a minimum legal age of marriage for girls and boys, with or without parental consent, is established at 18 years;
- (g) That a legal requirement of marriage registration is established and effective implementation is provided through awareness-raising, education and the existence of adequate infrastructure to make registration accessible to all persons within their jurisdiction;
- (h) That a national system of compulsory, accessible and free birth registration is established in order to effectively prevent harmful practices, including child marriage;
- (i) That national human rights institutions are mandated to consider individual complaints and petitions and carry out investigations, including those submitted on behalf of or directly by women and children, in a confidential, gender sensitive and child-friendly manner;
- (j) That it is made mandatory by law for professionals and institutions working for and with children and women to report actual incidents or the risk of such incidents if they

have reasonable grounds to believe that a harmful practice has occurred or may occur. Mandatory reporting responsibilities should ensure the protection of the privacy and confidentiality of those who report;

(k) That all initiatives to draft and amend criminal laws must be coupled with protection measures and services for victims and those who are at risk of being subjected to harmful practices;

(l) That legislation establishes jurisdiction over offences of harmful practices that applies to nationals of the State party and habitual residents even when they are committed in a State in which they are not criminalized;

(m) That legislation and policies relating to immigration and asylum recognize the risk of being subjected to harmful practices or being persecuted as a result of such practices as a ground for granting asylum. Consideration should also be given, on a case-by-case basis, to providing protection to a relative who may be accompanying the girl or woman;

(n) That the legislation includes provisions on regular evaluation and monitoring, including in relation to implementation, enforcement and follow-up;

(o) That women and children subjected to harmful practices have equal access to justice, including by addressing legal and practical barriers to initiating legal proceedings, such as the limitation period, and that the perpetrators and those who aid or condone such practices are held accountable;

(p) That the legislation includes mandatory restraining or protection orders to safeguard those at risk of harmful practices and provides for their safety and measures to protect victims from retribution;

(q) That victims of violations have equal access to legal remedies and appropriate reparations in practice.

Article 69. The Committees recommend that the States parties to the Conventions:

(a) Provide universal, free and compulsory primary education that is girl friendly, including in remote and rural areas, consider making secondary education mandatory while also providing economic incentives for pregnant girls and adolescent mothers to complete secondary school and establish non-discriminatory return policies;

(b) Provide girls and women with educational and economic opportunities in a safe and enabling environment where they can develop their self-esteem, awareness of their rights and communication, negotiation and problem-solving skills;

(c) Include in the educational curriculum information on human rights, including those of women and children, gender equality and self-awareness and contribute to eliminating gender stereotypes and fostering an environment of non-discrimination;

- (d) Ensure that schools provide age-appropriate information on sexual and reproductive health and rights, including in relation to gender relations and responsible sexual behaviour, HIV prevention, nutrition and protection from violence and harmful practices; (
- e) Ensure access to non-formal education programmes for girls who have dropped out of regular schooling, or who have never enrolled and are illiterate, and monitor the quality of those programmes;
- (f) Engage men and boys in creating an enabling environment that supports the empowerment of women and girls.

Article 73: The Committees recommend that the States parties to the Conventions:

- (a) Provide all relevant front-line professionals with information on harmful practices and applicable human rights norms and standards and ensure that they are adequately trained to prevent, identify and respond to incidents of harmful practices, including mitigating negative effects for victims and helping them to gain access to remedies and appropriate services;
- (b) Provide training to individuals involved in alternative dispute resolution and traditional justice systems to appropriately apply key human rights principles, especially the best interests of the child and the participation of children in administrative and judicial proceedings;
- (c) Provide training to all law enforcement personnel, including the judiciary, on new and existing legislation prohibiting harmful practices and ensure that they are aware of the rights of women and children and of their role in prosecuting perpetrators and protecting victims of harmful practices;
- (d) Conduct specialized awareness and training programmes for health-care providers working with immigrant communities to address the unique health-care needs of children and women who have undergone female genital mutilation or other harmful practices and provide specialized training also for professionals within child welfare services and services focused on the rights of women and the education and police and justice sectors, politicians and media personnel working with migrant girls and women.

Article 81. The Committees recommend that the States parties to the Conventions:

- (a) Develop and adopt comprehensive awareness-raising programmes to challenge and change cultural and social attitudes, traditions and customs that underlie forms of behaviour that perpetuate harmful practices;
- (b) Ensure that awareness-raising programmes provide accurate information and clear and unified messages from trusted sources about the negative impact of harmful practices on women, children, in particular girls, their families and society at large. Such

programmes should include social media, the Internet and community communication and dissemination tools;

(c) Take all appropriate measures to ensure that stigma and discrimination are not perpetuated against the victims and/or practising immigrant or minority communities;

(d) Ensure that awareness-raising programmes targeting State structures engage decision makers and all relevant programmatic staff and key professionals working within local and national government and government agencies;

(e) Ensure that personnel of national human rights institutions are fully aware and sensitized to the human rights implications of harmful practices within the State party and that they receive support to promote the elimination of those practices;

(f) Initiate public discussions to prevent and promote the elimination of harmful practices, by engaging all relevant stakeholders in the preparation and implementation of the measures, including local leaders, practitioners, grass-roots organizations and religious communities. The activities should affirm the positive cultural principles of a community that are consistent with human rights and include information on experiences of successful elimination by formerly practising communities with similar backgrounds;

(g) Build or reinforce effective partnerships with the mainstream media to support the implementation of awareness-raising programmes and promote public discussions and encourage the creation and observance of self-regulatory mechanisms that respect the privacy of individuals.

