

**Equality Impact Assessment Record**

**Female Genital Mutilation  
(Protection and Guidance)  
(Scotland) Bill**

**June 2019**



**Scottish Government**  
Riaghaltas na h-Alba  
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## EQUALITY IMPACT ASSESSMENT RECORD

<b>Title of policy/ practice/strategy/ legislation etc.</b>	<b>Female Genital Mutilation (Protection and Guidance) (Scotland) Bill</b>	
<b>Minister</b>	<b>Minister for Older People and Equalities</b>	
<b>Lead Official</b>	<b>Trevor Owen</b>	
<b>Officials involved in the EQIA</b>	<b>Name</b>	<b>Team</b>
	<b>Nadia Abu-Hussain Ian Turner</b>	<b>Violence Against Women and Girls Team</b>
<b>Directorate: Division: Team</b>	<b>Local Government and Communities: Equalities, Human Rights and the Third Sector: Violence Against Women and Girls</b>	
<b>Is this new policy or revision to an existing policy?</b>	<b>Existing policy delivery</b>	

### Screening

#### *Policy Aim*

The aim of the Female Genital Mutilation (Protection and Guidance) (Scotland) Bill is to strengthen the existing legislative framework to offer extra protection to women and girls at risk of FGM. This Bill will seek to instate provisions to introduce statutory guidance for professionals, and to create FGM Protection Orders.

## **The National Outcomes this contributes to are:**

- ◆ *We grow up loved, safe and respected so that people realise their full potential*
- ◆ *We live in communities that are inclusive, empowered, resilient and safe*
- ◆ *We are healthy and active*
- ◆ *We respect, protect and fulfil human rights and live free from discrimination*

## ***Who will it affect?***

The provisions set out in the new legislation will directly impact members of potentially affected communities, primarily young girls, and also frontline practitioners who may have to respond to individuals affected or who are potentially at risk of the practice.

## ***What might prevent the desired outcomes being achieved?***

The hidden nature of this practice could have an effect on achieving outcomes.

## Stage 1: Framing

### Results of framing exercise

As part of the Scottish Government's approach to tackling FGM, the Programme for Government 2018-19 contained a commitment to introduce a Bill strengthening the existing legislative framework for the protection of women and girls from FGM. Programme for Government indicated that the Bill will seek to introduce protection orders for women and girls at risk, and place guidance for professionals on a statutory footing.

In 2014, the Scottish Government commissioned a report from the Scottish Refugee Council entitled '*Tackling FGM in Scotland: A Scottish Model of Intervention.*' Upon reading this report, it is clear that more consideration is needed on the ways in which FGM affects each protected characteristic. Subsequently, it is important to then consider how new policy and legislation in this area may impact different protected characteristics.

In relation to potential impacts on protected characteristics, there is clear evidence in most cases why this needs to be considered in this assessment.

- **Age** – FGM is predominantly carried out on young girls
- **Race** – Although FGM is not exclusive to any particular race, in 2013 UNICEF published a list of 29 countries that practice FGM. These are predominantly in Africa and the Middle East. There is concern that any work on new legal provisions on FGM could potentially increase stigmatisation of certain ethnic minorities.
- **Religion and belief** – The practice of FGM is founded on cultural beliefs, not religious beliefs. Nevertheless members of potentially affected communities may believe that it is a religious requirement.
- **Sex** – FGM is practiced on women and girls.
- **Pregnancy and Maternity** – FGM has the potential to create serious complications during pregnancy and childbirth. Furthermore there needs to be consideration of the protection of baby girls from the practice.
- **Disability** – There is no direct correlation between disability and FGM, but disabled women and girls are still victims of this practice.
- **Gender reassignment** – There is no direct correlation between gender reassignment and FGM.
- **Sexual orientation** – Although there is a lack of evidence in this area, it is worth noting FGM as it relates to sexual orientation. Those who practice FGM justify it with references to various socio-cultural factors. Other common justifications for FGM are closely linked to fixed gender roles and perceptions of women and girls as gatekeepers of their family's honour. This, in many cases, directly relates to strict expectations regarding women's sexual "purity" and lack of desire. In some societies, the prevailing myth is that girls' sexual desires must be controlled early to prevent "deviant" sexual behaviour. This "deviant" behaviour could also refer to lesbian or bisexual women as the cultures in which FGM is commonly practiced are often homophobic as well. Therefore it could be argued that on some level, and in some cases, FGM can be constituted as a homophobic practice.

