THE LAW AND FGC Singapore

November 2024



About Orchid Project

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

- to undertake research, generate evidence and curate knowledge to better equip those working to end FGC;
- 2. to facilitate capacity-strengthening of partners, through learning and knowledge-sharing, to improve programme designs and impacts for the movement to end FGC; and
- 3. to steer global and regional policies, actions and funding towards ending FGC.

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 ARROW

The Asian-Pacific Resource and Research Centre for Women is a non-profit women's NGO with a consultative status with the Economic and Social Council of the United Nations and an observer status with the United Nations Framework Convention on Climate Change. Based in Kuala Lumpur, Malaysia, ARROW has been working since 1993 to champion women and young people's sexual and reproductive rights. ARROW occupies a strategic niche in the Asia-Pacific region and is a Global-South-based, feminist and women-led organisation that focuses on the equality, gender, health and human rights of women.

About Asia Network to End FGM/C

The Asia Network to End Female Genital Mutilation/Cutting (FGM/C) is a group of civil-society actors, led by Orchid Project and ARROW, working across Asia to end all forms of FGM/C. It does this by connecting, collaborating and supporting Asian actors and survivors to advocate for an end to this harmful practice.





Overview of National Legal Framework

- X Specific law/provision criminalising FGC
- X Provides a definition of FGM/C
- ✓ Criminalises the performance of FGC
- ✓ Criminalises the procurement, arrangement and/or assistance of acts of FGC
- Obligation for medical and certain other professionals to report incidents of FGC to the authorities
- X Criminalises the participation of medical professionals in acts of FGC

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Recommended citation: Orchid Project and Asia Network to End FGM/C (2024) The Law

and FGC: Singapore. Available at

https://www.fgmcri.org/country/singapore/.

Cover image design: Natalia Stafeeva (https://stafeeva.site/)

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Orchid Project seeks updates on the data and invites comments on the content and suggestions as to how these reports can be improved.

Introduction

Singapore is a sovereign country and city-state in South East Asia with an estimated population of 6.5 million. It is a parliamentary-representative democratic republic and has a legal system based on common law.

A Note on Terminology

Sunat perempuan, sunat or khitan, meaning 'female circumcision' are the terms most commonly used in Singapore to refer to female genital cutting (FGC). The term 'female genital mutilation' is not used, as affected communities in Singapore do not regard the practice to be 'mutilation'. 'FGC' and 'sunat' are used interchangeably in this report, according to context.

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

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.¹

Prevalence of FGC

There are no clear data to indicate the prevalence of female genital cutting (FGC) in Singapore. Anecdotally, the practice appears to be limited to Muslims, including the Malay and Dawoodi Bohra communities.

According to Singapore's 2020 census,² Muslims comprise 15.6% (545,500) of Singapore's population (aged 15 and over). Of those, 98.8% identify as Malay. Malays are further divided into 'ethnic Malays' (370,445), 'Javanese' (94,584), 'Boyanese' (60,285) and 'other Malays' (20,184).

The extent of FGC within each of these Malay groups is not known, but a 2020 pilot study (conducted by End FGC Singapore) of Muslim women living in Singapore found an FGC prevalence of 75% among the 360 survey participants.³ There have been no larger or more official surveys of the extent of FGC in the Singaporean Malay community.

About a thousand members of the Dawoodi Bohra Muslim community, who are also known to practise FGC, reside in Singapore, although there is no reference to them in the census report. Surveys carried out with Dawoodi Bohra women in India⁴ suggest an FGC prevalence of between 75% and 85%, but there have been no surveys to assess the extent of FGC among Bohra women living in Singapore.

It is likely the majority of Malay girls in Singapore are cut as infants or before two years of age, as is the case for Malay girls across all of South East Asia.⁵

The pilot study conducted by End FGC Singapore found that most women do not know the type of cut they experienced. Of those who do know, however, about a third (35.2%) experienced Type 1 (according to the World Health Organization's categories – see the box on the previous page) and another third (34.4%) experienced 'surgical removal of tissue', which could constitute Types 1 or 2, depending on its extent. The remainder experienced some form of Type 4, including 'pricking', 'scraping' or 'swabbing or a symbolic act'.⁶

Among Dawoodi Bohra the age of cutting is usually six or seven years. According to a survey conducted in India, the form of cutting is most often Type 1, although a few women report having had flesh removed, which, depending on the extent, could be classified as Type 2.⁷

National Legal Framework

There is no specific law against FGC in Singapore. However, the performance of FGC could fall under various provisions in general criminal law, depending on the circumstances and the degree of harm inflicted.

