



Migrating with Special Needs? Projections of Flows of Migrant Women with Female Genital Mutilation/ Cutting Toward Europe 2016–2030

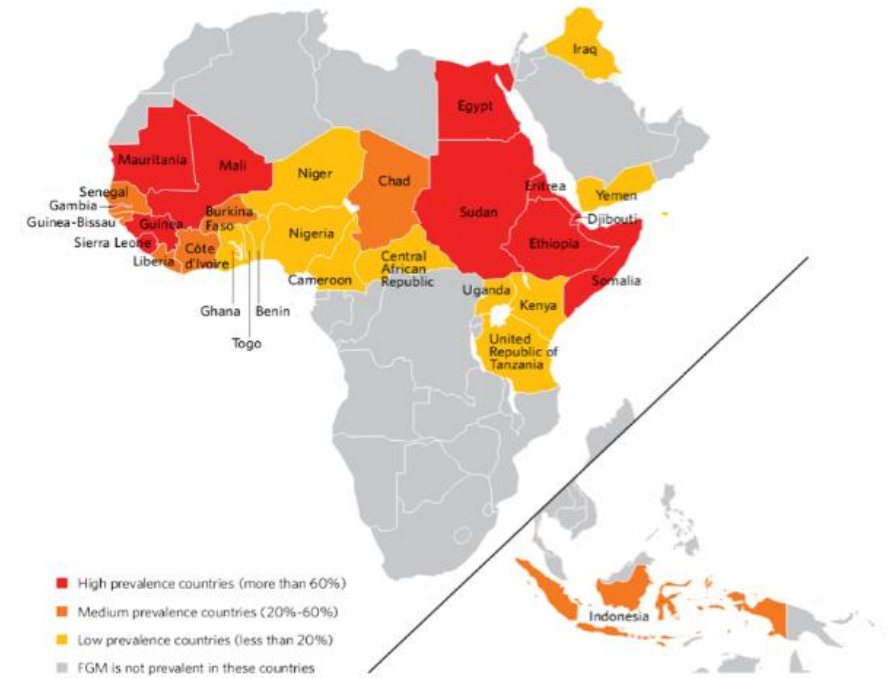
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Background

- **Female genital mutilation/cutting (FGM/C)** is a harmful traditional practice that includes all procedures that intentionally alter the female genital organs for nonmedical reasons (WHO 2008)
- It is internationally recognized as a **violation of the human rights** of children and women, and it is considered a form of gender-based violence and one of the many manifestations of gender inequality (EIGE 2013)
- The practice of FGM/C is highly concentrated across a vast geographical area of Africa that goes from the Atlantic coast to the Horn of Africa, in areas of the Middle East such as Iraq and Yemen and in some countries in Asia like Indonesia (UNICEF 2016)
- The most recent global estimate of the phenomenon based on evidences from large-scale representative surveys carried out in 30 countries hypothesizes that **at least 200 million girls and women** have been subjected to this practice (UNICEF 2016)



FGM/C & Migration (1)



- While migration from FGM/C practicing countries is overwhelmingly intracontinental, since the late 1980s **acceleration** and **diversification** of emigration flows beyond colonial patterns, especially from Africa to Europe and North America, led to the accidental consequence of the **practice spreading** in areas where it was previously unknown (Flahaux and De Haas 2016)
- EU member states have witnessed a constant **increase** in the number of women with FGM/C seeking health care, assistance, and asylum
- The European Parliament (2014) called for a particular attention to the estimation of the number of women affected in Europe and of the number of children potentially at risk

FGM/C & Migration (2)



- A recent census-based indirect estimation hypothesized the presence of slightly more than **550,000 first generation migrant women and girls aged 10 years and above with FGM/C in the EU28** countries, most of them living in UK, France, and Italy (Van Baelen et al. 2016)
- Many projects on the study of FGM/C outside practicing countries are currently focused on methodological issues related to indirect estimation of prevalence, (indirect) risk estimation for girls, direct estimation
- Projection of future flows are overlooked in this framework: projection of **future migration flows** of women with FGM/C toward Europe is a strategic aspect to plan medium-term resource allocation and to engage in the formation of new skilled medical professionals

The theoretical framework for projections on future flows of women with FGM/C (1)



1) Demographic Perspectives on FGM/C Practicing Countries:

- UNICEF (2014) forecasts that by 2050 nearly 1 in 3 births worldwide will occur in a FGM/C practicing country, while nearly 500 million more girls and women will be living in these same countries than there are today (Indonesia is not considered in this count).