In short, although this new legislation seeks to create further protection for women and girls who may be at risk of FGM, it also has some potential to intersect with most protected characteristics.

We have a reasonable amount of information related to all protected characteristics as they relate to FGM, although some areas are more limited than others. For example, there is less data available on pregnancy and maternity and FGM.

### ***Extent/Level of EQIA required***

As a result of the framing exercise, a full EQIA was carried out.

## Stage 2: Data and evidence gathering, involvement and consultation

Characteristic <sup>1</sup>	Evidence gathered and strength/quality of evidence	Source	Data gaps identified and action taken
<b>AGE</b>	<p>23,979 men, women and children born in one of the 29 countries identified by UNICEF (2013) as an 'FGM-practicing country' were living in Scotland in 2011. This figure is based on self-reported country of birth and does not include children born in Scotland of parents born in an FGM-practicing country.</p> <p>In 2012, 733 children were born in Scotland to mothers from an FGM-practicing country, of which, 363 were girls. Taking this into account, we can approximate that there are a minimum of 700 children born into communities</p>	<p>Scottish Refugee Council Report: Tackling Female Genital Mutilation in Scotland; A Scottish Model of Intervention pg. 11<sup>2</sup></p> <p>Scottish Refugee Council Report: Tackling Female Genital Mutilation in Scotland; A Scottish Model of Intervention pg. 14<sup>3</sup></p>	<p>Data availability about age is strong.</p> <p>However, there is no data available on the prevalence of FGM in Scotland.</p>

<sup>1</sup> Refer to Definitions of Protected Characteristics document for information on the characteristics

<sup>2</sup> [http://www.scottishrefugeecouncil.org.uk/assets/0000/9061/FGM\\_Report\\_FINAL\\_A4portrait.pdf](http://www.scottishrefugeecouncil.org.uk/assets/0000/9061/FGM_Report_FINAL_A4portrait.pdf)

<sup>3</sup> [http://www.scottishrefugeecouncil.org.uk/assets/0000/9061/FGM\\_Report\\_FINAL\\_A4portrait.pdf](http://www.scottishrefugeecouncil.org.uk/assets/0000/9061/FGM_Report_FINAL_A4portrait.pdf)

	<p>potentially affected by FGM living in Scotland per year.</p> <p>In 2011, there were 508,892 females under 18 living in Scotland. Of this, 417,238 were aged 0-14. According to data from the World Health Organisation, the majority of girls are cut before they turn 15 years old. However, of these figures, we do not know how many of these girls are living in potentially affected communities in Scotland.</p>	<p>Scotland's Census 2011 – National Records of Scotland Table – Age by Sex<sup>4</sup></p> <p>World Health Organisation, Sexual and Reproductive Health – Female Genital Mutilation (FGM)<sup>5</sup></p>	
<b>DISABILITY</b>	<p>In 2011, the proportion of people living in Scotland with a long-term, activity-limiting health problem or disability was approximately 20% (1,040,371 people). Proportions were similar in 2001 (1,027,872).</p> <p>In 2017, the long-term condition prevalence was 45% among all</p>	<p>Scotland's Census 2011 – National Records of Scotland Table – Long-term health problem or disability by sex by age<sup>6</sup></p> <p>The Scottish Health Survey, 2017 edition pg. 22<sup>7</sup></p>	<p>Data availability about disability is strong.</p> <p>However, there is no data available on the prevalence of</p>