Applicable General Laws

Chapter 16 (Offences Affecting the Human Body), Sections 319–322 of the Penal Code 1871⁸ relate to voluntarily causing 'hurt', or the more serious 'grievous hurt', to another person, be it an act that is done with the intention of causing hurt or with knowledge that hurt will likely be caused.

'Hurt' is defined as 'bodily pain, disease or infirmity to any person', and the definition of 'grievous hurt' includes '(e) destruction or permanent impairing of the powers of any member or joint' and '(h) any hurt which endangers life, or which causes the sufferer to be, during the space of 20 days, in severe bodily pain, or unable to follow his ordinary pursuits'.

Almost any type of FGC could be viewed as 'hurt', but if a girl or woman experiences Type 2, which involves the cutting away of more flesh, it could be considered 'grievous hurt'. Potentially, all types of FGC would therefore be prosecutable under **the Penal Code**.

The Children and Young Persons Act 1993, Section 6,⁹ relates to the ill-treatment of a child or young person by those who have custody of them; or if their custodian causes, procures or knowingly permits another person to ill-treat a child or young person.

Ill-treatment is defined as subjecting a child or young person to physical or sexual abuse, endangering their safety (i.e. causing 'unnecessary physical pain, suffering or injury'; 'emotional harm', or 'any injury to his or her health and development'), or neglecting, abandoning or exposing them.

Any form of FGC may fall under **Section 6(3)(b)**, as it could be considered an

act which endangers or is likely to endanger the safety of the child or young person or which causes or is likely to cause the child or young person —

- (i) any unnecessary physical pain, suffering or injury;
- (ii) any emotional harm; or
- (iii) any injury to his or her health or development.

The Women's Charter 1961 and The Administration of Muslim Law Act 1966

Singapore has **a plural legal system** in relation to marriage and family matters.

The Women's Charter 1961¹⁰ was a landmark piece of legislation aimed at protecting and promoting the rights and interests of women and girls in Singapore, especially in the areas of marriage, divorce, family and property. It provides for the solemnisation and registration of marriages, laws relating to divorce, the rights and duties of married persons, including maintenance payments, the protection of family and the punishment of offences against women and girls.

However, under **Section 3**, only non-Muslim Singaporeans are covered by large sections of the Charter. Much of the Charter does not apply to 'any person who is married under, or to any marriage solemnised or registered under, the provisions of the Muslim law or of any written law in Singapore or in Malaysia providing for the registration of Muslim marriages'.¹¹

Instead, Singaporean Muslims are covered by the **Administration of Muslim Law Act 1966**,¹² (*AMLA*), which governs the application of Muslim law to marriage, divorce and inheritance among Muslims, and is implemented through the Sharia Court system that was established in Singapore in 1958.¹³

However, where an act is illegal under the general, secular laws, such as the Penal Code, these take precedence over the AMLA. The secular courts have jurisdiction over criminal matters. The AMLA will only take precedence over other laws in cases of family law involving Muslim couples/families/persons. For instance, although the Women's Charter prohibits polygamy in Singapore among non-Muslims, the AMLA permits Muslim men to marry up to four wives. Similarly, while the Women's Charter states that marriage can only take place between persons aged 18 years and over (unless authorised by a special licence), the AMLA does not stipulate a minimum age for marriage, but allows a girl to marry below the age of 18 providing she 'has attained the age of puberty'.¹⁴

Part 7 (*Protection of Family*) of the Women's Charter 1961 contains a reference at paragraph 64 to 'family violence', which includes 'causing hurt to a family member by such act which is known or ought to have been known would result in hurt' ('hurt' being defined as 'bodily pain, disease or infirmity'). This section relates to **attaining protection orders**, which may be necessary in a situation where, for example, a child is threatened with FGC.

The Islamic Religious Council of Singapore (*MUIS*)¹⁵ is a statutory board that provides advice on religious matters to Muslims. The MUIS states that the institution 'does not condone any procedures which bring harm to the individual', adding that the council has 'always held the position that FGM should be avoided.'¹⁶ The Muslim community takes guidance from the MUIS, and, therefore, it would be important to engage with the organisation on initiatives aimed at tackling the practice of FGC in Singapore.

