# SOMALIA





### STATISTICAL COUNTRY PROFILE ON FEMALE GENITAL MUTILATION/CUTTING

Female genital mutilation/cutting (FGM/C) refers to "all procedures involving partial or total removal of the female external genitalia or other injury to the female genital organs for non-medical reasons." At least 125 million girls and women alive today have been cut in the 29 countries in Africa and the Middle East where FGM/C is concentrated. As many as 30 million girls are at risk of being cut before their 15th birthday if current trends continue. FGM/C is a violation of girls' and women's human rights and is condemned by many international treaties and conventions, as well as by national legislation in many countries. Yet, where it is practiced FGM/C is performed in line with tradition and social norms to ensure that girls are socially accepted and marriageable, and to uphold their status and honour and that of the entire family. UNICEF works with government and civil society partners towards the elimination of FGM/C in countries where it is still practised.

1. World Health Organization, Eliminating Female Genital Mutilation: An interagency statement, WHO, UNFPA, UNICEF, UNIFEM, OHCHR, UNHCR, UNECA, UNESCO, UNDP, UNAIDS, WHO, Geneva, 2008, p. 4

No national decree/legislation banning FGM/C

#### **KEY STATISTICS ON WOMEN'S STATUS**

of women 20-24 years old married or in union before age 15

of women 20-24 years old married or in union before age 18

of women 15-24 years old that are able to read a short simple statement about everyday life

of ever-married women 15-49 years old think that a husband/partner is justified in hitting/beating his wife under certain circumstances

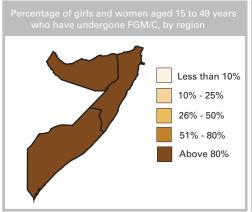
of women 15-49 years old in union currently using any contraceptive method

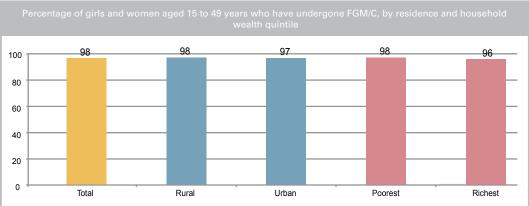
Source: MICS 2006

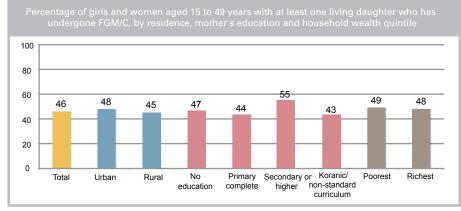


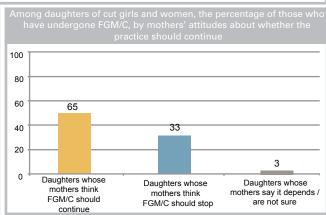
#### **HOW WIDESPREAD IS THE PRACTICE?**

#### FGM/C is nearly universal among girls and women in Somalia



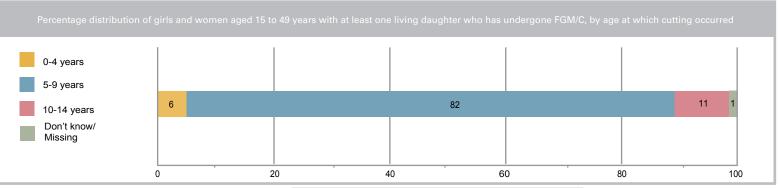


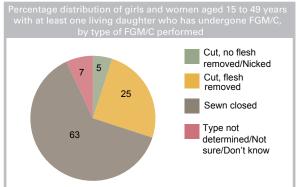




### WHEN AND HOW IS FGM/C PERFORMED?

The vast majority of girls experience the practice between the ages of 5 and 9, and more than half undergo the most severe form of FGM/C



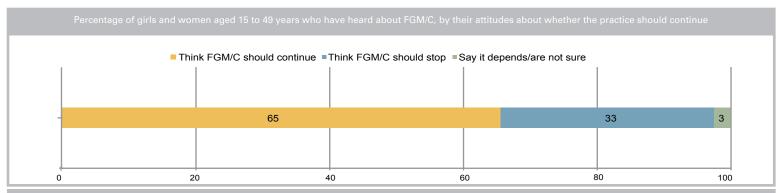


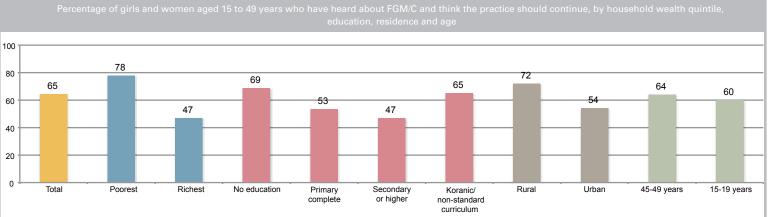
Notes: The boundaries and the names shown and the designations used on the map do not imply official endorsement or acceptance by the United Nations. Only categories with 25 or more unweighted cases are presented. Due to rounding, some of the data presented may not add up to 100 per cent. There is no ethnicity or religion data for Somalia.