<sup>4</sup> <https://www.scotlandscensus.gov.uk/>

<sup>5</sup> <https://www.who.int/reproductivehealth/topics/fgm/prevalence/en/>

<sup>6</sup> <https://www.scotlandscensus.gov.uk/>

<sup>7</sup> <https://www.gov.scot/publications/scottish-health-survey-2017-volume-1-main-report/>

	<p>adults aged 16 and over, and 17% among children aged 0-15. Around a third (32%) of adults reported living with limiting long-term conditions, whereas 13% reported living with non-limiting long-term conditions. The proportions of children that reported living with limiting and non-limiting conditions were 10% and 7% respectively.</p> <p>However, there is no evidence to suggest that there is a direct correlation between FGM and disability. Nevertheless, there are usually conditions and health implications created as a result of undergoing FGM.</p> <p>It should be recognised that in FGM practicing communities, women and girls would be at the same risk of the practice as non-disabled women and girls.</p>		<p>FGM in Scotland.</p>
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<p><b>SEX</b></p>	<p>In 2011, approximately 52% of Scotland’s population was female (2,727,959). This proportion is consistent with previous census data.</p> <p>By its very nature, FGM is an extreme form of gender-based violence that affects women and girls because they are female. This new Bill seeks to strengthen the existing legislative framework and create new provisions to reinforce protection of women and girls who are potentially affected by FGM.</p> <p>Nevertheless, the Scottish Government recognises that to address FGM effectively, there is a need to engage with women and men to ensure that the cultural roots of FGM are being challenged. In recognition of this, the Scottish Government are funding projects such as “Change</p>	<p>Scotland’s Census 2011 – National Records of Scotland Table – Sex<sup>8</sup></p>	<p>Data availability about sex is strong.</p> <p>However, there is no data available on the prevalence of FGM in Scotland.</p>
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<sup>8</sup> <https://www.scotlandscensus.gov.uk/>

	<p>Makers: Combatting Female Genital Mutilation Working With Men,” which is a programme ran by the organisation Community Info Source. This project seeks to work with men in potentially affected communities to educate and raise awareness of the consequences and health implications of FGM.</p> <p>We are aware of certain criticisms from the trans community that the term ‘Female Genital Mutilation’ is discriminatory or oppressive because they feel that it denies their identity and excludes them from being female. However, FGM is performed on girls because they are identified as girls. This then leads to them being treated as comparably inferior to males. Even if these girls later identify as transgender men, it will have no influence on their retrospective suppression from patriarchal forces that require females to be</p>		
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	<p>cut in order to be valued as “pure” within society. Ultimately, they are subjected to the oppression of FGM because they are identified as girls.</p>		
<p><b>PREGNANCY AND MATERNITY</b></p>	<p>There were 363 girls born in Scotland to mothers who were born in FGM practicing countries in 2012. This represents a fivefold increase over the last 10 years.</p> <p>There is limited data available on pregnancy and FGM. The National Action Plan contains objectives related to the capturing of statistics about FGM in Scotland, and the Implementation Group are considering the best ways to approach this.</p> <p>Currently, healthcare professionals have been asked to record the diagnosis and types of FGM, along with any corrective procedures, in the appropriate</p>	<p>Scottish Refugee Council Report: Tackling Female Genital Mutilation in Scotland; A Scottish Model of Intervention pg. 3<sup>9</sup></p>	<p>Data availability around pregnancy and maternity is limited.</p> <p>There is no data available on the prevalence of FGM in Scotland.</p>

<sup>9</sup> [http://www.scottishrefugeecouncil.org.uk/assets/0000/9061/FGM\\_Report\\_FINAL\\_A4portrait.pdf](http://www.scottishrefugeecouncil.org.uk/assets/0000/9061/FGM_Report_FINAL_A4portrait.pdf)

