Country Information and Guidance
Somalia: Women fearing gender-based harm and violence

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Preface

This document provides country of origin information (COI) and guidance to Home Office decision makers on handling particular types of protection and human rights claims. This includes whether claims are likely to justify the granting of asylum, humanitarian protection or discretionary leave and whether – in the event of a claim being refused – it is likely to be certifiable as 'clearly unfounded' under s94 of the Nationality, Immigration and Asylum Act 2002.

Decision makers must consider claims on an individual basis, taking into account the case specific facts and all relevant evidence, including: the guidance contained with this document; the available COI; any applicable caselaw; and the Home Office casework guidance in relation to relevant policies.

Country Information

The COI within this document has been compiled from a wide range of external information sources (usually) published in English. Consideration has been given to the relevance, reliability, accuracy, objectivity, currency, transparency and traceability of the information and wherever possible attempts have been made to corroborate the information used across independent sources, to ensure accuracy. All sources cited have been referenced in footnotes. It has been researched and presented with reference to the Common EU [European Union] Guidelines for Processing Country of Origin Information (COI), dated April 2008, and the European Asylum Support Office’s research guidelines, Country of Origin Information report methodology, dated July 2012.

Feedback

Our goal is to continuously improve the guidance and information we provide. Therefore, if you would like to comment on this document, please email the Country Policy and Information Team.

Independent Advisory Group on Country Information

The Independent Advisory Group on Country Information (IAGCI) was set up in March 2009 by the Independent Chief Inspector of Borders and Immigration to make recommendations to him about the content of the Home Office’s COI material. The IAGCI welcomes feedback on the Home Office’s COI material. It is not the function of the IAGCI to endorse any Home Office material, procedures or policy. IAGCI may be contacted at:

Independent Chief Inspector of Borders and Immigration,
5th Floor, Globe House, 89 Eccleston Square, London, SW1V 1PN.
Email: chiefinspectorukba@icinspectorgsi.gov.uk

Information about the IAGCI’s work and a list of the COI documents which have been reviewed by the IAGCI can be found on the Independent Chief Inspector’s website at http://icinspectorgsi.gov.uk/country-information-reviews/
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Guidance

Updated 2 August 2016

1. Introduction

1.1 Basis of Claim

1.1.1 Fear of being subjected to gender-based harm and violence by state and/or non-state actors.

1.2 Other points to note

1.2.1 Decision makers must refer to the Asylum Instructions on Gender issues in the asylum claim.

2. Consideration of Issues

2.1 Credibility

2.1.1 For information on assessing credibility, see the Asylum Instruction on Assessing Credibility and Refugee Status.

2.1.2 Decision makers must also check if there has been a previous application for a UK visa or another form of leave. Asylum applications matched to visas should be investigated prior to the asylum interview (see the Asylum Instruction on Visa Matches, Asylum Claims from UK Visa Applicants).

2.1.3 Decision makers should also consider the need to conduct language analysis testing (see the Asylum Instruction on Language Analysis).

2.2 Particular social group (PSG)

2.2.1 Women in Somalia form a particular social group (PSG) within the meaning of the 1951 UN Refugee Convention. This is because they share an immutable (or innate) characteristic – their gender – that cannot be changed; and they form a distinct group in society as evidenced by widespread discrimination in their fundamental rights.

2.2.2 Although women in Somalia form a PSG, this does not mean that establishing such membership will be sufficient to make out a case to be recognised as a refugee. The question to be addressed in each case will be whether the particular person will face a real risk of persecution on account of their membership of such a group.

2.2.3 For further guidance on particular social groups, see the Asylum Instruction on Assessing Credibility and Refugee Status.
2.3 Assessment of risk

i. Southern and central Somalia, including Mogadishu

2.3.1 There is widespread discrimination of women in Somalia. Gender-based violence – including domestic violence, rape, sexual abuse, exploitation and trafficking – is often committed with impunity by a range of actors including government security forces, members of armed opposition groups, militias, family and community actors and AMISOM peacekeepers (See sexual and gender-based violence in Somalia in the country information section).

2.3.2 However, in the country guidance case AMM and others (conflict; humanitarian crisis; returnees; FGM) Somalia CG [2011] UKUT 00445 (IAC) (28 November 2011), the Upper Tribunal held that ‘[…] except as regards the issue of FGM, it is unlikely that a proposed return to Mogadishu at the present time will raise Refugee Convention issues.’ (paragraph 371 and country guidance headnote (3)).

2.3.3 The subsequent country guidance case of MOJ & Ors (Return to Mogadishu) Somalia CG [2014] UKUT 00442 (IAC) (3 October 2014) found that the situation had improved further and that there had been ‘durable change’ following Al Shabaab’s withdrawal from Mogadishu (country guidance headnote (iii)); and that there was no general risk Article 15(c) risk to ordinary civilians (country guidance headnote (iv)).

2.3.4 The country information since MOJ & Ors does not support a departure from those findings (see country information and guidance on Somalia: security and humanitarian situation in south and central Somalia).

2.3.5 In the country guidance case AMM and others, the Upper Tribunal held that ‘women travelling without male friends or relatives are in general likely to face a real risk of sexual violence’ (paragraph 605).

2.3.6 Similarly, women who are without family/friend/clan connections or without resources are in general likely to be at risk of sexual and gender-based violence on return, or relocating, to Mogadishu. Decision makers must continue to consider the factors outlined in the MOJ & Ors country guidance headnotes (vii)–(xii) when deciding cases involving a person returning to Mogadishu. These factors include, but are not limited to: access to family networks or clan protection and support, age, health, economic status, family responsibilities, connections with the diaspora and other individual circumstances of the person.

ii. Al-Shabaab-controlled areas

2.3.7 In Al-Shabaab-controlled areas, a strict and harsh interpretation of Sharia law is imposed, which prohibits the exercise of several forms of human rights, such as freedom of speech, expression, movement, assembly, and religion. Many rules affect women in particular (see al-Shabaab and gender-based violence and the country information and guidance on Somalia: fear of al-Shabaab).

iii. Somaliland or Puntland

2.3.8 Sexual and gender-based violence are also serious problems in Somaliland and Puntland. Cases of such abuses are often unreported and resolved.
between families with perpetrators typically paying compensation or marrying the victim. Women, and especially single women, with no support network are likely to be vulnerable and may be subjected to destitution (see Sexual and gender-based violence in Somaliland and Sexual and gender-based violence in Puntland).

iv. FGM in southern and central Somalia, including Mogadishu

2.3.9 Female Genital Mutilation (FGM) is almost universally practiced throughout Somalia and a very strong cultural belief persists in its practice.