Procuring, Aiding and Abetting FGC

Procuring, aiding and abetting FGC on women and girls of all ages in Singapore would fall under **Singapore's Penal Code 1871**.

- Chapter 5, Sections 107 and 108 define 'abetment' as when a person instigates, or engages or aids another/others to undertake, an illegal act.
- **Section 120A** defines a 'criminal conspiracy' as: 'When a person agrees with another person to commit an offence or cause an offence to be committed '¹⁷

Under these sections, it could be argued that someone who arranges for a girl to undergo FGC or who assists in cutting could be prosecuted as an abettor of the offence of hurt or grievous hurt.

Allowing the use of one's premises for the purposes of FGC is not criminalised; nor is providing or possessing tools or equipment for the purposes of FGC.

Failure to Report FGC

The Criminal Procedure Code 2010, Section 424 states,

Every person who is aware of the commission or intention of another to commit any arrestable offence punishable under Chapters...16 of the Penal Code 1871... must... immediately give information to the officer in charge of the nearest police station or to a police officer of the commission or intention.¹⁸

The burden of proof rests with the reporter.

Medicalised FGC

Although the performance of or assistance in medicalised FGC by any healthcare professional in any location or premises is not specifically criminalised in Singaporean law, it would nevertheless be punishable under **the Penal Code** as detailed above.

It is worth noting that in 2006 the Singapore Government reported to the United Nations' Committee on the Rights of the Child:

Female circumcision is very rare and private to a Muslim family in their choice of practice for girls. Female circumcisions, as practiced in Singapore, do not mutilate the female genitalia. These procedures take place in a sterile, private environment, and are performed by qualified female doctors.¹⁹

This is a recognition by the Singapore Government that FGC is taking place in the country and that it is being undertaken by health professionals. This matter is discussed further in the section below titled 'Role of the State'.

Protection of Uncut Girls and Women

There are no provisions to protect uncut women and girls (and their families) from derogatory or abusive language, or from discrimination and actions that exclude them from society and community activities because of their uncut status.

Protection of Victims and Witnesses

There are no mechanisms in place for the protection of victims and witnesses in FGC legal cases, nor are protection orders for potential victims provided for in the law.

Committee on the Elimination of Discrimination against Women Committee on the Rights of the Child Joint Statement

Criteria for determining harmful practices

- 15. Harmful practices are persistent practices and forms of behaviour that are grounded in discrimination on the basis of, among other things, sex, gender and age, in addition to multiple and/or intersecting forms of discrimination that often involve violence and cause physical and/or psychological harm or suffering. The harm that such practices cause to the victims surpasses the immediate physical and mental consequences and often has the purpose or effect of impairing the recognition, enjoyment and exercise of the human rights and fundamental freedoms of women and children. There is also a negative impact on their dignity, physical, psychosocial and moral integrity and development, participation, health, education and economic and social status. The practices are therefore reflected in the work of both Committees.
- 16. For the purposes of the present joint general recommendation/general comment, practices should meet the following criteria to be regarded as harmful:
- (a) They constitute a denial of the dignity and/or integrity of the individual and a violation of the human rights and fundamental freedoms enshrined in the two Conventions;
- (b) They constitute discrimination against women or children and are harmful insofar as they result in negative consequences for them as individuals or groups, including physical, psychological, economic and social harm and/or violence and limitations on their capacity to participate fully in society or develop and reach their full potential;
- (c) They are traditional, re-emerging or emerging practices that are prescribed and/or kept in place by social norms that perpetuate male dominance and inequality of women and children, on the basis of sex, gender, age and other intersecting factors;
- (d) They are imposed on women and children by family members, community members or society at large, regardless of whether the victim provides, or is able to provide, full, free and informed consent.²⁰

Penalties

Penalties for performing or assisting with FGC could be imposed under several of the laws described above; in particular, **the Penal Code**, **the Criminal Procedure Code**, and **the Children and Young Person's Act 1993**.

The Penal Code provides a range of penalties for causing hurt or grievous hurt (both of which could be applied to all types of FGC, although 'hurt' is more likely to be applied to Types 1 and 4), abetting or failing to report an offence or the intention to commit an offence, as outlined below.