Source for all charts on this page: MICS 2006

#### WHAT ARE THE PREVAILING ATTITUDES TOWARDS FGM/C?

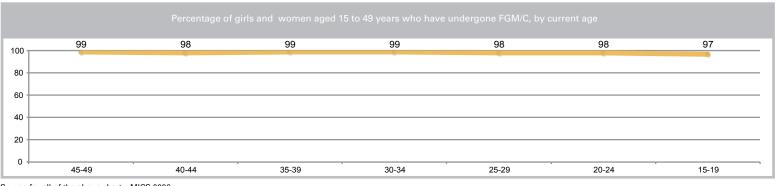
#### Almost two thirds of girls and women think the practice should continue



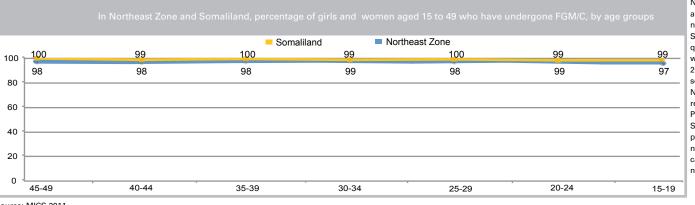


#### IS THE PRACTICE OF FGM/C CHANGING?

#### There has been no change in the prevalence of FGM/C over time







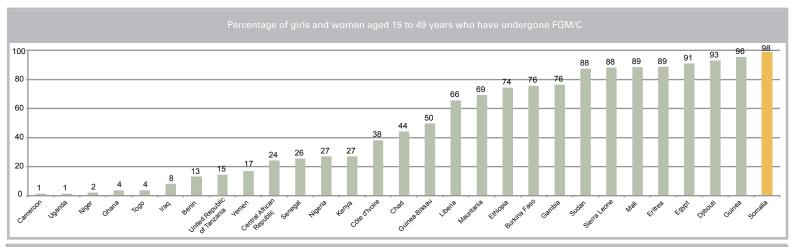
Notes: N/A = not available. There are no ethnicity data for Somalia. In Somalia, auestions on FGM/C were included in the 2011 MICS conducted separately in the Northeast Zone (also referred to as Puntland) and Somaliland. Data are preliminary and do not allow for the calculation of national figures.

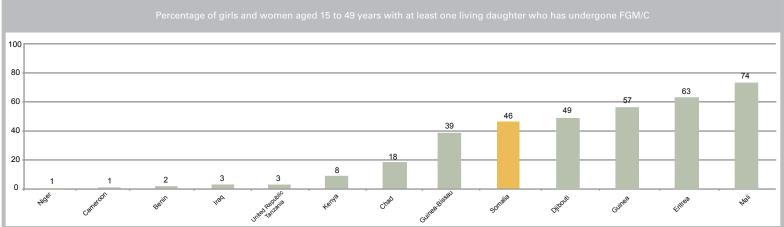
Source: MICS 2011

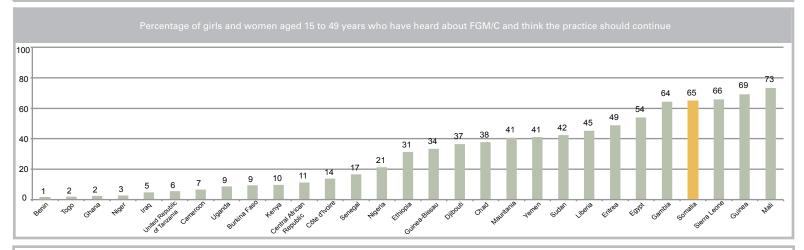
## **SOMALIA**

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#### INTER-COUNTRY STATISTICAL OVERVIEW







Notes: Data on attitudes for Yemen refer to ever-married girls and women. In Liberia, girls and women who have heard of the Sande society were asked whether they were members; this provides indirect information on FGM/C since it is performed during initiation into the society. Data on daughters for Iraq refer to ever-married girls and women with at least one daughter who has undergone FGM/C. Data on attitudes for Ghana are from MICS 2006, for Nigeria from DHS 2008, and for Sierra Leone from DHS 2008 as data from the most recently available MICS surveys are not comparable. In Liberia, only cut girls and women were asked about their attitudes towards FGM/C; since girls and women from practising communities are more likely to support the practice, the level of support in this country as captured by the DHS 2007 is higher than would be anticipated had all girls and women been asked their opinion.

Sources: DHS, MICS, National Social Protection Monitoring Survey and SHHS, 1997-2012

Released December 2013



These country profiles were made possible through core funding to UNICEF and financial assistance of the European Union. The contents of these country profiles are the sole responsibility of UNICEF and can in no way reflect the views of the European Union.

FOR MORE INFORMATION
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