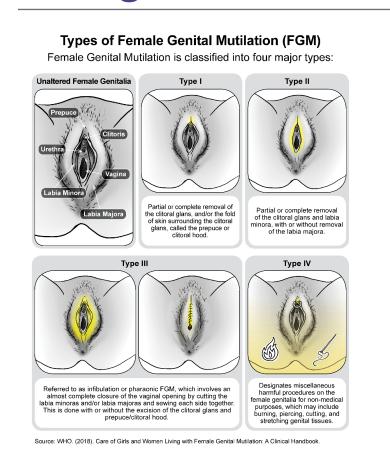
Economic Analysis of Female Genital Mutilation in the United States: Tangible and Intangible Costs

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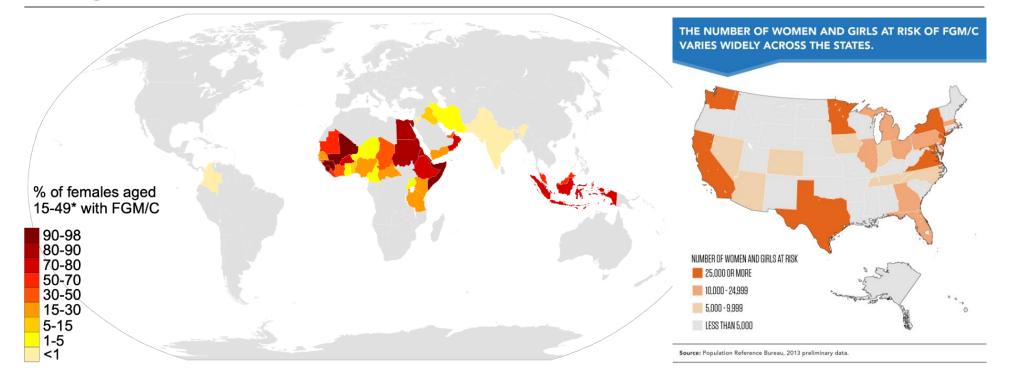
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Background



- FGM is defined as "partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons"1
- Over 200 million women affected worldwide
- Can result in acute and long-term complications negatively affecting female genital function and overall quality of life
- Chappell et al recently performed the first systematic scoping review on FGM, considering the physical and mental health related morbidity²

Fig. 1: Females with and at Risk of FGM



Demographic data showing prevalence of FGM/C in regions internationally and nationally

The Practice and Prevalence of FGM in the U.S.

- Girls in the U.S. are at highest risk if they are from a country and particular community where FGM is most prevalent
- Differing opinions on the practice of FGM: important to maintain first-generation child's identity, "bulwark against Western influence", opposed to practice but pressure from relatives, etc.³
- "Vacation cutting": immigrants, permanent residents and U.S. citizens sent abroad to undergo mutilation/cutting
- FGM Legislation
- 1996: U.S. Congress passed legislation criminalizing the practice of FGM within the U.S.
- Only 4 states have laws strict enough to criminalize "vacation cutting" (FL, GA, LA, NV)
- Anecdotal evidence suggests that FGM is however still performed illegally in the U.S.
- Women estimated to be at risk of FGM in the U.S. as of 2012:
- U.S.: 513,000⁴
- IL: > 6,400 (2000 data)

Aims of the Economic Analysis

- Primary aim:
 - 1. Determine the tangible and intangible costs to victims of FGM per person as well as to a healthcare system at large within the United States
- Secondary aims:
 - Bring attention to the economic burden of FGM within the United States
 - Inform policymakers and public health experts regarding the importance of robust and expanded legislation
 - Address, minimize, and abandon the practice of FGM in the United States