2) Potential Migration Flows

- Among the many drivers of migration from Africa, one of the most important is in fact the **mismatch between the rapid population growth and the capacity to create employment** for young people in their country of origin
- Africa's 15–24-year-old population has been increasing faster than in any other part of the world driven by a delayed demographic transition (PRB 2009;
- Despite 15 years of sustained economic growth, the increase in private sector job numbers is not enough to absorb the large number of African young people entering the labor market each year (McArthur 2014)

The theoretical framework for projections on future flows of women with FGM/C (2)



2) Potential Migration Flows (continued)

- the conventional wisdom that African economic growth and development in the coming years will curb migration is also a questionable one (Clemens 2014).
- The 'migration hump': literature has extensively shown that the process of social and **economic development** in its broadest sense **tends to be associated with generally higher levels of mobility and more migration at least in the short to medium term** until countries reach upper-middle income, and only thereafter falls (De Haas 2010).

3) Female migration rising

- The proportion of women among migrants from African FGM/C countries is increasing (Lucas 2006)
- This trend represents a departure from the typical historically male-dominated African migration model (Adepoju 2011). In addition to family reunification flows, independent female migration has been growing (Yaro 2008; Cross et al. 2006; Thomas and Logan 2012; Fleury 2016).

The theoretical framework for projections on future flows of women with FGM/C (3)



- Young population
 - Unemployment
 - Economic Development & Migration hump
 - Female migration
- in FGM/C practicing countries**



Potential new flows of women with FGM/C towards EU28

Most European qualitative and quantitative studies show a gradual distancing from the practice and a change in attitudes toward it in many communities, implying a dramatically lower risk for second generations than what would be expected in their parents' home countries (Johnsdotter et al. 2009).

Most of the growth in the number of women affected in the future will be the consequence of new arriving migrants from practicing countries.

Data, Hypotheses, and Methods (1)

Data:

Estimation of incoming female flows from practicing countries to EU member states: **KING**—Knowledge for INtegration Governance project (Gilardoni et al. 2015) co-founded by the European Commission—DG Home Affairs and aimed at gathering knowledge on migrant integration throughout the European Union

Prevalence of FGM/C in practicing countries: most recent available publications based on DHS, MICS and similar household surveys

Age structure of migrant flows from FGM/C practicing countries: Eurostat database



Data, Hypotheses, and Methods (2)

Assumptions:

1) *Assumptions on evolution of female migration flows (KING data)*

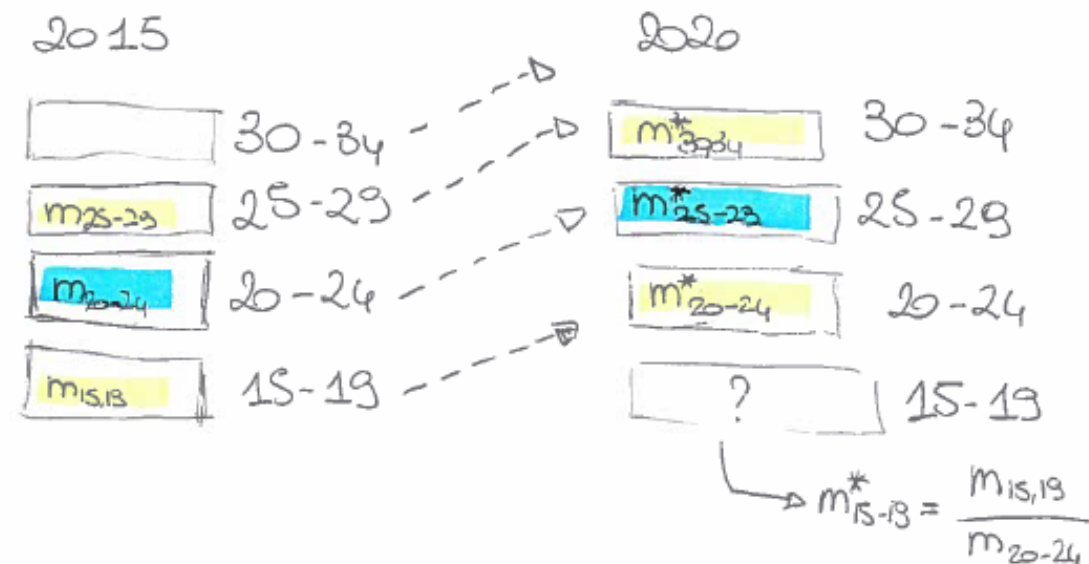
- Combination of demography-driven projections of the working-age population and of job market related push factors in the sending countries. Demographic-driven projections allow for relatively valid evaluations of future developments for a period of one to two decades (Fassmann 2014).
- Evaluation of a surplus/deficit matrix in each country used to estimate an **origin/destination matrix** of flows for work addressed to each EU country, and combining it with appropriate assumptions about their effects in terms of family reunification (Blangiardo 2014).
- To determine the proportion of migrants who are expected to migrate in each EU28 country, a **coefficient of attraction** has been computed for each country of origin and each country of destination. By definition, countries showing a deficit in labor force receive a null coefficient of attraction toward any immigration country. This means that inflows observed between 2001 and 2010 from countries with a deficit in labor force were due to factors other than structural labor surplus.
- These projections do not account for future flows related to humanitarian reasons.

Data, Hypotheses, and Methods (3)

2) Assumptions on future prevalence of FGM/C in practicing countries and among migrants

a) The estimation of the occurrence of FGM/C in each age class for women aged 15 and over, for each practicing country in each period.

The procedure is similar to the cohort component method for population projections and is used to obtain an updated prevalence rate age structure for a given year of interest



Data, Hypotheses, and Methods (4)

b) Exposure Analysis to FGM/C for Girls Aged 0–14

- The assumption underlying this method is that girls are exposed to the risk of cutting typical in their country of origin as long as they are settled in the country of origin, while the risk may change at emigration
- The updated prevalence for girls aged 15-19 is the final proportion of girls who will be expected to be cut at age 15 (following the proposal of Yoder et al. 2013)

example

age	gx
15-19	100%
10-14	99%
5-9	20%
0-4	5%

Then:

$$m_{x,x+4}^* = \left(\frac{g_x + g_{x+4}}{2} \right) (m_{15,19}^*) \quad (2)$$

will be the estimated prevalence of girls with FGM/C aged $x, x + 4$ (with $x = 0; 5; 10$) at the moment of migration.

Data, Hypotheses, and Methods (5)

c) Estimation of the Age Structure of Female Migrants

- It is quite difficult to build reliable assumptions concerning future emigration profiles (Fassmann 2014), we have considered a valid and purposeful approach to transfer recent observations of age-specific emigration profiles to future flows.
- This approach seems justified since empirical profiles of age-specific migration display remarkably persisting regularities (Rogers and Castro 1981). The most prominent regularity in age-specific profiles of migration is the high concentration of migration among young adults, with high rates also among children (Raymer and Rogers 2008).
- We therefore assumed, as the best approximation we could get from the available data, that female migration flows will have the same 5-year age structure as flows of African born women plus Indonesia and Iraq toward EU28 member states in the 5-year period 2000–2012. This structure can be computed starting from the most recent Eurostat data (Eurostat 2017).