2.3.10 In the country guidance case of AMM and others, which was heard in 2011, the Upper Tribunal held that the incidence of FGM in Somalia was universally agreed to be over 90% (paragraph 241 and country guidance headnote (16)). In South and Central Somalia no significant changes in FGM prevalence have been observed since the 1990s (paragraph 547) and that ‘the societal requirement for any girl or woman to undergo FGM is strong. In general, an uncircumcised, unmarried Somali woman, up to the age of 39, will be at real risk of suffering FGM. The risk will be greatest in cases where both parents are in favour of FGM.’ (paragraphs 609 & 610 and country guidance headnote (16)).

2.3.11 AMM and others also held that should both parents oppose FGM, ‘the question of whether the risk will reach the requisite level will need to be determined by reference to the extent to which the parents are likely to be able to withstand the strong societal pressures. Unless the parent are from a socio-economic background that is likely to distance them from mainstream social attitudes, or there is some other particular feature of their case, the fact of parental opposition may well as a general matter be incapable of eliminating the real risk to the daughter that others (particularly relatives will at some point inflict FGM on her’ (paragraph 610) and country guidance headnote (17)).

2.3.12 MOJ & Ors does not replace the general finding in AMM and others about the risk to women of FGM.

2.3.13 Despite Somalia’s new Constitution, which was adopted in August 2012, prohibiting the practice, the country information available since MOJ & Ors does not support a departure from those findings (see Female genital mutilation (FGM)).

v. FGM in al-Shabaab-controlled areas

2.3.14 Al-Shabaab, the militant group that controls parts of south-central Somalia, also bans FGM, although Al-Shabaab controlled areas are becoming smaller (see al-Shabaab and gender-based violence and the country information and guidance on Somalia: fear of al-Shabaab).

vi. FGM in Somaliland or Puntland

2.3.15 In April 2013, it was reported that FGM among children in northern Somalia is on the decline. The survey released by UNICEF and the governments of Somaliland and Puntland found that 25 percent of girls from the ages of 1 to 14 years old have undergone the practice, compared with 99 percent of women aged 15 and above in those regions (see FGM in Puntland and FGM in Somaliland).
2.3.16 For further guidance on assessing risk, see the Asylum Instruction on Assessing Credibility and Refugee Status and, when considering asylum claims from women, the Asylum Instruction on Gender Issues in Asylum Claims.

2.4 Protection

i. Southern and central Somalia, including Mogadishu

2.4.1 Prosecutions and convictions for rape and other forms of sexual violence are rare in Somalia. Survivors not only experience fear and shame in reporting such crimes, but at times face greater abuse and stigmatisation if they do. Somali police, rather than investigating criminal complaints, often demand that victims of crime carry out an investigation themselves, from locating witnesses to establishing who the suspects are (see state response to sexual and gender-based violence).

2.4.2 In general, a woman fearing sexual or gender-based violence is unlikely to be able to access effective protection from the state. Traditional laws, often used instead of a weak state judiciary, discriminate against women and girls (see state response to sexual and gender-based violence).

ii. al-Shabaab-controlled areas

2.4.3 In general, a woman fearing sexual or gender-based violence is unlikely to be able to access effective protection when living in an al-Shabaab controlled area (see al-Shabaab and gender-based violence and the country information and guidance on Somalia: fear of al-Shabaab).

iii. Somaliland or Puntland

2.4.4 The situation may be otherwise in Somaliland and Puntland where the authorities do take action against those accused of rape, and where female genital mutilation has been made illegal (see sexual and gender-based violence in Somaliland and sexual and gender-based violence in Puntland).

2.4.5 Decision makers must consider each case on its individual facts and the particular circumstances of the person.

2.4.6 For further guidance on assessing the availability or not of state protection, see the Asylum Instruction on Assessing Credibility and Refugee Status.

2.5 Internal relocation

2.5.1 The relevance and reasonableness of internal relocation must be assessed on a case-by-case basis taking full account of the individual circumstances of the particular person.

2.5.2 For single women and female single heads of households with no male protection, especially those originating from minority groups, internal relocation will not be available in the absence of meaningful support networks or a real prospect of securing access to a livelihood.
2.5.3 If the person cannot remain in Mogadishu, the decision maker must establish whether that person could safely and reasonably relocate elsewhere in Somalia.

2.5.4 For areas of south and central Somalia which are not under the control of Al Shabaab, AMM and others found that family and/or clan connections may have an important part to play in determining the reasonableness of a proposed place of relocation. Travel by land across southern and central Somalia to a home area or proposed place of relocation may pose real risks of serious harm from Al Shabaab checkpoints. AMM and others also referred to the [present] famine conditions, which no longer applies, but decision makers must consider the wider humanitarian situation when deciding the reasonableness of internal relocation (see country information and guidance on Somalia; security and humanitarian situation in south and central Somalia).

2.5.5 AMM and others also found that women travelling without male friends or relatives are in general likely to face a real risk of sexual violence.

2.5.6 AMM and others found that internal relocation to an area controlled by al-Shabab is not feasible for a person who has had no history of living under al-Shabab in that area (and is in general unlikely to be a reasonable proposition for someone who has had such a history) (para 603).

2.5.7 Decision makers must continue to consider the factors outlined in the MOJ & Ors country guidance headnotes (vii)–(xii) when deciding cases involving a person returning, or internally relocating to Mogadishu.

2.5.8 Somaliland and Puntland in general only accept back persons who were former residents of those regions and were members of locally-based clans or sub-clans.

2.5.9 For further guidance on considering internal relocation, see the Asylum Instruction on Assessing Credibility and Refugee Status.

2.6 Certification

2.6.1 Where a claim is refused, it is unlikely to be certifiable as ‘clearly unfounded’ under section unfounded’ under section 94 of the Nationality, Immigration and Asylum Act 2002.

2.6.2 For further information on certification, see Certification of Protection and Human Rights claims under section 94 of the Nationality, Immigration and Asylum Act 2002 (clearly unfounded claims).

3. Policy summary

3.1.1 Discrimination and sexual and gender-based violence, including domestic violence, rape, sexual abuse, exploitation and trafficking, is widespread throughout Somalia. Despite this, it is unlikely that a proposed return to Mogadishu at the present time will raise Refugee Convention issues.
3.1.2 However, women without family or clan support and IDP women are in general likely to be at real risk of gender-based violence or serious harm on return.

