



# The EU Mutual Learning Programme in Gender Equality

## Combating female genital mutilation and other harmful practices

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### Comments Paper – Lithuania



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# FGM and other harmful practices in the context of Lithuania: policies and discourses

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## 1. Brief context and prevalence of FGM in Lithuania

Recently, the European Institute for Gender Equality (EIGE) has completed a study aiming at mapping the current situation and trends on FGM in Europe (EIGE,2013). This report suggests that in Lithuania the policy discourse and academic research is very limited and analysis of FGM as a type of broader framework of gender based violence (GBV) hardly exists (EIGE,2013).

The Department of Migration identifies that there is approximately 1.4 % of migrants in Lithuania (Blazyte, 2014). Research suggests that more people emigrate from Lithuania rather than immigrate. Majority of migrants come from neighboring countries - Russia, Belarus, Ukraine and Moldova. The Department of Statistics provides data that approximately 0.8 % of all migrants were citizens from Asian and African countries who immigrated in 2014. Few studies on gendered aspect of migration show that more men than women immigrate to Lithuania and growing tendencies of male immigration to Lithuania prevail. Number of immigrant women in this dynamic tends to go down (European Commission, 2010; Erentaite, Pilinkaite-Sotirovic, 2012, Blazyte, 2014).

Initiatives on ending FGM by civil society have been very few in Lithuania. Following the call by Amnesty International the Women's Information Centre in Lithuania joined the campaign "End FGM in Europe" supported by the European Commission in the end of 2010 and beginning of 2011 (Vainauskiene, 2011). In Lithuania the initiators tried to break down the silence about this type of violence and facilitate the discussions on harmful practices that might have probability for spreading in Lithuania in the current context of refugee crises. Nevertheless, in public debates the director of MIC mentioned the difficulties of raising awareness about this phenomenon due to very limited number of people who might experience risks to FGM. Thus neither society nor policy actors nor legal professionals are discussing or debating these harmful traditional practices yet.

EIGE's country report on Lithuania highlights the difficulties of analysis of FGM issues in Lithuania due to sensitivity and reluctance of women to speak about it. As indicated in the research one professional gynaecologists admitted that she knows only two cases of FGM during her professional practice. Experts have mentioned that both immigrant women and Lithuanian women married to immigrant men from FGM-practicing countries are at risk of FGM (EIGE, 2013).

In sum, the contextual analysis on possible prevalence of FGM in Lithuania suggests very limited information and evidence about this phenomenon.

## 2. Legal and Policy Framework of FGM in Lithuania

### 2.1. Legal Framework

Brief overview of the contextual aspects in Lithuania suggests the very limited prevalence of FGM in Lithuania. This makes an impact on limited understanding of the harmful practices and lack of public discourse on this issue. In Lithuania there are no specific policies addressing the issues of FGM. The existing policies on domestic violence and violence against children in general prevail. Nevertheless, FGM in Lithuania could be addressed through the general legal framework of criminalisation of heavily injuries to health which might be interpreted as a consequence of FGM.

Article 135 of the Penal Code stipulates a punishment for a serious bodily injury that among other bodily injuries includes harms resulting to a person's ability to reproduce, pregnancy or other serious mutilation which seriously affects in a permanent disfigurement of victim's body. FGM could be included under this article (Penal Code, 2000).

In 2016 the amendment to the article 135 of the Penal Code was proposed by the Member of the Parliament Giedre Purvaneckiene (Lithuanian Parliament, 2016). Following the European Commission's recommendation under the Communicate of the European Parliament and Council on ending female genital mutilation No. COM/2013/0833 (European Commission, 2013), the Lithuanian MP proposed a separate paragraph on FGM crimes which should be prosecuted. The proposed amendment includes that punishment will be executed to a person who intends and/or completes FGM following religious beliefs and social-cultural needs (Lithuanian Parliament. 2016a). Any medical intervention to human body should be freely consented by a patient or his/her legal representative and approved by their written statement. The project initiator has explained in the Explanatory Note that naming the religious, social and cultural aspects of intervention to human body highlights the protection of human health from non-medical procedures. This amendment was passed at the first hearing in the Parliament and send to the parliamentary committees for discussions and revisions. The Committee of Law and Legal Regulations is the main committee in discussions for the approval of the amendment. It should be noted that the initiative discussed in the Parliament raised awareness in public discourse about the FGM as part of gender based violence.<sup>1</sup>