	<p>clinical records. The condition is then able to coded, and relevant codes for hospitals and primary care have been provided to encourage national consistency. This should assist in collecting baseline information regarding some of the aspects of FGM, starting with healthcare services.</p>		
<p><b>GENDER REASSIGNMENT</b></p>	<p>The Registrar General for Scotland maintains a Gender Recognition Register in which the birth of a transsexual person whose acquired gender has been legally recognised is registered showing any new name(s) and the acquired gender. This enables the transsexual person to apply to the Registrar General for Scotland for a new birth certificate showing the new name(s) and acquired gender. The Gender Recognition Register is not open to public scrutiny.</p>		<p>Data availability on gender reassignment is limited.</p> <p>No additional action is considered necessary to obtain direct evidence as it does not directly or indirectly impact upon the policy.</p>

	In 2016, there were 20 entries in the Gender Recognition Register, a decrease of 5 since 2015.	Scottish Government Equality Evidence Finder – Summary: Transgender Demographics <sup>10</sup>	
<b>SEXUAL ORIENTATION</b>	<p>According to the Scottish Government’s Equality Evidence Finder, around 2% of adults in Scotland self-identified as lesbian, gay, bisexual or other. 95% of adults self-identified as straight or heterosexual.</p> <p>Statistics published in the Integrated Household Survey 2014 showed that, UK-wide, 1.6% of adults identified as either gay, lesbian or bisexual. The survey also found that the likelihood of an adult identifying as lesbian, gay or bisexual decreased with age. Around 2.6% of adults aged 16 to 24 identified themselves as lesbian, gay or bisexual. This</p>	<p>Scottish Government Equality Evidence Finder – Population Estimates, Sexual Orientation<sup>11</sup></p> <p>Integrated Household Survey (Experimental Statistics): January to December 2014<sup>12</sup></p>	<p>There is no data or published research relating FGM to Sexual Orientation.</p> <p>No additional action is considered necessary to obtain direct evidence as it will not create an impact, direct or indirect, on the policy as it stands.</p>

<sup>10</sup> <https://www2.gov.scot/Topics/People/Equality/Equalities/DataGrid/Transgender/TransgPopMig>

<sup>11</sup> <https://scotland.shinyapps.io/sg-equality-evidence-finder/#>

<sup>12</sup> <https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/bulletins/integratedhouseholdsurvey/2015-10-01>

	<p>decreased to 0.6% of adults aged 65 and over.</p> <p>Those who practice FGM justify it with references to various socio-cultural factors. Other common justifications for FGM are closely related to fixed gender roles and perceptions of women and girls as gatekeepers of their family's honour. This, in many cases, is closely linked to strict expectations regarding women's sexual "purity" and lack of desire. In some societies, the prevailing myth is that girls' sexual desires must be controlled early to prevent "deviant" sexual behaviour. This "deviant" behaviour could also refer to lesbian or bisexual women as the cultures in which FGM is commonly practiced are often homophobic as well. Therefore it could be argued that on some level, and in some cases, FGM can be constituted as a homophobic practice.</p>		
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<p><b>RACE</b></p>	<p>Although there does seem to be a larger proportion of known cases coming from predominately West African countries, FGM is not exclusive to any one particular race.</p> <p>UNICEF identified 29 FGM practicing countries in 2013, all of which are either located in Africa, or the Middle East.</p> <p>According to the 2011 Census, the size of the visible ethnic minority population in Scotland was just above 200,000, which is approximately 4% of the total population (based on the 2011 ethnicity classification). This has doubled since 2001. However, there is little evidence on how many people from FGM practicing countries are currently living in Scotland.</p>	<p>UNICEF FGM Practicing Countries (2013)<sup>13</sup></p> <p>Scotland's Census 2011 – National Records of Scotland Table – Ethnic Group<sup>14</sup></p>	<p>Data availability about race is strong.</p> <p>However, there is no data available on the prevalence of FGM in Scotland.</p>
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<sup>13</sup> [https://www.unicef.org/protection/files/00-FMGC\\_infographiclow-res.pdf](https://www.unicef.org/protection/files/00-FMGC_infographiclow-res.pdf)