3.1.3 There are very high levels of FGM throughout Somalia and strong cultural belief in its practice although the practice of FGM is declining in Somaliland and Puntland. Unmarried women under the age of 39 years who have not undergone the procedure, and who can demonstrate that they are at risk of such mistreatment and could not escape the risk by internal relocation, form a particular social group and should be granted asylum.

3.1.4 In south and central Somalia (including Mogadishu), effective state protection is, in general, unlikely to be available for women fearing sexual or gender-based violence. However, each case needs to be carefully considered on its facts. The situation may be otherwise in Somaliland and Puntland where an assessment of whether effective protection is available needs to be considered in relation to the particular circumstances of the person.

3.1.5 Internal relocation to Mogadishu to avoid risk from gender-based violence may be viable in some cases, in particular where the person has a support network, etc. Single women are unlikely to be able to relocate.

3.1.6 Somaliland and Puntland in general only accept back persons who were former residents of those regions and are members of locally-based clans or sub-clans.
4. Sexual and gender-based violence in Somalia

4.1 Overview

4.1.1 The Social Institutions and Gender Index stated:

‘Somalia has laws prohibiting rape; however they are very rarely enforced. There are no laws prohibiting domestic violence, spousal rape or sexual harassment.

‘Whilst most incidents of violence against women go unreported, there is a culture of impunity surrounding sexual and domestic violence in Somalia. Customary approaches to dealing with violence against women typically involve making “arrangements” between the clans of the victim and the rapist. According to the United Nations Human Rights Council, rape or domestic violence is treated as civil dispute, often resolved through either the payment of money or a forced marriage between the victim and the perpetrator.

‘Although there is a lack of prevalence data, sexual and domestic violence is reported to be a serious problem in Somalia and recent reports suggest that it is increasing.

‘Anecdotal reports from field workers suggest that although there has been a general increase in awareness about rape and sexual violence, there remains a reluctance to talk about gender-based violence. For instance, UNICEF reported that 76% of women 15–49 years old consider a husband to be justified in hitting or beating his wife, if his wife burns the food, argues with him, goes out without telling him or neglects the children or refuses sexual relations...Women in Somalia continue to be subject to high levels of conflict-related sexual violence and domestic violence, where rape is often used as a weapon of war. Police and militia members have been found to be perpetrators of rape against women and rape has been commonly practiced in inter-clan conflicts. Women living in Internally Displaced Person (IDP) camps are particularly vulnerable to rape, abduction and forced marriage, and recent reports have documented a pattern of sexual exploitation by troops, in which sex is exchanged for food or money.’

4.1.2 The Human Rights Watch report, “The Power These Men Have Over Us”: Sexual Exploitation and Abuse by African Union Forces in Somalia’, published on 8 September 2014, noted that:

‘The United Nations, Human Rights Watch, and other organizations have documented high levels of sexual and gender-based violence against Somali women and girls, particularly the displaced...some AMISOM soldiers,

1 Social Institutions and Gender Index, Somalia section, copyright 2016, http://www.genderindex.org/country/somalia, date accessed 22 July 2016
deployed to Somalia since 2007 to help restore stability in the war-torn capital, Mogadishu, have abused their positions of power to prey on the city’s most vulnerable women and girls. Soldiers have committed acts of rape and other forms of sexual abuse, as well as sexual exploitation—the abuse of a position of vulnerability, differential power, or trust, for sexual purposes.’

4.1.3 The Human Rights Watch report, “Here, Rape is Normal” A Five-Point Plan to Curtail Sexual Violence’, published on 13 February 2014, noted that:

‘Sexual violence is pervasive in much of Somalia. Two decades of civil conflict and state collapse have created a large population of displaced persons and other people vulnerable to sexual violence. At the same time it has destroyed the state institutions that are supposed to protect those most at risk. Armed assailants, including members of state security forces, operating with complete impunity, sexually assault, rape, beat, shoot, and stab women and girls inside camps for the displaced and as they walk to market, tend to their fields, or forage for firewood. Members of Somalia’s long marginalized minority communities are particularly at risk…After two decades of state collapse and armed conflict, Somali medical services and the justice system, including police and the courts, are profoundly ill-equipped to support and assist victims of sexual violence. As a result, women and young girls face what the UN’s independent expert on human rights in Somalia refers to as “double victimization” – first the rape or sexual assault itself, then failure of the authorities to provide effective justice or medical and social support.’

4.1.4 Regarding rape and sexual violence, the United States State Department ‘Country Reports on Human Rights Practices for 2015’, published on 13 April 2016, stated:

‘The law criminalizes rape, providing penalties of five to 15 years in prison for violations. Sentences from military courts for rape included death. The government did not effectively enforce the law. There are no laws against spousal violence, including rape. Somali NGOs documented patterns of rape perpetrated with impunity, particularly of displaced women…and members of minority clans…Women feared reporting rape due to possible reprisals. Police were reluctant to investigate and sometimes asked survivors to do the investigatory work for their own cases. Traditional approaches to dealing with rape tended to ignore the survivor’s situation and instead sought resolution or compensation for rape through a negotiation between members of the perpetrator’s and survivor’s clans. Some survivors were forced to marry perpetrators.

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‘For the most part, authorities rarely used formal structures to address rape. Survivors suffered from subsequent discrimination based on the attribution of “impurity.”’

4.1.5 Regarding rape and sexual violence, the Human Rights Watch ‘World Report 2016’, published in 2016, stated:

‘In 2014, the government endorsed an action plan to address alarming levels of sexual violence. However, as in other prioritized reform areas, implementation has been slow and protection of the most vulnerable communities non-existent. While the full scope of sexual violence remains unknown, internally displaced women and girls are clearly particularly vulnerable to rape by armed men, including government soldiers and militia members.

‘Some soldiers from Uganda and Burundi deployed with AMISOM sexually exploited and assaulted women and girls on their bases in Mogadishu. In some cases women and girls were offered humanitarian assistance, medicine and food in exchange for sex. Few women filed complaints due to fear of reprisals and absence of effective and safe complaint mechanisms. The African Union, and Burundian, and Ugandan authorities investigated specific allegations, although no prosecutions had occurred at time of writing.’

4.1.6 An ‘Independent’ article, ‘Rape victims still blamed for sexual violence in Somalia’, dated 6 May 2015, stated:

‘The Save the Children’s annual Mother’s Index Rankings revealed that the country was the worst in terms child mortality, maternal health, women’s income and education.

