



**amnesty
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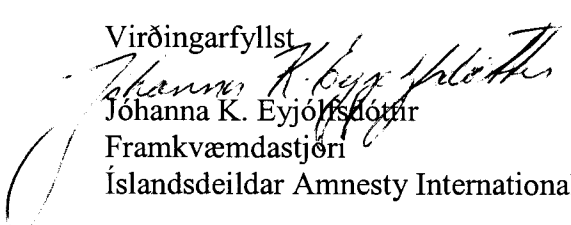
Alþingi
Erindi nr. P 130/ 2531
komudagur 28.5. 2004

Reykjavík 26.05.2004

Nefndasvið Alþingis
Austurstræti 8-10
150 Reykjavík

Hjálagðar eru athugasemdir Íslandsdeildar Amnesty International vegna frumvarps til laga um bann við umskurði kvenna, ásamt almennum tilmælum Amnesty International til afnáms limlestinga á kynfærum kvenna. Einnig vilja samtökin benda á tilmæli eftirlitsfulltrúa Sameinuðu þjóðanna um ofbeldi gegn konum¹, þar sem lagt er til að ríki setji heildstæð lög um ofbeldi í fjölskyldum.

Virðingarfyllst


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¹ E/CN.4/1996/53/Add.2



**Frumvarp til laga um bann við umskurði kvenna
(130. löggjafarþing 2003-2004. Þskj. 201-198.mál)**

**Nokkrar athugasemdir Íslandsdeildar
Amnesty International**

Íslandsdeild Amnesty International fagnar þeirri meginhugsun sem fram kemur í frumvarpinu og lýtur að því að gera umskurð á kynfærum stúlku eða konu að refsiverðu athæfi. Aftur á móti telur deildin að réttara væri að hugtakanotkun yrði í samræmi við hugtakanotkun Sameinuðu þjóðanna þegar vísað er til þessa athæfis, eða „Female genital mutilation (FGM)” og hugtakið „limlesting á kynfærum kvenna” yrði notað við lagasetningu.

Í 23. kafla almennra hegningalaga er kveðið á um viðurlög við líkamsmeiðingum og sambærileg ákvæði er einnig að finna meðal annars í Barnaverndarlögum og telst athæfið því nú þegar refsivert í skilningi laga. Aftur á móti telur Íslandsdeild Amnesty International mjög æskilegt að í lögum komi fram sérstök fordæming á limlestingum á kynfærum kvenna og styður því meginhugsun framvarpsins.

Íslandsdeild Amnesty International leggur auk þess áherslu á að samtímis því að limlesting á kynfærum kvenna verði gerð refsiverð í íslenskum lögum þurfi að gera nauðsynlegar breytingar á lögum um útlendinga þar sem kveðið er á um vernd gegn ofsóknum og flóttamenn. Lögin þurfa að skilgreina limlestingu á kynfærum kvenna sem kynbundnar ofsóknir sem falla innan ramma Flóttamannasamnings Sameinuðu þjóðanna í þá veru að kona eða stúlka sem flýr heimaland sitt vegna hættu á limlestingu á kynfærum eða öðrum kynbundnum ofsóknum fái vernd sem flóttamaður.

Til að vera marktæk verður hver sú lagasetning sem gerir limlestingu á kynfærum kvenna refsiverða jafnframt að tryggja rétt hælisleitenda sem flýja slíkt ofbeldi.

Almenn tilmæli til yfirvalda frá Amnesty International til afnáms limlestinga á kynfærum kvenna

A 10-point program of action

Governmental action alone will not end FGM. But while many actors have a role to play in eradicating FGM, governments have it within their power to determine whether eradication will be achieved within a generation, or whether millions more girls will pay the price of their inaction. Moreover, for governments, taking action is not a choice but an obligation under international law. Lack of resources cannot be invoked by governments as an excuse to flout these obligations. However, the international community has a responsibility to ensure that resources are available to assist developing countries in waging effective campaigns against FGM. Implementation can then clearly be seen as a question of will.

Amnesty International proposes the following program of action for governments. The program draws on the provisions of international human rights standards and the recommendations of UN human rights bodies and specialized agencies, and plans of action proposed by NGOs.

Governments should:

1. Affirm that FGM is an abuse of human rights, and recognize their obligation to end it. They should make a clear and unequivocal commitment to eradicate or drastically reduce the prevalence of the practice within a defined time frame.
2. Set up mechanisms for consultation and collaboration with relevant non-governmental sectors (religious, health, women, human rights, development) as well as international organizations and UN agencies working on human rights, health and development.
3. Undertake research into the practice of FGM in their countries. Information is particularly needed on its prevalence, physical and psychological effects, social attitudes and religious requirements. Research should also review the impact of efforts to date. In particular, work needs to be done to study the prevalence of FGM outside Africa, especially in the Middle East, Latin America and in many countries where it is practised among immigrant communities.

4. Review all relevant domestic legislation to see how effectively law and practice protect against FGM and comply with international standards, particularly the UN Convention on the Elimination of Discrimination against Women (Women's Convention), the Convention on the Rights of the Child (CRC) and the Declaration on the Elimination of Violence against Women. Ensure that legislation complies with the recommendations of the UN Special Rapporteurs on violence against women and on traditional practices affecting the health of women and children.

5. Ratify the International Covenant on Civil and Political Rights, International Covenant on Economic, Social and Cultural Rights, the Women's Convention, the CRC and all other relevant standards without limiting reservations or interpretive statements. Comply with their commitment to report to relevant treaty bodies, and to include specific mention of steps to prevent FGM in reports to all relevant treaty bodies and international human rights mechanisms.

6. Ensure that FGM programs are integrated into all relevant areas of state policy. Departments of health should clearly prohibit medicalization of FGM, and move to incorporate this prohibition into professional codes of ethics for health workers. Departments of education, women's affairs, immigration and development should all include FGM programs, as well as addressing the underlying factors which give rise to FGM, such as access to education. Countries providing development assistance should identify ways of supporting FGM projects.

7. Recognize FGM as a form of gender-based persecution falling within the scope of the UN Convention relating to the Status of Refugees. States should adopt and implement the recommendations set out in the Guidelines on the Protection of Refugee Women of the UN High Commissioner for Refugees.

8. Carry out widespread public information programs using relevant media. These should be tailored to specific groups, such as men, women, young people, children, the elderly, influential community figures, religious scholars, and those who carry out FGM.

9. Support the work of NGOs and individuals working against FGM. Provide them with protection against threats and other attempts to undermine their work.

10. Take an active role in supporting regional and international initiatives to combat FGM, such as the WHO, UN Children's Fund (UNICEF), UN Population Fund (UNFPA) program. Encourage adoption by the OAU of the IAC's Addis Ababa Declaration. Endorse and support the work of the UN Special Rapporteurs on violence against women and on traditional practices affecting the health of women and children.