Legal framework of child's rights protection in general protects child's freedom to integrity, dignity and safety. Articles 7 and 10 of the Law on the Fundamentals of Protection of the Child's Rights stipulates these provisions implying that FGM practices could be treated as serious violence against a child, however direct wording is not included. Article 135 of the Penal Code could be also applied in FGM cases against a child. Additionally, any crimes committed against children are considered as aggravating circumstances under the Article 60 of the Penal Code (Penal Code, 2000).

The legal research in Lithuania addressing legislation of asylum granting procedures suggests that the law provides general statements on foreigners and asylum seekers' status and there are no specific provisions to address gendered aspects

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<sup>1</sup> E-mail communication with A. Rudomanskis, the adviser to the MP G. Purvaneckiene, 23 March 2016

including FGM (Beksa, 2008, Sabatauskaite, 2007). Nevertheless, the special decision of the Migration Department identifies the procedures for granting asylum and includes persecution on social grounds that might be considered as a specific form of persecution based on gender. Thus FGM could fall under this document of the Migration Department. There is known one case when the Department of Migration granted the status of refugee for a one-and-a half-year girl from Ethiopia under the threat of FGM (Beksa, 2008).

Doctors in the hospitals as well as general practitioners are obliged to follow the *Order of the Minister of Health Care, Minister of Interior and Prosecutor General on Exchange of Information about Injured Persons whose Body Injuries Could be Related to a Crime* (Order of Minister of Health, 2002) and inform police about body injury which might appear as consequence of any crime. However, no records about this are collected. The hospitals record patient data in the patient's card, but no information that a patient is a victim of FGM or other type of gender-based violence is indicated. Therefore, information about any type of gender based violence does not appear in health statistics.

In Lithuania any other harmful practices are not specifically addressed either in the legal provisions or policy framework. General provisions of Penal Code include the penalties for murder and other crimes against human life<sup>2</sup>.

In sum, Lithuanian legislation does not specifically define or address FGM and other harmful practices. Consequently, there is no any framework for collection of administrative and/or statistical data on this phenomenon

## 2.2. Policy Framework

Specific policies on FGM or other harmful practice does not exist in Lithuania. General policies of reducing violence against women and later introduced gender neutral concepts of domestic violence have been approved and implemented by the government of Lithuania since 2007 till present. The Strategy on Reduction of Violence against Women and Action Plan for its implementation in 2007-2009 (Government of the Republic of Lithuania. 2006) was followed by the Action plan in 2010-2012. The shift in policies on violence against women occurred since 2011 when the Law on Protection Against Violence in Close Environment (i.e. family) was introduced and the National Programme on Prevention of Violence in Close Environment and Support for Victims was approved for 2014-2020 (Government of the Republic of Lithuania. 2014). These documents are gender-neutral, regardless the statistical evidence that more than 80 % of victims of domestic violence are women. The action plans stipulated diverse activities such as trainings for law enforcement, service providers, educators, health care professionals and other, awareness raising, assistance and services for victims, enhanced accountability of perpetrator and institutional cooperation capacities. However, FGM or other harmful practices are not mentioned in these documents.

The National programme on prevention of violence against children covers very broad measures to reduce these crimes. FGM and other harmful practices are not mentioned in the document (Government of the Republic of Lithuania. 2008).

