In what can only be called the year of women, 2017 saw an increase in dialogue on women’s rights, including gender violence against women. Cresting that conversation is a landmark FGM trial in Michigan.

The defendants include American-born Dr. Jumana Nagarwala, of the Detroit Bohra Muslim community, who is employed as assistant director of the emergency residency program at the Henry Ford Hospital in Detroit. In early 2017, Dr. Nagarwala was arrested for practicing female genital mutilation on two seven-year-old girls. Newsweek reported in April 2017, the
minors were brought to a clinic by their respective parents after hours:

“In the criminal complaint against Nagarwala, the two girls said they were brought to Detroit for a ‘special girls’ trip’ and were told they had to go to the doctor because ‘our tummies hurt.’ One of the children is quoted in the complaint as saying that Nagarwala ‘pinched’ her on the ‘place [where] she goes pee’ and that she was told not to say anything about the procedure. A doctor who later examined the girl said that her genitals ‘are not normal in appearance,’ and that parts of them had been altered or removed, according to the complaint.”

Charges have also been brought against a second doctor and his wife. Dr. Fakhruddin Attar gave Nagarwala access to his clinic for the after-hours surgeries on the girls. Prosecutors also filed charges of conspiracy and genital mutilation against the two mothers in this case. In September 2017, Dr. Nagarwala was released on a bail of $4.5 million, and continues to enjoy administrative leave.

Spokesman David Olejarz, of Henry Ford Hospital, confirms Nagarwala works for the hospital system and is currently on leave, telling the Detroit News “the alleged criminal activity did not occur at any Henry Ford facility.” While Olejarz adds that they would never support or condone anything related to this practice, Henry Ford has also not dismissed the doctor for failure to comply with medical ethics and a duty to care.

The case is being tried under a federal statute against FGM. The Michigan trial will be the first U.S.-based FGM prosecution under the 21 year old law, and likely the first of many as at least 100 girls are suspected of being cut in Michigan alone. Federal authorities have responded to the trial expanding their search for cutters from Michigan to California, New York, and Minnesota, as well as launching Operation Limelight which targets at-risk girls who might be trafficked out of the country for the cutting. Yet, 24 states
still need to pass legislation to allow local law enforcement and courts to protect minor girls against FGM in the same state in which they live.

Women’s Rights Start with Protecting the Girl-Child

The trial raises a critical question on the rights of emerging women as they develop independence and autonomy. In the era of #MeToo, it also opens a timely national question on the role of consent in sexuality, and the community’s role in overseeing this developmental process. We must be silence breakers for the girl-child who hasn’t yet learned to wield her voice, who doesn’t yet know of the power of her primal voice.

For communities perpetuating FGM, there must be strict limitations placed by U.S. law to prevent this type of violence against women and its objective to suppress and control. Child FGM survivors grow into women whose lives are often further directed by others. Forced marriages, domestic
violence, and honor-based violence within family life are ancillary issues that some survivors further endure.

The need to view FGM as an act of sexual violence is largely absent from the debate over FGM. That gap in the conversation between FGM perception and FGM reality is detrimental to the fight against the practice. On January 15, 2018, U.S. District Judge Bernard Friedman dismissed the charge of a sex crime against defendants in the Detroit FGM trial. The report is a devastating blow for human rights advocates and a win for FGM supporters. A sex crime dismissal was found on the basis that such a charge requires “intent that the minor engage in sexual activity.” While FGM itself does not constitute a sexual activity, the practice is performed specifically toward the aim of controlling future activity by cutting off the sex organ rooted in female desire.

As much as we wrestle with dialogue on the needs of communities and the challenges of merging value systems, we cannot skirt around the fact that female genital mutilation is a form of sexual violence and gender violence against women and girls. It is a heinous act that emotionally and physically scars an individual for life. The brutal cutting of the clitoris and even more extreme attempts to reshape the female genitalia to “ensure” purity is a ruthless annexation of sexuality that is used to maintain control of individuals, the community, and cultural standards.

The Other Silence Breakers: FGM Survivors, Women’s Rights Advocates, and Lawmakers

As the Michigan trial is set for June 2018, the most responsible way forward is to look at these issues holistically. This includes raising public awareness with consideration and respect for both the individual and the communities affected by FGM. The trial also raises several
questions for the public to discuss. These include the issues of: assimilation of second generation immigrants, the duty to challenge cultural practices, the spread of FGM beyond faith communities, and the need to educate communities that practice FGM.

We can create laws making FGM illegal. In that effort, lawmakers need our support, including helping them arrive at decisions that are in the interest of American citizens, consider the needs of survivors, and are sensitive to community dynamics. On January 17, the New Hampshire legislature discussed a proposed bill to make female genital mutilation illegal in their state. American Matters, a non-profit, non-partisan organization championing anti-FGM advocacy, had the honor of offering testimony presented by CEO and veteran Samantha Nerove. The American Matters team also spoke with representatives about the physical and mental health impacts this practice has on women and girls.

The America Matters #StopFGM campaign has brought forward a powerful global coalition of survivors, activists, doctors, lawyers, and scholars to work together to end the practice of FGM under any pretext. The easiest way to support this work is by signing the petition to #StopFGM in order to have your voice heard by lawmakers.

Engagement between affected and at-risk communities is also necessary to help change views and opinions of individuals that make up FGM-practicing communities. The voices of victims and survivors is of the foremost importance, along with the voices of professionals that cater to FGM-affected communities.

Lastly, education is key. This includes embracing nuanced language that favors empathy over demonization, and listening to and empowering the community with knowledge rather than simply throwing down the gavel. If we alienate these populations, we will never be able to affect change no matter
how many activists speak out against this form of sexual violence. If we don’t engage, change will not happen. We will further alienate individuals and isolate the women and girls who need access to resources.

Moving forward means working together. The strongest communities are those who have the strongest individuals and the first step to building such communities is granting women and girls basic dignity and respect over their bodies without the threat and repercussions of sexual violence.

If you’re a survivor or a loved one of a survivor who would like to have your voice heard – even if anonymously – please contact Shireen Qudosi at shireen@americamatters.com.