- Under **Sections 323** and **324** (**Punishment for voluntarily causing hurt**), whoever 'voluntarily causes hurt, shall be punished with *imprisonment for a term which may extend to 3 years, or with [a] fine which may extend to \$5,000, or with both.*'²¹
- Under **Section 325 (Punishment for voluntarily causing grievous hurt)**, whoever 'voluntarily causes grievous hurt, shall be punished with *imprisonment for a term which may extend to 10 years, and shall also be liable to [a] fine or to caning.*'²²
- Section 109 deals with abetment and provides that anyone who abets an offence may be punished with the same punishment as for the offence itself. Further, Section 120B (Punishment of criminal conspiracy) states that whoever is party to a criminal conspiracy may be punished in the same manner as if he had abetted the offence that is the subject of the conspiracy.²³
- Under **Section 202**, anyone who fails to report an offence or an intention to offend 'shall be punished, with *imprisonment for a term which may extend to 6 months, or with [a] fine, or with both.'24*
- Section 204A refers to obstructing the course of justice:

Whoever does an act that has a tendency to obstruct, prevent, pervert or defeat the course of justice — (a) knowing that the act is likely to obstruct, prevent, pervert or defeat the course of justice; or (b) intending to obstruct, prevent, pervert or defeat the course of justice, shall be guilty of an offence and shall on conviction be punished with *imprisonment for a term which may extend to 7 years, or with [a] fine, or with both.*²⁵

The Children and Young Persons Act sets out punishments for the ill-treatment of a child or young person, which could be applied to cases of FGC.

• Under **Section 6(6)**, anyone found guilty of an offence under Section 6 will be liable 'to a fine not exceeding \$8,000 or to imprisonment for a term not exceeding 8 years or to both.'²⁶

- Further, under **Section 6(7)**, the court may, in lieu of the abovementioned punishment, require the guilty party to execute *a good behaviour bond* for a period determined by the court. The court may also require the person to undergo counselling, psychotherapy or other treatments.²⁷
- Failure to comply with any of the bond conditions makes the party liable to *the loss of their bond, a further fine of up to \$20,000 and/or a further term of imprisonment for up to 7 years* under **Section 6(8)**.²⁸

Implementation of the Law

Court Cases

In Singapore, there have been no prosecutions for the offence of FGC; for example, as 'hurt' or 'grievous hurt' under the Penal Code.

Role of the State

See also Appendix III.

As mentioned above in the section 'Medicalised FGC', in its 2006 response to the United Nations' Committee on the Rights of the Child, the Government of Singapore acknowledged that FGC in Singapore is being undertaken by health professionals in medical facilities.

However, in its 6th periodic report to the Committee on the Elimination of Discrimination against Women (*CEDAW*) in 2021, the Government made no mention of FGC and no reference to its intention to meet **the Sustainable Development Goals' target 5.3 to end harmful traditional practices**.²⁹ Following representations by local non-governmental organisations,³⁰ a question was subsequently raised in the List of Issues put to the Singapore Government by the CEDAW in November 2022. The reply was as follows:

XII. Reply to paragraph 11 of the list of issues and questions

- 42. Singapore does not condone harmful practices and where harm to an individual can be established in a procedure, the procedure should be avoided. Female genital mutilation is not a recognised medical procedure in Singapore.
- 43. Singapore does not track the prevalence of this practice.31

Since the Government itself has called the practice 'harmful', so it should be expected that cases of FGC would be brought under **the Penal Code Chapter 16, Sections 319–322**, as referred to above.

As noted above, in 2016 the MUIS also stated that the institution 'does not condone any procedures which bring harm to the individual', adding that the council has 'always held the position that FGM should be avoided.'32

Conclusions

Singapore has no specific law or legislation banning FGC in Singapore, and the Government has taken no public stance on the practice. There are also no directly relevant national policies relating to FGC and no legal rulings against its practice.

Despite this, there are pieces of legislation in Singapore that contain general provisions that would apply to FGC cases, depending on the circumstances and the degree of harm inflicted. These include the following.