<sup>14</sup> <https://www.scotlandscensus.gov.uk/>

<p><b>RELIGION OR BELIEF</b></p>	<p>In 2011, approximately 3.5 million people identified with a religion (67% of the population).</p> <p>Some people practice FGM as part of their religion, and this can create a great deal of pressure for girls to have it done. However, FGM is not recommended by any religion, nor is it in any religious texts. It is not religious, but might have become symbolic in some communities as a demonstration of faith.</p> <p>Representatives from organisations including the International Relief Foundation, FORWARD, and the Muslim Women’s Network UK met government ministers during a summit at the Home Office in London on 19 June 2014. By signing a joint declaration against the practice of FGM, they hope to</p>	<p>Scotland’s Census 2011 – National Records of Scotland Table – Religion<sup>15</sup></p> <p>Gov.uk news – Faith and Community Leaders Unite to Condemn FGM – published 20 June 2014<sup>16</sup></p>	<p>Data availability about religion is strong</p> <p>There is no data available on the prevalence of FGM in Scotland.</p>
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<sup>15</sup> <https://www.scotlandscensus.gov.uk/>

<sup>16</sup> <https://www.gov.uk/government/news/faith-and-community-leaders-unite-to-condemn-fgm>

	<p>send a clear message to communities across the UK that the practice is an extreme form of violence against women and girls and is not supported by any religious doctrine.</p> <p>After Christianity, Islam was the most common faith in Scotland with the communities having 1.7 million, and 77,000 members respectively.</p> <p>The Scottish Government recognises a need to engage with religious leaders in the work to eradicate FGM from Scottish communities and are working with community-based organisations as part of the National Action Plan to take this forward.</p>	<p>Scotland's Census 2011 – National Records of Scotland Table – Religion<sup>17</sup></p> <p>Scotland's National Action Plan to Prevent and Eradicate FGM<sup>18</sup></p>	
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<sup>17</sup> <https://www.scotlandscensus.gov.uk/>

<sup>18</sup> <https://www.gov.scot/publications/scotlands-national-action-plan-prevent-eradicate-fgm/>

### Stage 3: Assessing the impacts and identifying opportunities to promote equality

Do you think that the policy impacts people because of their age?

Age	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation	X			<p>This legislation will offer further protection to women and girls from FGM, which is usually carried out on young girls.</p> <p>FGM Protection Orders will be available to help protect those at risk of FGM.</p>
Advancing equality of opportunity	X			<p>This Bill aims to strengthen the existing legislative framework for protecting women and girls from FGM, with a long-term goal of advancing equality and opportunity for those at risk of the practice. The legislation aims to do this by: creating statutory guidance on FGM; and creating a legal framework for the introduction of FGM protection orders.</p>
Promoting good relations among and between different age groups	X			<p>FGM is primarily carried out on young girls by older members of their family or community. By working to prevent the practice, this policy will create more opportunities for positive relationships to flourish between the older and younger</p>

				people from potentially affected communities.
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**Do you think that the policy impacts disabled people?**

<b>Disability</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Eliminating unlawful discrimination, harassment and victimisation			X	This legislation is primarily to offer further protection to women and girls from FGM, a practice which is not predicated on ability or disability.  FGM Protection Orders will be available to help protect those at risk of FGM.
Advancing equality of opportunity	X			By strengthening the legislative framework around protecting people from FGM, this Bill will give young girls in particular more opportunity to live full, pain free lives, and realise their potential.
Promoting good relations among and between disabled and non-disabled people			X	FGM as a practice is not predicated by ability or disability. Therefore, this Bill will have no impact on promoting good relations between disabled and non-disabled people.