‘But the problems facing women’s rights in the African nation don’t end there. Victims of sexual violence in Somalia are continuing to face persecution and social exclusion.

‘More shocking stories of women being raped and sexually abused, with the blame squarely placed on the victim, are emerging all the time.

‘Among them is 14-year-old Fatima who was abducted and raped by a tuk-tuk driver after he spotted her selling sweets on the streets.

‘When the police arrived they arrested both Fatima and her attacker. Although her abuser was quickly released, Fatima was detained by the police for a month and was repeatedly raped by the prison guard.

‘Fatima was eventually set free by her aunt and the help of women’s charity The Elman Centre.


'She is not alone though, it is estimated that around one third of victims of sexual violence in Somalia are children under the age of 18, according to figures from Unicef...However, there is hope amid these bleak figures. The Elman Peace and Human Rights Centre in Somalia’s capital Mogadishu is trying to help those who have suffered at the hands of abusers.

'The charity was set up in 1991 by social activist Elman Ali Ahmed and the peace centre was founded by his wife Fartuun Adan.

'“Attitudes in Somalia now have changed a lot when it comes to sexual violence because there was a time when no one could talk about it,” Ms Adan said...While attitudes are slowly changing, the country still has a way to go in implementing legislation and bringing abusers to justice.’

4.1.7 A ‘Guardian’ article, ‘Can an app tackle domestic violence in Somalia?’, dated 5 May 2016, stated:

'Dahrio, a mother of three, lives in a camp for internally displaced people in Mogadishu, Somalia. Her community has always seen her as a strong, happy woman. But for three years her cheerful facade hid repeated, terrifying domestic abuse by her husband, a local policeman.

'Now the creators of an app used in western countries to support those worried about domestic violence hope to help Somali women be safer in their communities. The app, My Plan, takes women who are worried about abuse through a series of questions about their circumstances. It determines their levels of safety and offers courses of action, as well as live connection to local services and support.

'Dahrio was eventually helped by a clinic where NGO the International Committee for the Development of Peoples (CISP) provides medical and psychosocial care for victims of domestic violence. CISP is hoping to use My Plan to help women like Dahrio.

'Domestic abuse has historically been an accepted cultural practice in Somalia. “Many women endure domestic violence, including physical and sexual assault, and often remain with their husband as a result of cultural beliefs that dictate submissive behaviour of women,” reports the UN’s Somalia gender-based violence working group (pdf). “Loss of their children in case of a divorce might also play an important role in this decision.”

'In 2015, the country passed a bill criminalising numerous abusive practices such as gang rape and human trafficking. But to the dismay of rights activists, it did not address marital rape and domestic violence.

'To challenge these norms and lift women’s rights, CISP with the John Hopkins School of Nursing, runs weekly discussion groups engaging religious leaders, healthcare providers, police, teachers, youth and displaced communities to expedite social norm change. CISP’s research showed a significant drop – from 88% to 14% – of male and female participants

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strongly agreeing with the statement “a husband has the right to demand/force sex from his wife” after four months of their weekly discussion group…But transferring the app to low-resourced settings in Somali presents challenges. Francesco Kaburu, programme manager for CISP, says leaving the marital home will rarely be an option for women in poorer communities. But My Plan does not focus on women ending or leaving a relationship, however, but rather on the outcome of safety regardless of relationship status.

‘Access to smartphones is another barrier. Kaburu says that while the middle class in Mogadishu have smartphones and wifi connection at home, low-income citizens have limited access. The team are adapting to this situation by integrating My Plan into health services provided by trained staff. Maternal and child health staff will have smartphones with wifi for providers and women to collaboratively access and complete My Plan during visits and, as appropriate, during home visits.

‘Kaburu is hopeful about the app, but says there is an obstacle in getting women to see the need for it and to then use it. “Many times social workers tell us that women are not aware of how bad a situation was or could become,” he says. “In Mogadishu, the level of capacity for self assessment is very, very low. Domestic violence is taken for granted – women often think that if their husband doesn’t beat them, he doesn’t love them.”’ 7

For relevant country of information about the position and treatment of women in Somalia, see also:

European Asylum Support Office (EASO), country of origin information report, South and Central Somalia Country Overview, August 2014, in particular: Part 4.4.1 Women; Part 3.5.7 Forced recruitment of girls and women.

4.2 State response to sexual and gender-based violence

4.2.1 A mareeg.com report, ‘Rape must be tried under judicial system not clan mechanism - Somali Deputy Premier’, dated 19 May 2016, stated:

‘Women and Human Rights Development Sahra Mohamed Ali Samatar said the Sexual Offences Bill which is yet to be tabled before Parliament was a win for Somalia noting it harmonises the Islamic Sharia law and secular law.

“Sharia law will not allow impunity and it has zero tolerance on sexual violence. What we have now developed is that the Sexual Offenses Bill which is a great bill that complements both Sharia and the Somali penal code. We took that into account together, to make this bill as a standard Somali justice system, while protecting Sharia law as well,” Samatar said.

'On its part, AMISOM chief Francisco Madeira said the mission was committed to safeguarding human rights in Somalia adding they had taken measures to ensure cases of sexual violence are addressed and occurrences deterred.

'The Sexual Offences Bill also criminalises Female Genital Mutilation; a practice the World Health Organisation puts its prevalence rates at 98% in Somalia.'  

4.2.2 A Foreign Policy article, ‘Somalia’s Uphill Battle to Criminalize Sexual Violence’, dated 7 June 2016, stated that:

'The Sexual Offenses Bill, which would be the country’s first comprehensive law on sexual violence, still faces enormous impediments to passage and even greater impediments to implementation. But on May 17 [2016], it was endorsed by a group of high-level Somali officials, representatives from donor countries, and U.N. and African Union diplomats in what advocates described as an important step toward getting the draft law on the books.

"[W]e want the prosecution to make sure that [rape] is not dealt with under the traditional resolution mechanism," Somali Deputy Prime Minister Mohamed Omar Arte said in urging the bill’s passage. "It has to be a crime that has been committed against the state so that it will not be possible for them to take it out of the court systems to deal with it at clan level/customary law."

'Current Somali law on sexual violence is based on the colonial-era penal code that dates back to the 1930s. Under this legislation, rape is not considered a crime against an individual like murder or assault. Instead it falls into a lesser category of “crime against morality” along with homosexuality and bestiality. There are no clear guidelines for prosecution, and no legal repercussions if the police elect not to investigate a reported sexual assault. Gang rape, child marriage, and sexual harassment are not acknowledged in the law.