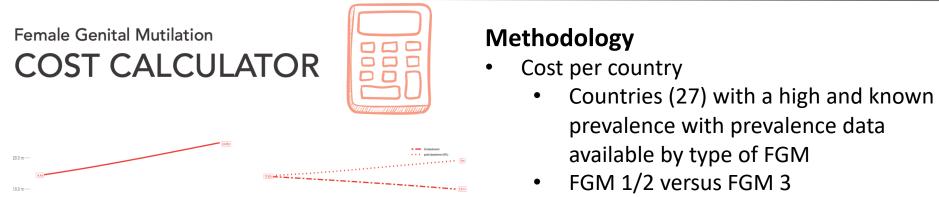
Medical Complications and Tangible/Intangible Costs³

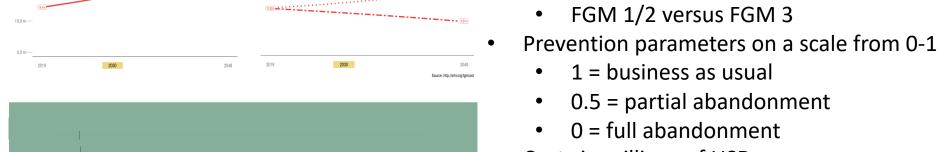
Medical Complications	
Short-term	Pain, hemorrhage, shock
	Difficulty in urination and defecation
	Infections including tetanus and sepsis
Long-term	Chronic pain, dermoid cysts, abscesses, keloids
	PID, UTIs, STIs
	Slow and painful menstruation/urination, hematocolpos
	Increased risk of HIV transmission (2/2 to \(\gamma\) risk of genital herpes and \(\gamma\) risk of bleeding during intercourse)
	C-section, episiotomy

Tangible/Intangible Costs	
Tangible	Medical Costs
	Loss of productivity
	Morbidity/mortality 2/2 physical and mental health outcomes
Intangible	The immeasurable psychological pain and suffering itself that these individuals face in the setting of
	stigmatization, trauma and external mutilation



Methods: WHO's FGM Cost Calculator⁵





 0 = full abandonment Costs in millions of USD

1 = business as usual

• 0.5 = partial abandonment

- Childhood, adulthood, reproductive, later in life
- Immediate, obstetric, psychological/sexual, uro-gynecological
- Dataset and full methodology to be shared upon upcoming publication
- Fails to directly address intangible costs

Next Steps

https://srhr.org/fgmcost/cost-calculator/

- Prevalence data per medical complications and unit costs per treatment of each medical complication
- Unit costs multiplied by "quantity of healthcare resources required to treat and manage complications of FGM" (WHO)
- Additional tangible costs estimated utilizing similar models (economic analyses of loss of productivity in sexual violence⁶)
- Intangible costs based on sexual violence models and qualitative analyses
- Aggregate costs per state and nationally (adjusted for inflation)

Limitations

- Identifying prevalence of an underreported practice
- Reporting prevalence in populations that immigrate to the U.S.
 - Estimating prevalence in immigrants from populations with unknown prevalence data
- Determining costs of specific health complications without direct surgical interventions
- Estimating the intangible costs of trauma and psychological harm

References

¹Classification of female genital mutilation, Geneva: World Health Organization, 2014

²Chappell et al. "Morbidity due to Female Genital Mutilation (FGM): A Scoping Review." *In review.* 2020.

³Sanctuary for Families. "Female Genital Mutilation in the United States: Protecting Girls and Women in the U.S. from FGM and Vacation Cutting." 2013. https://www.sanctuaryforfamilies.org/wp-content/uploads/sites/18/2015/07/FGM-Report-March-2013.pdf

⁴Goldberg, Howard et al. "Female Genital Mutilation/Cutting in the United States: Updated Estimates of Women and Girls at Risk, 2012." Public

health reports (Washington, D.C.: 1974) vol. 131,2 (2016): 340-7. ⁵World Health Organization, Human Reproduction Programme. "Female Genital Mutilation Cost Calculator." https://srhr.org/fgmcost/ ⁶Post et al. "The Rape Tax: Intangible and Intangible Costs of Sexual Violence." *Journal of Interpersonal Violence*. 2002; 17(7):773-782.