- The Penal Code, which is the main criminal law statute in Singapore that defines and punishes offences against the human body such as causing 'hurt' or 'grievous hurt'. The Code also covers the offences of procuring, aiding or abetting an act that is likely to lead to hurt or grievous hurt, and failure to report such an offence or intended offence. It sets out penalties for these offences that range from fines to 15 years' imprisonment.
- The Children and Young Persons Act, which is the main legislation in Singapore that protects the welfare and rights of children and young persons under the age of 18. It contains provisions prohibiting any person from ill-treating a child or causing them unnecessary physical or mental suffering.
- **The Criminal Procedure Code**, which is the main legislation that governs the conduct of criminal proceedings in Singapore, from the investigation and arrest of suspects to the trial and sentencing of offenders. It includes a duty to report an offence or an intended offence.
- **The Women's Charter** protects and promotes the rights and interests of non-Muslim women and girls in Singapore, especially in the areas of marriage, divorce, family and property. Its provisions on protection orders may be relevant in cases where there is a high risk of FGC.
- **The Administration of Muslim Law Act**, by which Muslim women are governed in relation to marriage, divorce, inheritance and other family matters.

Recommendations

Orchid Project recommends that:

- 1. as a first step, **a national survey be conducted** to confirm the extent of FGC in Singapore and to gather data about the age at which girls undergo cutting, who performs it and in what facilities (including hospitals and general-practitioner clinics), the types of FGC that occur and the reasons for the continuance of the practice;
- 2. the Government of Singapore, in conjunction with the Islamic Religious Council of Singapore (MUIS) **set up a national working group** tasked with developing and implementing programmes of education and awareness-raising about the health problems and other harms FGC causes in communities in which it is practised;
- 3. while it is hoped that education and awareness-raising about the harms of FGC will lead to a reduction in the practice, the Government consider **introducing legislation that criminalises it.** This could take one of two forms:
 - amending the Children and Young Persons Act 1993 to include FGC as a criminal offence for which parents and custodians can be held responsible, and to provide the capacity for police and judicial authorities to instate orders that guarantee the protection of girls and women at risk of FGC; or
 - introducing a specific law criminalising FGC, which includes a clear definition of FGC that corresponds to the one given by the World Health Organization and clarifies any uncertainty around what types of cutting are classified as FGC; provides specific penalties for people who arrange, undertake or assist in the process of FGC on a minor girl or adult woman; and criminalises the failure to report its occurrence or likely occurrence.
- 4. Finally, Orchid Project recommends that the Singapore Ministry of Health issue **a** warning to all licensed medical practitioners (including general practitioners, midwives and nurses) that FGC is not to be carried out in any health premises and that those who perform FGC may lose their licences to practise if they do so.

Appendix I: International and Regional Treaties

Singapore	Signed?	Ratified/ Acceded?	Reservations on Reporting? Yes/No
International			
Convention on the Elimination of All Forms of Discrimination against Women (1979)	Yes	Yes, 1995	Yes: In the context of Singapore's multiracial and multireligious society and the need to respect the freedom of minorities to practise their religious and personal laws, the Republic of Singapore tabled reservations to Articles 2, 9, 11, 16 and 29(2).
Convention on the Rights of the Child (1989)	Yes	Yes, 1995	Yes. See * below.

^{&#}x27;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.

*Declarations

- '(1) The Republic of Singapore considers that a child's rights as defined in the Convention, in particular the rights defined in article 12 to 17, shall in accordance with articles 3 and 5 be exercised with respect for the authority of parents, schools and other persons who are entrusted with the care of the child and in the best interests of the child and in accordance with the customs, values and religions of Singapore's multi-racial and multi-religious society regarding the place of the child within and outside the family.
- '(2) The Republic of Singapore considers that articles 19 and 37 of the Convention do not prohibit
 - '(a) the application of any prevailing measures prescribed by law for maintaining law and order in the Republic of Singapore;
 - '(b) measures and restrictions which are prescribed by law and which are necessary in the interests of national security, public safety, public order, the protection of public health or the protection of the rights and freedoms of others; or
 - '(c) the judicious application of corporal punishment in the best interest of the child.'

Reservations

- '(3) The Constitution and the laws of the Republic of Singapore provide adequate protection and fundamental rights and liberties in the best interests of the child. The accession to the Convention by the Republic of Singapore does not imply the acceptance of obligations going beyond the limits prescribed by the Constitution of the Republic of Singapore nor the acceptance of any obligation to introduce any right beyond those prescribed under the Constitution.
- (4) Singapore is geographically one of the smallest independent countries in the world and one of the most densely populated. The Republic of Singapore accordingly reserves the right to apply such legislation and conditions concerning the entry into, stay in and departure from the Republic of Singapore of those who do not or who no longer have the right under the laws of the Republic of Singapore, to enter and remain in the Republic of Singapore, and to the acquisition and possession of citizenship, as it may deem necessary from time to time and in accordance with the laws of the Republic of Singapore.
- (5) The employment legislation of the Republic of Singapore prohibits the employment of children below 12 years old and gives special protection to working children between the ages of 12 years and below the age of 16 years. The Republic of Singapore reserves the right to apply article 32 subject to such employment legislation.
- '(6) With respect to article 28.1(a), the Republic of Singapore—
 - '(a) does not consider itself bound by the requirement to make primary education compulsory because such a measure is unnecessary in our social context where in practice virtually all children attend primary school; and
 - '(b) reserves the right to provide primary education free only to children who are citizens of Singapore.'