"At present, if a woman who has experienced sexual violence wants to obtain justice through the legal system, she faces an extremely complicated and humiliating process, at the end of which a conviction is very unlikely,” said Antonia Mulvey, who founded Legal Action Worldwide, a law firm specializing in human rights that is providing technical support for the drafting of the Somali bill.

'In the past, women who came forward to report sexual violence have been accused of prostitution and even raped again in prison, according to testimonies collected by the Elman Peace and Human Rights Center, a Mogadishu-based nonprofit that assists victims of gender-based violence.

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“Women are second-class citizens in Somalia. Sorry to say that,” said Abdifatah Hasssan Ali, the founder of Witness Somalia, a local NGO that monitors human rights abuses in the country.

‘Things are even worse in the huge swaths of the country where the national legal system is irrelevant. Outside the capital, the central government’s authority is radically diminished and a complex mixture of customary law — traditional, localized law among clans — and interpretations of Sharia law prevails. In these areas, women are often forced to marry their assailants, or a small fine is paid to their male relatives as recompense. In 2011, the Rome-based International Development Law Organization estimated that 80 to 90 percent of criminal disputes in Somalia were handled through the customary system...In the areas that remain under al-Shabab’s control, women and girls live under the constant threat of sexual and gender-based violence. According to Human Rights Watch, the militant group has abducted women and girls, raped them, and forced them to marry fighters or work as slaves. Meanwhile, African Union and Somali forces have been accused of abuses of their own...Related to the problem of the Somali government’s limited reach is the emergence of federal states — part of the country’s federalization process, set in motion at a reconciliation conference 12 years ago in Nairobi, Kenya — which have tended to resist national legislation. In many cases, states have simply refused to acknowledge laws passed in the capital.

“ ‘The biggest challenge with any legislation passed in Somalia right now is that it has very little force outside Mogadishu or possibly even within Mogadishu,” said Matt Bryden, the former head of the U.N. Monitoring Group on Somalia and Eritrea. Opposition from emerging state-level administrations meant that “a number of pieces of legislation have been passed and they have no meaningful impact on the ground. And that’s even before you take into account the weakness of law enforcement and the judicial system,” he said.

‘Of course, none of this will matter if the Parliament in Mogadishu doesn’t rally the votes to pass the sexual violence bill in the first place. After 17 months of drafting — during which time it was workshopped by civil society groups, lawyers, religious leaders, and parliamentarians who vetted it for compliance with Sharia law — the bill was finally submitted to the cabinet for debate in December. But many doubt whether Parliament will vote on it before August, when the current government’s mandate is set to expire. If it doesn’t go to a vote before then, the bill will need to be reintroduced by the next cabinet in accordance with parliamentary rules.

‘Arte, the deputy prime minister, said Parliament will “hopefully” pass the bill, but he cautioned that people should be “realistic.” According to Ali, of Witness Somalia, the next big step before taking on the massive job of implementation is to persuade Parliament to prioritize the bill. He said the government right now spends most of its energy on national legal frameworks and organizing election committees: internal politics. He acknowledged and appreciated the pomp and circumstance of the day but commented, “It’s like they have never attended such a forum once they are back in their offices.”
‘Part of the resistance to the bill is no doubt rooted in the deep-seated conservatism of Somalia’s male-dominated political class. Only 38 of Somalia’s 275 parliamentarians are women. But some of it boils down to semantics. Much of the wording of the bill, which was drafted in English as a result of the substantial input from international organizations, is getting lost in translation, said Zahra Samantar, Somalia’s minister of women and human rights. For example, there is no word for “gender” in Somali. Arabic was ultimately used in the translation, but in that language “gender” means “sex.” Settling on a wording that is clear and culturally sensitive is imperative, Samantar said, because “in order for there to be justice, he or she must know what type of crime has been committed.”

‘Despite the looming uphill battle for passage and implementation, Samantar described the draft law as a vital first step toward equality for a country that has been dubbed the “worst place” on Earth to be a mother and where Human Rights Watch once described rape as “normal.” “This is a changing of a culture,” she said, referring to the bill as the beginning of at least a 20-year project aimed at transforming how Somalis understand women’s rights.

‘Mulvey, of Legal Action Worldwide, described the draft law in similar terms. She said that even two years ago it would have been difficult to imagine government officials discussing sexual violence in public, let alone seriously considering a law to ban it. She also described the bill as an important part of a larger push by Somali women to shape the political system that has long been biased against them.’

4.3 Displaced women

4.3.1 An Internal Displacement Monitoring Centre report, ‘Somalia: over a million IDPs need support for local solutions’, published on 18 March 2015, noted that:

‘Internally displaced women and girls are often exposed to sexual violence en route to their areas of destination, or when they leave settlements to collect firewood, fetch water or use distant or badly lit latrines…Other forms of gender-based violence include domestic violence which is often exacerbated by stress, loss of livelihoods and displacement-induced changes in gender roles. Women are also exposed to harmful traditional practices such as forced early marriages, which increase in situations of forced displacement…The FGS [Federal Government of Somalia] has acknowledged the extent of the problem of sexual violence and in 2013 pledged to address the issue. However, in reality little has been done to address the problem of rape and sexual assault of women and girls.

particularly among vulnerable displaced communities (HRW, February 2014).’

4.4 Assistance and support for women

4.4.1 A United Nations news release of 29 May 2014 explained that the Security Council had extended the mandate of the United Nations Assistance Mission in Somalia (UNSOM) for one year and expanded it to include support to the Federal Government and African Union Mission in Somalia (AMISOM) by providing strategic policy advice on peace-building and state-building, including in the lead-up to elections in 2016. The Mission was asked to support the Government in strengthening of the justice institutions with the aim of ensuring accountability, particularly with respect to crimes against women and children. For women, this would mean:

- Promoting and protecting human rights and women’s empowerment, including through the provision of Gender Advisers and Human Rights Advisers;
- Preventing conflict-related sexual and gender-based violence, including through the provision of Women’s Protection Advisers;
- Strengthening Somalia’s justice institutions and to help ensure accountability in particular with respect to crimes against women and children;
- To monitor, help investigate and report to the Council on, and help prevent any violations or abuses committed against women, including all forms of sexual and gender-based violence in armed conflict.11

4.4.2 Legal Action Worldwide, in an October 2014 report, ‘Legal Aid Providers Supporting Gender Based Violence Survivors in Somalia: Report and Recommendations’, gave details of the government national action plans on sexual violence in conflict:

‘In June 2014, the Ministries of Justice; Women, Human Rights and Development; Security and Somali Police Force; Health; Defence and Somali National Army; Education and Religious Endowments each adopted comprehensive National Action Plans on Sexual Violence in Conflict (NAPs). These Action Plans contain numerous commitments to government oversight bodies to coordinate efforts related to prevention and response to sexual violence, including:

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• An Inter-Ministerial Coordination Mechanism comprised of representatives from the seven Ministries who released NAPs, to monitor their implementation and to coordinate sexual violence efforts.