**Do you think that the policy impacts on men and women in different ways?**

Sex	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation	X			<p>This Bill seeks to strengthen the legislative framework for protecting women and girls from FGM – this is a harmful practice that is predicated on gender and is an extreme violation of the human rights of women and girls. FGM reflects deep-rooted inequality between the sexes.</p> <p>FGM Protection Orders will be available to help protect those at risk of FGM and the introduction of statutory guidance will ensure that institutions across Scotland will be better prepared to identify someone potentially at risk of FGM, and have a better understanding on how to support women and girls who have been victims of the practice. Therefore, the implementation of this legislation will contribute to eliminating unlawful discrimination against women.</p>
Advancing equality of opportunity	X			<p>As stated previously, FGM constitutes a severe form of discrimination against women and girls, and reflects deep-rooted gender inequality. FGM also has no known</p>

				<p>health benefits and is an extremely harmful practice that always carried devastating short and long-term health consequences for women and girls.</p> <p>Immediate physical health consequences include: severe pain, emotional and physical shock (exacerbated by being subjected to the trauma by loving parents, carers, extended family and friends), haemorrhage, wound infections (including tetanus and blood-borne viruses like HIV and Hepatitis B and C), urinary retention, injury to adjacent tissues, fracture or dislocation as a result of restraint, damage to other organs, and death.</p> <p>In the long term, victims may experience recurrent sexual, psychological and physiological problems. They are also very likely to require specialist surgical interventions during pregnancy and childbirth.</p> <p>Long-term physical health consequences include: chronic vaginal and pelvic infections, difficulties during menstruation,</p>
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				<p>difficulties in passing urine and chronic urine infections, renal impairment and possible renal failure, damage to reproductive system (including infertility), infibulation cysts, neuromas, keloid scar formation, complications in pregnancy and delay in second stage of childbirth, maternal or foetal death, increased risk of sexually transmitted infections.</p> <p>FGM can also be extremely traumatic, with lifetime impact. There is increasing awareness of the severe psychological consequences of FGM, which can become evident in mental health problems and drug and alcohol dependency. Young women receiving psychological counselling have reported feelings of betrayal by parents, incompleteness, regret and anger.</p> <p>Research into communities affected by FGM in Africa found that women who have undergone FGM have the same levels of post-traumatic stress disorder (PTSD) as adults who have been subjected to early childhood abuse, and that the majority of</p>
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			<p>women (80%) suffer from affective (mood) or anxiety disorders.</p> <p>Additionally, it is important to note here that FGM reinforces gender stereotypes and patriarchal values. Those who practice FGM justify it with references to various socio-cultural factors. Other common justifications for FGM are closely linked to fixed gender roles and perceptions of women and girls as gatekeepers of their family's honour. This, in many cases, directly relates to strict expectations regarding women's sexual "purity" and lack of desire. In some societies, the prevailing myth is that girls' sexual desires must be controlled early to prevent "deviant" sexual behaviour.</p> <p>As a result of all that is stated above, it is clear that FGM creates vast inequalities between the sexes, for instance, the health inequalities that occur as a result of FGM are severe. Therefore, by strengthening the legislative framework on FGM, and as a result, protecting more women and girls from falling victim to the practice, this will</p>
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				ultimately have a positive effect on advancing equality of opportunity between the sexes.
Promoting good relations between men and women	X			FGM reflects deep-rooted inequalities between the sexes, and constitutes an extreme form of discrimination against women and girls. By implementing new legislation to increase protective measures against this practice, it is hoped that this will contribute to changing men's attitude towards FGM and women more generally. This will ultimately empower women and lead to better relations between men and women.