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<sup>2</sup> Articles 129-134 under the Chapter XVII. Crimes against Human Life, Penal Code [http://www3.lrs.lt/pls/inter3/dokpaieska.showdoc\\_l?p\\_id=366707](http://www3.lrs.lt/pls/inter3/dokpaieska.showdoc_l?p_id=366707)

The approved programme on Integration of Migrants in Lithuanian society in 2015 (Minister of Social Security and Labour, 2014) provides the general framework of measures of integration that mainly covers learning the Lithuanian language, assisting migrants in completing their documents for residence status in Lithuania, improving access to services for migrants and capacity building on intercultural communication for specialists. Gendered aspect of integration is not mainstreamed in this action plan.

The government of Lithuania develops policies for the integration of asylum seekers' and supports the measures of temporal housing, education and employment, accessibility to social security and health services. The government also supports awareness raising to enhance openness and respect to diversity in society and reduce xenophobia and social exclusion of asylum seekers (Ministry of Social Security and Labour)

### **3. Transmission of good practices**

Though the context of Italy and UK significantly differs from Lithuania, certain initiatives could be very important for Lithuania to effectively combat FGM and other harmful practices. Oppositely to Italy and UK, migrant population in Lithuania is very small and migrant communities from FGM practicing countries hardly exist in Lithuania. Research provides very limited evidence about possible FGM cases. Other harmful practices such as honour based violence or forced marriages are not addressed in Lithuania. Thus, awareness raising campaigns on FGM and other harmful practices as a violation of human rights could be transferred to Lithuania. Altering the wording of FGM, as suggested in the UK case, could be a good start for debates shifting the focus on FGM as culturally specific issue towards women's human rights, rights of bodily integrity and inviolability.

Data collection and research on prevalence of FGM and other harmful practices, as shown in the case of Italy, helps to identify both the magnitude of the phenomenon, social-demographic characteristics of the victims and gaps in the system of support and prevention. Data of research are necessary for the purpose to frame the policies and monitor their implementation. The methodologies of data collection and qualitative research, completed in Italy and UK, could serve as good practice to Lithuania to adapt them to the local context.

As the good practice of Italy shows, it is necessary to develop FGM prevention strategies through training and education of professional in different fields and systematic monitoring of all implemented activities. Trainings for professionals contribute to improving the knowledge and understanding of the phenomenon of specific aspects of women's human rights violation. Additionally, the relationships, networking and exchange of expertise between professionals and civil society actors will enhance inter-agency cooperation and suggest complex solutions to the problem.

Trainings for migration officers who consider the application for asylum and special protection are necessary to sensitise them about the threats of FGM on women's safety and quality of life. Currently asylum seekers can obtain refugee or special protection status due to the threat of FGM under the regulations by the Minister of Interior. However, only one case is known in Lithuania. As some experts mentioned there were more applications on this ground of protection, but they were not

satisfied. Thus, trainings could improve the professional knowledge of the specialists to sensitise on the issues of FGM and better collect proves in considering cases on refugee status.

## 4. Recommendations

Several thoughts for recommendations on the national and European level could be suggested:

- through awareness raising to shift policy discourses of FGM from specific cultural issues towards broader understanding of gender based violence and integrate the protection against harmful practices into the framework of protection and prevention of domestic violence. The framework of understanding FGM as a crime to human's health and bodily integrity could contribute to the development of policies to effectively protect victim, improve access to safe refuge from risks of FGM and other harmful practices and ensure sustainability of state support.
- For effective response to FGM and other harmful practices it is necessary to train professionals dealing with refugees and migrants to approach sensitively and recognise risks of FGM as grounds for asylum in a country. Interagency coordination and intersectional cooperation is necessary to be established to better address prevention, protection and prosecution of FGM.
- Many countries in the EU signed the Istanbul Convention but hinder its ratification. Thus, awareness raising on European level about the results and progress of the countries which have ratified the Convention should be enhanced. Support for civil society advocating for ratification of Istanbul Convention should be more sustainable.



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