• A Sexual Violence Oversight Committee (SVOC) to monitor investigations of present and future cases of sexual violence.

‘The composition, mode of operation and terms of reference for the SVOC are yet to be established. The NAPs also commit to the establishment of certain bodies and policies relating to sexual violence and accountability for each Ministry, the most relevant for this report being the Ministries for Justice, National Security, Health and Women and Human Rights Development…These Action Plans are comprehensive and their full implementation could have a significant effect on improving access to justice for GBV [gender based violence] survivors and accountability for perpetrators.

‘However, there are some significant challenges. Firstly, most of the bodies and policies promised by the action plans are yet to be implemented. Secondly, their implementation alone will not comprehensively address sexual violence in Somalia. To do this, the involvement and increased capacity of legal aid providers is essential. For example, it is unclear whether the Ministry of Women and Human Rights Action Plan envisages that the safe-houses, hotlines and relocation schemes it references will be facilitated by the Ministry itself. It is important that these services and facilities are provided by non-government organisations in order to be independent and secure.’

4.4.3 The same report gave details of assistance already available to women:

• ‘Three legal providers have established “one stop” centres for GBV response, which provide medical services, legal aid, psycho-social support and livelihood support for survivors of GBV;

• Legal aid providers in Mogadishu have advanced systems of case management and referral through which case managers refer survivors’ cases either between internal staff or with other service providers in a manner that comprehensively addresses the needs of the survivor while exposing them to the least possible psychological distress;

• Legal aid providers offer legal aid and assistance to many survivors of GBV who would otherwise not have access to such services despite enormous risk to their own safety;

• Practical training provided to over 40 law students since 2011; many are now employed in law firms and in government;

• Community forums bringing together religious leaders, elders and leaders of women’s rights groups;

• Safehouses established providing secure and safe space for GBV survivors.’  

4.4.4 The same report also noted:

‘There are six legal aid providers in South-Central Somalia. There is a high demand for legal advice and representation as police custody and prisons are overpopulated and the government does not have sufficient capacity to ensure all detainees receive legal assistance…Four of the six legal aid providers offer free defence to indigent clients. All providers offer assistance and support to survivors of GBV. From available reports, demand for organisations providing legal, medical and psychosocial support for GBV survivors is high. Three out of the six legal aid providers - Somali Women Development Centre, Save Somali Women and Children and the Elman Centre - offer medical and psychosocial services as well as legal support.’  

5.  Sexual and gender-based violence in south and central Somalia

5.1 Rape and sexual violence

5.1.1 Regarding rape and sexual violence, the United States State Department ‘Country Reports on Human Rights Practices for 2015’, published on 13 April 2016, stated:

‘Although statistics on cases of gender-based violence in Mogadishu were unreliable, international and local NGOs characterized such violence as pervasive. Government forces, militia members, and men wearing uniforms raped women and girls. While the army arrested some security force members accused of such rapes, impunity was the norm. AMISOM troops committed sexual abuse and exploitation, including rape…Local civil society organizations reported several cases of gang rape. For example, in May a 14-year-old girl was allegedly gang-raped after attackers forced her off a minibus taxi. After the case was reported to a Criminal Investigation Department station, the police officer in charge refused to file the complaint and instead detained the victim for making false claims. The victim claimed the police officer that ordered her arrest repeatedly raped her.

‘According to local human rights organizations, IGA security forces in Galinsoor (between Galkaayo and Adaado) gang-raped four women on


August 29. The incident was brought to the attention of IGA authorities, but no legal action was taken against the perpetrators.'  

5.2 Al-Shabaab and gender-based violence

The area in Somalia controlled by al-Shabaab is diminishing. See Country Information and Guidance Somalia: Security and humanitarian situation in South and Central Somalia for information about this.

However as al-Shabaab still has a presence, albeit a diminished one, the following information has been included.

5.2.1 Human Rights Watch reported in February 2014 that:

'Outside of areas under the control of the Federal Government of Somalia, Somali women and girls face threats of sexual and gender-based violence from al-Shabaab. In al-Shabaab controlled areas, militants have been responsible for numerous acts of violence against girls and women, including rape, forced marriage, corporal punishment, and killing…Al-Shabaab has further inflicted violence against Somali women and girls by way of hudood, or physical punishment of those they deem to have violated Sharia, or Islamic law. For example, on August 21, 2012, al-Shabaab militants dragged a female tea seller from a bus near the town of Baidoa and beheaded her because she had refused to stop selling tea to members of the Transitional Federal Government. The group has strictly regulated and policed every aspect of the lives of the population under its control, and women in particular. They have conducted public beatings and whippings of women who were deemed to wear clothing that was not “modest,” or who worked alongside their homes and were as a result seen as “mingling” with men.'

5.2.2 The Amnesty International report, ‘Forced returns to South and Central Somalia, including to Al-Shabaab areas: a blatant violation of international law’, dated 23 October 2014, stated:

'It is widely documented that people who live in al-Shabaab territories face widespread and grave human rights abuses…Al-Shabaab regularly capture and imprison people suspected of activities against their interpretation of Shar’ia law…Torture and other ill-treatment such as stoning, public whipping and amputation are used as ‘punishment’ if these rules are not adhered to…On 27 September 2014, a woman was allegedly stoned to death in Barawe, a town in Lower Shabelle region, on suspicion of marrying more than one husband. It is reported she was buried up to her neck then stoned to death by hooded men in front of a crowd. Al-Shabaab members also carry

out rape and other forms of gender-based violence such as forced marriage and continue to recruit and use children in the conflict.' 17

5.2.3 The same Amnesty International report also stated: ‘People on transport routes report being interrogated and treated with suspicion by al-Shabaab. Movements need to be justified, particularly if the movement is between al-Shabaab areas and areas controlled by the SFG and allied forces. An unknown person or a person looking slightly westernized may be at increased risk if al-Shabaab stops the vehicle.’ 18

6. Sexual and gender-based violence in Somaliland

6.1 Rape and sexual violence

6.1.1 The United States State Department ‘Country Reports on Human Rights Practices for 2015’, published on 13 April 2016, stated:

‘Local civil society organizations in Somaliland reported that gang rape continued to be a problem in urban areas, primarily perpetrated by youth gangs and male students. It often occurred in poorer neighborhoods and among immigrants, returned refugees, and displaced rural populations living in urban areas. According to 2013 data from a local Hargeisa-based NGO, gang rapes constituted 30 percent of reported rapes. In 55 percent of reported cases, a minor was the victim. Many cases went unreported.’ 19

7. Sexual and gender-based violence in Puntland

7.1 Rape and sexual violence

7.1.1 The International Organization for Migration (IOM) reported in February 2014 that:

‘In particular, rape, sexual violence against the displaced, especially against members of rival clans and minorities, are presumed to be severely underreported due to associated stigma and inaction. Women in the IDP camps of Bosasso, Puntland, have stated that they suffer sexual abuse and have no faith in the police and justice system to protect them. Likewise in the Buraha camp, east of Bosasso, displaced women and their leaders claim the

17 Amnesty International, ‘Forced returns to South and Central Somalia, including to Al-Shabaab areas: a blatant violation of international law’, 23 October 2014,
18 Amnesty International, ‘Forced returns to South and Central Somalia, including to Al-Shabaab areas: a blatant violation of international law’, 23 October 2014,
19 United States State Department, ‘Country Reports on Human Rights Practices for 2015’, Somalia, 13 April 2016, Section 6,
cases do not go to court even if the police investigate the case. The chairman of the displaced people in Bosasso noted that “rape leads to such shame and social stigma” that it had forced several victims to migrate to Yemen and others to move to different towns to find anonymity.”

7.2 Gender-based violence

7.2.1 A United Nations Population Fund (UNFPA) article, ‘Puntland intensifies the fight against GBV’, dated 29 December 2014, stated:

‘The Puntland State of Somalia is making headway in the fight against gender-based violence (GBV) as it intensifies efforts towards ending sexual violence, sexual assault and exploitation, female genital mutilation and early and forced marriages.

‘UNFPA Head of Puntland Field Office, Dr. Bakhtior Kadirov said a lot of action is going on to address GBV in the area...And in line with the ongoing 16 days of activism against gender-based violence, the Puntland Ministry of Women Development and Family Affairs, UNSOM, UNFPA, UNDP, UNICEF, IOM and a number of NGOs are strengthening their efforts and collaborating even more against gender-based violence under the theme "From Peace in the Home to the Peace in the World: Let's Challenge Militarism and End Violence against Women". The 16 Days of Activism Against Gender Violence is an international campaign that starts on 25 November, International Day for the Elimination of Violence against Women and ends on 10 December, Human Rights Day. The campaign hopes to raise awareness about gender-based violence as a human rights issue at the local, national, regional and international level.

‘Delivering a statement on behalf of UN organisations and the working group on gender-based violence at the beginning of the 16 days, Dr. Kadirov commended Government of Puntland for its strong efforts in addressing concerns of gender-based violence. He noted that GBV is among the most pervasive violations to human rights, as well as being a health concern with serious implications for reproductive health outcomes.

‘He underlined that the challenges of GBV are formidable and complex saying female genital mutilation affects large numbers of women and girls, that girls are prevented from going to school or forced to marry, that survivors of sexual violence can suffer significant health consequences, including forced and unwanted pregnancies, traumatic fistula and higher risks of sexually transmitted infections, such as HIV, that violence occurs during conflicts, where the risks are compounded by displacement, breakdowns in social norms and lack of access to services and that trafficking in women and girls constitutes a serious concern...NGO representative, Mr. Mohamoud Said from Relief and Development Initiative noted that the civil society organizations of Puntland is joining hands of men
and women who come together to call for an end all forms of violence against women. He emphasised that we must redress the poor status of women and girls in Puntland which renders them undervalued and vulnerable to gender-based violence.’  

8. Female genital mutilation (FGM)

8.1 Overview

8.1.1 A UNICEF study about the worldwide practices of FGM found that the practice of FGM is: ‘almost universal in Somalia…[and] no significant changes in FGM/C prevalence can be observed,’ 22 In another UNICEF study, it was highlighted that: ‘In Somali society, the practice of FGM is an honoured tradition. Those who oppose it do so against the tide of public opinion.’ 23

8.1.2 A Health and Education Advice and Resource Team (HEART) undated report ‘Situational Analysis of FGM/C Stakeholders and Interventions in Somalia’, stated:

‘Current statistics indicate a high prevalence of FGM/C in Somalia, at around 97.9% for women 15–49 years old (Population Reference Bureau, 2014). In Somaliland, Puntland and South Central Somalia, the communities consulted said that nearly all households in their localities had women and girls who had undergone FGM/C. The few mothers who openly said they had not had their daughters undergo FGM/C were from communities that had been beneficiaries of anti-FGM/C activities carried out by ANPPCAN [NGO] in Borama in Somaliland, TASS [NGO] in Garowe in Puntland and SPL in Mogadishu, Somalia. During the Situational Analysis, there was not a single community consulted in which all households had completely abandoned FGM/C. This was equally true in communities which had seen anti-FGM/C interventions as in communities which had not. The only community in which the participants claimed that most families are abandoning FGM/C completely was in Borama, Somaliland, in a community that was targeted by CCBRS [NGO].

‘Many people consulted—in institutions and in communities—said, however, that FGM/C is decreasing, even if rates remain high. In consultations, people acknowledged that the decrease is highest amongst a minority of educated Somalis and the Somali diaspora from Western countries or the Middle East, and in urban areas. In isolated rural areas, FGM/C rates are believed to

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21 United Nations Population Fund (UNFPA), ‘Puntland intensifies the fight against GBV’, 29 December 2014,  
date accessed 25 July 2016

date accessed 28 April 2016

23 UNICEF, ‘Eradication of female genital mutilation in Somalia’, undated,  
date accessed 28 April 2016
remain extremely high. There is a small number of riverine clans which do not carry out FGM/C.' 24 (page 41)

8.1.3 The HEART report also stated:

‘In study areas in Somaliland, Puntland and South Central the individuals that were said to carry out FGM/C were TBAs and women who worked only as cutters. Because of increasing medicalization of FGM/C, nurses, physicians and semi-skilled health professionals were also said to carry out FGM/C in health care settings and in house visits. When asked to carry out Sunnah FGM/C, some NGO health care providers only “pretend” to do so. They claim that, since the population is unfamiliar with the range of what normal genitalia may look like, they do not know that the girl has not been cut…Girls undergo FGM/C either individually or in groups and it is most frequently mentioned that the site of the procedure is in a home. In rural Somaliland and Puntland young girls undergo FGM/C in groups, especially during the xagaa season when the nomadic people remain in one area and do not move around…Once the girls have undergone FGM/C there may be a celebration hosted by all of the mothers. FGM/C is considered, in consultations in all of the zones, to be essentially a public milestone for girls and a time for celebration.’ 25 (page 73)

8.1.4 The HEART report also provided details of NGOs which are actively involved in anti-FGM campaigns in Somalia (see pages 32-38).