Implementation of the Selection Hypothesis (1)



- Evidence from FGM/C practicing countries indicates that some individual characteristics such as belonging to younger age cohorts, having higher levels of wealth and education, or urban residence are usually correlated with a lower occurrence of FGM/C (UNICEF 2013).
- At the same time, many studies have shown that **migrants are not a random cross section of the populations from which they originate**. The recent surge in studies on contemporary African migration has confirmed the existence of mechanisms of positive selection in international flows from Africa (Shaw 2007; Wouterse and van den Berg 2011; Schoumaker et al. 2015).
- According to De Haas (2008b:1308) *“although commonly portrayed as destitute or desperate, [African] migrants are often relatively well educated and from reasonably well-off backgrounds, not least because of the relatively high costs of the journey.”* This concept was also re-marked in a more recent analysis of migration from Africa by Flahaux and De Haas (2016). Also for the subgroup of African female migrants, correlations between migration and good levels of education, middle class status, and a young age have been observed (Jamie 2013; IMI and RMMS 2012; Thomas and Logan 2012; Reynolds 2006; Spadavecchia 2013).

Implementation of the Selection Hypothesis (2)



- The selection hypothesis has been used already to correct the indirect estimation of FGM/C prevalence in the Italian context, and the comparison with direct estimations for some communities confirmed that this correction has the potential to reduce the bias deriving from the application of national estimate to overseas communities (Ortensi et al. 2015). The use of this correction appears particularly suitable for our study, which focuses on first-generation migrant flows related to demographic and economic push factors.

So for each practicing country i , we computed the correction

$$s_i = \text{mean} \left(\frac{m_{urb,i}}{m_i}, \frac{m_{hedu,i}}{m_i}, \frac{m_{hw,i}}{m_i} \right)$$

according to the most recent DHS/MICS/PHS/HHS data available

Estimation of the Number of Girls at Risk

- In our study, we adopt EIGE’s “FGM/C risk estimation in an EU member state” definition, identifying “girls living in an EU Member State who might actually be at risk of female genital mutilation, expressed as a proportion of the total number of girls (in the age range of 0–17) who come from FGM/C practicing countries, or were born to parents (or one parent) who originate from these same countries” (EIGE 2015: 30).
- To estimate the number of girls at risk of FGM/C, we considered the difference between the number of actually expected cut girls by the end of the typical age for cutting if they remained in their country and the number of girls who, according to typical age pattern for cutting, are expected to be already cut at migration.

To sum up the total number of girls at risk of FGM/C $R_{0,14}^i$ from each practicing country i is given by:

$$R_{0,14}^i = \left(P_{0,14}^i \right) \left(m_{15,19}^{i*} \right) - \sum_{x=0,5,10} \left(P_{x,x+4}^i \right) \left(m_{x,x+4}^{i*} \right)$$

With $P_{0,14}^i$ being the overall flow of girls aged 0–14 from practicing country i , $P_{x,x+4}^i$ being the flow of girls aged $x, x + 4$ from practicing country i and $m_{x,x+4}^{i*}$ being the estimated prevalence of girls with FGM/C aged $x, x + 4$ $\sum_{x=0,5,10} \left(P_{x,x+4}^i \right) \left(m_{x,x+4}^{i*} \right)$ is the number of girls already cut at the moment of migration. The corrected estimation of this subpopulation according to the selection hypothesis is given by:

$$R_{0,14}^{(S),i} = \left(R_{0,14}^i \right) s_i$$

Strengths & Limitations

- This study shares most of the limitations of population projections on migration. On the positive side, data on future flows used for this study consider a limited period of time (15 years), while projection experts recognize that uncertainty increases substantially beyond 30–40 years (O’Neill et al. 2001).
- Moreover, the relation between youth bulge, labor surplus, and migration flows has solid theoretical and empirical bases (Fargues 2011; Martin 2009).
- no methods exist to predict sudden migrations generated by political, economic, or environmental crises whose additional effects are not considered in this study (PRB 2001).
- The assumptions of this study are trend-based. We speculate, according to UNFPA (2015) FGM/C abandonment targets, that trends observed today in young generations will continue in the future. However, we are aware that when the greater part of the local community formerly practicing FGM/C is persuaded to abandon the practice, a “tipping point” is reached and the abandonment becomes faster and permanent (Mackie and LeJeune 2009). On the other hand, political unrests and instability may pose serious threat to the consolidation of results on FGM/C prevention as seen recently, for example, in Egypt (Mukherjee 2014; Orchid Project 2012).
- The projections presented in this paper only consider structural job market related push factors. However, additional asylum-related flows will presumably add to projected flows as FGM/C practicing countries, and former countries of mass immigration from practicing countries (such as Libya), are currently deeply affected by political instability, human rights abuse, terrorism, and conflicts. In this sense, these projections can be considered as a minimum, as humanitarian migration flows are also potentially deeply affected by FGM/C.