Article 87. The Committees recommend that the States parties to the Conventions:

(a) Ensure that protection services are mandated and adequately resourced to provide all necessary prevention and protection services to children and women who are, or are at high risk of becoming, victims of harmful practices;

b) Establish a free, 24-hour hotline that is staffed by trained counsellors, to enable victims to report instances when a harmful practice is likely to occur or has occurred, and provide referral to needed services and accurate information about harmful practices;

(c) Develop and implement capacity-building programmes on their role in protection for judicial officers, including judges, lawyers, prosecutors and all relevant stakeholders, on legislation prohibiting discrimination and on applying laws in a gender-sensitive and age-sensitive manner in conformity with the Conventions;

(d) Ensure that children participating in legal processes have access to appropriate child-sensitive services to safeguard their rights and safety and to limit the possible negative impacts of the proceedings. Protective action may include limiting the number of times that a victim is required to give a statement and not requiring that

individual to face the perpetrator or perpetrators. Other steps may include appointing a guardian ad litem (especially where the perpetrator is a parent or legal guardian) and ensuring that child victims have access to adequate child sensitive information about the process and fully understand what to expect;

(e) Ensure that migrant women and children have equal access to services, regardless of their legal status.

Annex 4: OIC statement dated 2 Feb 2025 (25)

OIC-IPHRC, on the occasion of the 'International Day of Zero Tolerance for Female Genital Mutilation 2025', made an emphatic call for an end to all forms of violence against women, including Female Genital Mutilation in accordance with the international human rights standards.

Jeddah, 6th February 2025: The Independent Permanent Human Rights Commission (IPHRC) of the Organization of Islamic Cooperation (OIC) joins the international community in commemorating the 'International Day of Zero Tolerance for Female Genital Mutilation (FGM) 2025' and strongly condemns all forms of violence against women and girls, including the harmful practice of Female Genital Mutilation (FGM). The Commission reaffirms that FGM is a deeply entrenched traditional practice with no religious justification and stands in clear violation of human rights.

The Commission emphasizes that Islam upholds the dignity and rights of women and categorically rejects practices that cause physical, psychological, or emotional harm. It is estimated that over 230 million girls and women worldwide have suffered the effects of FGM and that an estimated 27 million additional girls are at risk of undergoing FGM by 2030 unless action is accelerated¹. FGM violates several human rights outlined under the Universal Declaration of Human Rights, the Convention on the Elimination of all Forms of Discrimination against Women, and the Convention on the Rights of the Child. The practice of FGM is recognized internationally as a violation of the human rights of girls and women. It is mainly carried out on minors and is a violation of the rights of the girl child. The practice also violates a person's right to health, security, and physical integrity; the right to be free from torture and cruel, inhuman, or degrading treatment; and the right to life in instances when the procedure results in death.

The Commission acknowledges and appreciates efforts being taken by the Member States against this practice that endangers the physical and psychological health of women and girls. It was concluded at the Second Islamic Conference of Ministers in charge of Childhood held in Khartoum in 2009² that FGM is a violation of the human rights of girls and women. OIC has adopted 'The Cairo Declaration of the OIC on Human Rights³, in which specific sections are included on 'Human Rights of Women,' which calls for the protection of women against all forms of discrimination, violence, abuse, and harmful traditional practices. Also, OIC welcomed the UN General Assembly resolution 67/146, entitled, intensifying global efforts for the elimination of female genital mutilations⁴ and resolution 67/144, entitled, Intensification of efforts to eliminate all forms of violence against women⁵, both of which were adopted without a vote. Human Rights Council adopted resolution 44/16 on the elimination of FGM to speed up efforts to reach zero tolerance for FGM by 2030 and to restate

the global ban on the harmful practice as it constitutes a serious violation of women rights. Goal 5 of the 2030 Agenda for Sustainable Development⁷ calls for eliminating FGM. The International Islamic Fiqh Academy, in its Resolution No. 220 (4/23)⁸, categorically stated that female genital mutilation is prohibited in Islam. Accordingly, the OIC Plan of Action for the Advancement of Women (OPAAW)⁹ and its comprehensive implementation mechanism, while supporting international efforts, calls for the eradication of all harmful practices, in particular, FGM.

The Commission calls for collective efforts to empower women and girls through education, healthcare, and legal protection. It calls upon governments, civil society organizations, and the media to take urgent and coordinated action to eliminate FGM. Human rights-based approaches to eradication include, but are not limited to, the enforcement of laws, education programs focused on empowerment, and campaigns to recruit change agents from within communities. Accordingly, the Commission urges governments to: (a) enact and enforce legislation to eliminate FGM and other harmful practices; (b) implement effective administrative measures to protect women and girls from harmful practices and violence and ensure accountability; (c) conduct widespread awareness and advocacy campaigns to educate the public on the dangers of FGM and dispel misconceptions regarding its religious basis. In this regard, the Commission, while respecting cultural sensitivities and national laws, affirmed its readiness to work together with all relevant OIC institutions and Member States to bring an end to all forms of violence, bias, and discrimination against women.

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