8.1.5 A ‘Guardian’ report, ‘Somalia enlists Irish FGM campaigner to rid country of practice’, dated 29 March 2016, stated:

‘Ifrah Ahmed, a former asylum seeker, will return to her home country of Somalia in April to help draw up a national FGM eradication programme.

‘This month [March 2016] Ahmed persuaded Prime Minister Omar Abdirashid Ali Sharmarke to add his signature to more than 1 million names calling on Somalia to make FGM illegal…The practice has been unconstitutional since 2012, but no bill has been passed to ban FGM outright.

‘At a meeting in Rome with Ahmed and representatives of her charity the Ifrah Foundation last week, Sharmarke also promised to enact FGM legislation at the next parliamentary session in April.

‘Sharmarke said he was “committed to outlaw female genital mutilation in Somalia through legislation, advocacy, education and community engagement.”’ 26

26 ‘The Guardian’, ‘Somalia enlists Irish FGM campaigner to rid country of practice’, 29 March 2016,
8.1.6 The United States State Department ‘Country Reports on Human Rights Practices for 2015’, published on 13 April 2016, stated:

‘Although the provisional federal constitution describes female circumcision as cruel and degrading, equates it with torture, and prohibits the circumcision of girls, FGM/C is almost universally practiced throughout the country. UNICEF reported that 98 percent of women and girls had undergone FGM/C and that the majority were subjected to infibulation—the most severe form—which involves cutting and sewing the genitalia. At least 80 percent of Somali girls who have undergone FGM/C had the procedure performed when they were between the ages of five and 14. International and local NGOs conducted education awareness programs on the dangers of FGM/C, but there were no reliable statistics to measure their success.’

8.2 FGM in Puntland

8.2.1 A Horseed Media report dated 11 March 2014 stated:

‘Puntland authorities have banned female genital mutilation (FGM) after years of controversial debate over the issue. Puntland’s newly elected President Abdiweli Mohamed Gas enacted the new law outlawing FGM … Female circumcision was banned from today, the 8th March 2014, and the law should be implemented accordingly,” Gas told local reporters in Garowe. The president’s signature on the FGM ban came as thousands of Somali women across the country were celebrating international Women’s Day by raising awareness of the horrors of the practice.

‘Puntland’s cabinet had earlier proposed the ban, but it was never taken to the parliament. Somalia’s federal constitution outlaws FGM, but it is believed that over 70 percent of women still undergo the painful genital mutilation.

‘Lul Jama Awnor, the director of Women Development Department at Puntland’s Ministry for Women and Family Affairs, said the ban meant the practice was on its way to being eradicated. “It’s a good step took towards empowering Somali women,” Awnor told Radio Ergo’s local reporter in Garowe.

‘Islamic scholars in Puntland have issued a religious fatwa banning FGM as it has no basic in Islamic studies. However, Radio Ergo’s Abdirahman Mohamed in Garowe said though the move is a very significant achievement in the fight for women’s empowerment, it will be hard for the local administration to translate the ban into action, as many families will continue the circumcision of girls that they consider as protection of girls’ chastity.’

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28 Horseed Media, ‘Somalia: Puntland bans Female Genital Mutilation (FGM)’, 11 March 2014,
8.2.2 A United Nations Population Fund (UNFPA) article, ‘Puntland intensifies the fight against GBV’, dated 29 December 2014, stated:

‘The Puntland State of Somalia is making headway in the fight against gender-based violence (GBV) as it intensifies efforts towards ending sexual violence, sexual assault and exploitation, female genital mutilation and early and forced marriages.

‘UNFPA Head of Puntland Field Office, Dr. Bakhtior Kadirov said a lot of action is going on to address GBV in the area. He said In November 2013, Puntland Islamic scholars declared a ‘Fatwa’ calling for a complete stop of all types of female genital mutilation, including Sunna type. "Just four months after the Fatwa against the practice of female genital mutilation was issued, His Excellency Abdiweli Mohamed Ali, the President of Puntland, enacted a new law banning female genital mutilation in March 2014," said Dr. Kadirov.’

8.3 FGM in Somaliland

8.3.1 A ‘Somaliland Press’ article, ‘Eradicating FGM in Somaliland One Midwife at a time’, dated 10 April 2015, stated:

‘It was 9 p.m when a little girl arrived in critical condition at the maternity teaching hospital in Hargeisa. She had been bleeding all day after undergoing female genital mutilation (FGM) that morning. “When she is brought to us, she is almost dead,” recalled Edna Adan Ismail, the founder of the hospital and a pioneer in the effort to eradicate FGM in Somaliland…In 2002, after working for the United Nations and World Health Organization for over 15 years, Ms. Adan, a nurse and midwife, opened the Edna Adan Maternity and Teaching Hospital in Hargeisa, Somaliland. Since 2006, the hospital has worked with UNFPA to develop and implement a midwifery curriculum. At Ms. Adan’s own insistence, no midwife or other health personnel can enrol in the training programme without first agreeing to work towards ending FGM…Ms. Adan instructs her staff to educate community members about the harms [sic] of FGM. This includes dispelling common misconceptions about FGM, such as the belief that it is a religious requirement…Ms. Adan also highlighted the need for FGM to be seen as community issue – one that involves a girl’s entire family, including the men.’

http://horseedmedia.net/2014/03/11/puntland-bans-fgm/, date accessed 11 May 2016


Version Control and Contacts

Contacts

If you have any questions about the guidance and your line manager or senior caseworker cannot help you or you think that the guidance has factual errors then email the Country Policy and Information Team.

If you notice any formatting errors in this guidance (broken links, spelling mistakes and so on) or have any comments about the layout or navigability of the guidance then you can email the Guidance, Rules and Forms Team.

Clearance

Below is information on when this version of the guidance was cleared:

- version 3.0
- valid from 2 August 2016

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Updated country information.