Appendix II: CEDAW General Recommendation No. 14: Female Circumcision

Adopted at the Ninth Session of the Committee on the Elimination of Discrimination against Women, in 1990

(Contained in Document A/45/38 and Corrigendum)

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, specialized agencies, such as the World Health Organization, the United Nations Children's Fund, as well as the Commission on Human Rights and its Submission 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,

Noting with interest the study of the Special Rapporteur on Traditional Practices Affecting the Health of Women and Children, as well as 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 to States parties:

(a) 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 cooperate 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;

- That States parties 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;
- That States parties invite assistance, information and advice from the appropriate (c) organizations of the United Nations system to support and assist efforts being deployed to eliminate harmful traditional practices;
- That States parties include in their reports to the Committee under articles 10 and 12 of (d) the Convention on the Elimination of All Forms of Discrimination against Women information about measures taken to eliminate female circumcision.³³

Appendix III: Role of the State

United Nations

CEDAW/C/GC/31/Rev.1CRC/C/GC/18/Rev.1

Convention on the Elimination of All Forms of Discrimination against Women Convention on the Rights of the Child

Committee on the Elimination of Discrimination against Women

Committee on the Rights of the Child

Joint general recommendation No. 31 of the Committee on the Elimination of Discrimination against Women/general comment No. 18 of the Committee on the Rights of the Child (2019) on harmful practices*

8 May 2019

- 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, indepth key informant interviews with a wide variety of stakeholders, structured observations, social mapping and other appropriate methodologies.

[. . .]

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. . .

[. . .]

60. The Committees recommend that the States parties to the Conventions ensure that any efforts undertaken to tackle harmful practices and to challenge and change underlying social norms are holistic, community-based and founded on a rights-based approach that includes the active participation of all relevant stakeholders, especially women and girls.

 $[\ldots]$

- 69. The Committees recommend that the States parties to the Conventions:
- (a) Provide universal, free and compulsory primary education that is girlfriendly, 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 nondiscrimination;
- (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.

[...]

- 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.

[...]

- 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.

[. . .]

- 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 agesensitive manner in conformity with the Conventions;
- (d) Ensure that children participating in legal processes have access to appropriate childsensitive 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.³⁴

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- 3 Global Platform for Action to End FGM/C (2022) 2022 Progress Report on FGM/C, p.60. Available at https://www.endfgm.eu/content/documents/reports/2022-Progress-Report-on-FGMC.pdf.

The full results of the pilot study conducted by End FGC Singapore are yet to be published. For interim results, see https://www.instagram.com/p/CP0OSZzBQE3/.

Prevalence estimates are based on participants' responses to three surveys:

75% in Mariya Taher (2019) Understanding Female Genital Cutting in the Dawoodi Bohra Community: An Exploratory Survey, p.4. Sahiyo, India. Available at https://sahiyo.org/images/resource-pdf/sahiyo_report_final-5.21.19.pdf.

80% in Lakshmi Anantnarayan, Shabana Diler and Natasha Menon (2018) The Clitoral Hood: A Contested Site: Khafd or Female Genital Mutilation/Cutting (FGM/C) in India, p.22. WeSpeakOut and Nari Samata Manch. Available at

https://wespeakout.org/images/files/pdf/fgmc study results jan 2018.pdf.

85% in Reetika R. Subramanian (2020–2021) Talking about Female Cutting (FGC). India: Mumkin. Available at https://www.mumkinapp.com/research.