**Do you think that the policy impacts on women because of pregnancy and maternity?**

<b>Pregnancy and Maternity</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Eliminating unlawful discrimination, harassment and victimisation	X			<p>FGM has many long-term health implications, including increasing the likelihood of severe complications during pregnancy and child birth.</p> <p>FGM Protection Orders will be available to help protect those at risk of FGM. Further, the statutory guidance, institutions will be</p>

				<p>better prepared to support women who have been victims of the practice. Furthermore, new legislation will allow for extra protections to be put in place for new born girls who may be at risk of the practice. Therefore, this policy directly contributes to the elimination of unlawful discrimination.</p>
Advancing equality of opportunity	X			<p>The implementation of this new legislation, particularly through the statutory guidance, will allow institutions across Scotland to have a better understanding on how to support women who have been victims of FGM. Furthermore, with the introduction of FGM protection orders, new born girls who may be at risk can be protected as well. Therefore these new provisions will advance equality of opportunity by making sure pregnant women have access to all available services, and that protection for their child is maintained through relevant pathways.</p>
Promoting good relations	X			<p>The implementation of this new legislation, the statutory guidance in particular, will hopefully lead to better relationships between pregnant women and their health care professional. This is because these</p>

				new legal provisions will allow for increased awareness of FGM and the appropriate measures to safeguard families.
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**Do you think your policy impacts on transsexual people?**

<b>Age</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Eliminating unlawful discrimination, harassment and victimisation	X			This new legislation will seek to strengthen the existing legislative framework for protecting women and girls from FGM – this includes any person who may have undergone gender reassignment or who may be in the process of transitioning. There are no negative impacts related to eliminating unlawful discrimination of transgender people. Although there is criticism from the trans community that the term FGM is trans exclusionary, we maintain that even if a person was to later identify as a trans male, it would not stop them being subjugated by patriarchal forces that require females to be cut in order to be valued as “pure” within society. They are subjected to this oppression because they are identified as female at birth.

Advancing equality of opportunity	X			The nature of this new legislation has the potential to advance equality of opportunity and there will be no barriers created for the transgender community. There are no negative impacts related to advancing equality of opportunity for transgender people in Scotland.
Promoting good relations	X			It is hoped that through the implementation of this legislation, in particular the statutory guidance on FGM, relationships between the trans community and the wider community will improve. There are no negative impacts related to promoting good relations with the transgender community in Scotland

**Do you think that the policy impacts on people because of their sexual orientation?**

<b>Sexual Orientation</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Eliminating unlawful discrimination, harassment and victimisation	X			Those who practice FGM justify it with references to various socio-cultural factors. Other common justifications for FGM are closely linked to fixed gender roles and perceptions of women and girls as gatekeepers of their family's honour. This, in many cases, directly related to strict expectations regarding women's sexual

				<p>“purity” and lack of desire. In some societies, the prevailing myth is that girls’ sexual desires must be controlled early to prevent “deviant” sexual behaviour. This “deviant” behaviour could also refer to lesbian or bisexual women as the cultures in which FGM is commonly practiced are often homophobic as well. Therefore, it could be argued that on some level and in some cases, FGM can be constituted as a homophobic practice. By strengthening the legislative framework, and offering further protections to women and girls potentially affected by the practice, it will have a positive impact on eliminating unlawful discrimination, harassment and victimisation of lesbian and bisexual women who may be affected by the homophobic aspects of FGM and the cultural beliefs that perpetrate it.</p>
Advancing equality of opportunity	X			<p>As reflected above, FGM is partly practiced to control the sexuality of women, this includes lesbian and bisexual women. This legislation will increase protections for these women from FGM, which will ultimately advance equality of opportunity</p>

Promoting good relations	X			FGM constitutes an extreme form of discrimination against women and girls. In the sense that it is practiced partly to control the sexuality of women, it is clear that this has implications for lesbian and bisexual women. By implementing new legislation to increase protective measures against this practice, it is hoped that this will contribute to changing attitude toward women's sexuality more broadly. This will ultimately empower lesbian and bisexual women and, therefore, promote good relations.
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**Do you think the policy impacts on people on the grounds of their race?**

Race	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation	X			There are positive implications related to eliminating unlawful discrimination because of race. Although there may be concerns about stigmatising certain communities, continuous engagement with communities, the third sector, and statutory organisations will counteract this. Furthermore, the issuing of statutory guidance will support organisations across Scotland to address the issue of FGM in a manner that is not

				discriminatory against any one community or race.
Advancing equality of opportunity	X			This new legislation has the potential to advance equality of opportunity for racial minorities in Scotland. The objective of this new Bill is to eradicate a harmful practice that is largely practiced in specific communities – it is therefore hoped that combatting this will allow for members of these communities to have advanced equality of opportunity. Furthermore, this new legislation has been partly informed through engagement with people from different racial minority backgrounds, this engagement will continue as we approach introduction and implementation.
Promoting good race relations	X			This new legislation has positive implications for promoting good race relations. The new statutory guidance will help to ensure that organisations across Scotland are well informed on FGM, which will allow for a more considered approach to tackling the issue in Scotland. Furthermore, the Scottish Government have been engaging with ethnic minority groups on this new Bill, and will seek to

				ensure engagement remains robust and consistent moving forward.
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**Do you think the policy impacts on people because of their religion or belief?**

<b>Religion or belief</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
Eliminating unlawful discrimination, harassment and victimisation	X			FGM is a cultural practice that does not have any basis in any religion – although, there is a commonly held misconception in some communities that it is a religious requirement. New statutory guidance will provide a good opportunity to dispel some of these myths and therefore create a positive opportunity to contribute to eliminating any potential stereotyping of any particular religion as a driver for FGM.
Advancing equality of opportunity	X			This new legislation has the potential to advance equality of opportunity broadly and there will be no negative barriers created for advancing equality of opportunity based on religious beliefs. It is hoped that new statutory guidance will also be beneficial in engaging religious leaders in the work we're doing on eliminating FGM.
Promoting good relations	X			This new legislation, and the statutory guidance in particular will seek to engage

				<p>more people, including religious leaders, in the work currently being done to eradicate FGM. Furthermore, statutory guidance will also seek to dispel myths of FGM being linked to any one religion. This therefore means that this new Bill has positive implications for promoting good relations from a religious perspective.</p>
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## Stage 4: Decision making and monitoring

### *Identifying and establishing any required mitigating action*

Have positive or negative impacts been identified for any of the equality groups?	YES - POSITIVE
Is the policy directly or indirectly discriminatory under the Equality Act 2010?	NO
If the policy is indirectly discriminatory, how is it justified under the relevant legislation?	N/A
If not justified, what mitigating action will be undertaken?	N/A

## Stage 5: Authorisation of EQIA

Please confirm that:

- ◆ This Equality Impact Assessment has informed the development of this policy:

Yes  No

- ◆ Opportunities to promote equality in respect of age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation have been considered, i.e.:

- Eliminating unlawful discrimination, harassment, victimisation;
- Removing or minimising any barriers and/or disadvantages;
- Taking steps which assist with promoting equality and meeting people's different needs;
- Encouraging participation (e.g. in public life)
- Fostering good relations, tackling prejudice and promoting understanding.

Yes  No

- ◆ If the Marriage and Civil Partnership protected characteristic applies to this policy, the Equality Impact Assessment has also assessed against the duty to eliminate unlawful discrimination, harassment and victimisation in respect of this protected characteristic?

Yes  No  Not applicable

## **Declaration**

**I am satisfied with the equality impact assessment that has been undertaken for the Female Genital Mutilation (Protection and Guidance) Bill and give my authorisation for the results of this assessment to be published on the Scottish Government's website.**

**Name: Trevor Owen**

**Position: Head of VAWG, Social Isolation and LGBTI Equality Policy**

**Authorisation date: 22 March 2019**



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