- Gabriele Marranci (2014) 'Female circumcision in multicultural Singapore: The hidden cut', The Australian Journal of Anthropology, 26(2), pp.276–292. Available at https://doi.org/10.1111/taja.12070.
- 6 End FGC Singapore (2021) Pilot Study: Part 1, 7 July. Slide 4. [Instagram]. Available at https://www.instagram.com/p/CP0OSZzBQE3.
- 7 Mariya Tayer (2019) op. cit., p.39.
- Singapore Penal Code 1871 (1871; revised 2020), pp.168–169. Available at https://sso.agc.gov.sg/Act/PC1871?WholeDoc=1.
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- 10 Women's Charter 1961 (1961; revised 2020), pp.44–45. Available at https://sso.agc.gov.sg/Act/WC1961.
- 11 *Ibid.*, p.15.
- 12 Administration of Muslim Law Act 1966 (1966; revised 2020). Available at https://sso.agc.gov.sg/Act/AMLA1966.
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- 19 United Nations Human Rights Office of the High Commissioner (undated) *United Nations Study on Violence against Children: Response to questionnaire received from the Government of the Republic of SINGAPORE*, p.6. Available at www.ohchr.org/sites/default/files/Documents/HRBodies/CRC/StudyViolenceChildren/Responses/Singapore.pdf.
- 20 Committee on the Elimination of Discrimination against Women and Committee on the Rights of the Child (2019) *Joint general recommendation No. 31 of the Committee on the Elimination of Discrimination against Women/general comment No. 18 of the Committee on the Rights of the Child (2019) on harmful practices*, 8 May. CEDAW/C/GC/31/Rev.1CRC/C/GC/18/Rev.1. Available at https://documents.un.org/doc/undoc/gen/g19/134/42/pdf/g1913442.pdf.
- 21 Singapore Penal Code 1871 (1871; revised 2020), op. cit., p.170.
- 22 Ibid., p.171.
- 23 Ibid., pp.77 & 84.
- 24 Ibid., p.118.
- 25 Ibid, p.119.
- 26 Children and Young Persons Act 1993 (1993; revised 2020), op. cit., p.19.

Section 6(6) also states that, in a case where death is caused to the child or young person, the perpetrator will be fined up to \$40,000 and/or imprisoned for up to 14 years. FGC Types 1 and 4 are unlikely to lead to death, however.

- 27 *Ibid*.
- 28 Ibid., pp.19-20.
- 29 CEDAW (2021) Sixth periodic report submitted by Singapore under article 18 of the Convention, due in 2021, 29 December. Available at https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CEDAW%2FC%2FSGP%2F6&Lang=en.
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These organisations also submitted further letter to the 88th CEDAW session in May 2024, which is available here: https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2FCEDAW%2FCSS%2FSGP%2F50262&Lang=e.

31 CEDAW (2024) Replies of Singapore to the list of issues and questions in relation to its sixth periodic report, 15 February, p7. Available at https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CEDAW%2FC%2FSGP%2FRQ%2F6&Lang=en.

There is a recording of the Government's response to the CEDAW's questions about FGC on End FGC Singapore's site at https://www.instagram.com/p/C9uXyOUyy6G/?hl=en.

- 32 Yvette Tan (2016), op. cit.
- 33 Available at https://www.refworld.org/legal/general/cedaw/1990/en/27729.
- 34 Committee on the Elimination of Discrimination against Women and Committee on the Rights of the Child (2019), *op. cit.*

All cited texts in this Law Report were accessed between 1 July 2024 and 31 October 2024, unless otherwise noted.

This report analyses and discusses the application of national (criminal) laws to the commission of FGC and any possible related crimes. It also explores other legal factors deemed relevant, such as legal obligations to report the commission or likely upcoming commission of FGC, available legal protective measures for girls and women at risk of FGC, and any obligations of national governments in relation to FGC.

The initial research conducted for this report consisted of a questionnaire prepared by Allen Overy Shearman Sterling (A&O Shearman*) with input from certain local law firms, local non-governmental organisations and/or other information providers (together, *the Information Providers*). The information contained in the responses to that questionnaire was then reviewed by Orchid Project updated and used as the basis of further research from relevant sources.

The underlying information for this report was gathered by the Information Providers through desk-based research and is provided for general information purposes only. Nothing contained in this report is intended to provide legal or other professional advice, and specific legal advice should be obtained in relation to any specific situation.

It should be noted that in many countries there is a lack of legal precedent for the penalties laid out in the law, meaning that, in practice, lesser penalties may be applied. The information contained in the report is provided as at the date of this report or as otherwise noted in the report. Neither the Information Providers nor Orchid Project are under any obligation to update this report subsequent to its date.

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