Results

Expected flows of women with FGM/C towards EU28 countries.

	2016-2020		2021-2025		2026-2030		Total	
Total Flows	408,300		459,300		508,600		1,376,000	
	Selection Hypothesis	Baseline hypothesis	Selection Hypothesis	Baseline hypothesis	Selection Hypothesis	Baseline hypothesis	Selection Hypothesis	Baseline hypothesis
Flows of women with FGM/C	127,500	137,200	137,500	147,700	145,600	156,200	410,600	441,100
% of women with FGM/C	31.2	33.6	29.9	32.2	28.6	30.7	29.8	32.1
Top 5 receiving countries	France		France		France		France	
	21,900	25,000	24,400	27,800	27,100	30,600	73,400	83,400
	Italy		Spain		Spain		Spain	
	20,900	22,700	22,900	24,200	25,400	26,800	69,000	72,800
	Spain		Italy		Italy		Italy	
	20,600	21,700	21,100	24,100	22,800	24,900	65,700	71,700
	United Kingdom		United Kingdom		United Kingdom		United Kingdom	
	17,000	17,500	17,500	18,100	17,800	17,600	52,300	54,000
Top 5 sending countries	Sweden		Sweden		Sweden		Sweden	
	13,700	14,300	15,400	16,200	16,900	17,600	46,000	48,100
	Somalia		Somalia		Somalia		Somalia	
	16,900	17,100	19,900	20,200	22,600	22,900	59,400	60,200
	Nigeria		Nigeria		Mali		Nigeria	
	16,900	13,600	16,700	13,400	18,400	18,300	49,900	40,100
	Egypt		Mali		Nigeria		Mali	
	12,800	13,600	15,500	15,400	16,300	13,100	46,900	46,700
Mali		Egypt		Egypt		Egypt		
13,000	12,900	13,600	14,500	14,000	14,900	40,400	43,000	
Guinea		Guinea		Guinea		Guinea		
11,100	11,500	12,300	12,700	13,500	13,900	37,000	38,100	

Main corridors of flows of women with FGM/C towards EU28 countries. 2016-2020 and 2016-2030*.

Main corridors	Expected flow 2016-2020		Expected flow 2016-2030	
	Selection hyp.	Baseline est.	Selection hyp.	Baseline est.
Somalia - Sweden	9,000	9,100	31,600	32,000
Mali - France	7,700	7,600	27,700	27,600
Egypt - Italy	6,200	6,600	19,600	20,900
Nigeria -UK	6,200	5,000	18,300	14,800
Mali - Spain	4,600	4,600	16,700	16,600
Gambia - Spain	3,500	3,600	12,400	13,000
Guinea - France	3,500	3,600	11,600	12,000
Cote d'Ivoire - France	3,000	4,400	9,100	13,300
Guinea - Spain	3,400	3,500	11,200	11,500
Senegal - Italy	2,700	3,400	9,200	11,300
Senegal - France	2,700	3,000	9,100	11,100
Senegal - Spain	2,500	3,000	8,300	10,200
Nigeria - Spain	3,300	2,700	9,800	7,900
Somalia - UK	2,400	2,500	8,700	8,900
Guinea - Belgium	2,300	2,400	7,600	7,900

**Relative importance of the first three communities on the total number of expected migrant women projected.
Main EU28 receiver countries 2016-2020***

Country	First		Second		Third		Proportion of the main 3 communities
Malta	Somalia	79.9	Eritrea	9.3	Mali	3.9	93.1
Greece	Egypt	49.0	Ethiopia	21.7	Nigeria	14.3	85.0
Ireland	Nigeria	41.8	Somalia	29.1	Sudan	12.6	83.5
Cyprus	Egypt	51.3	Ethiopia	16.3	Indonesia	15.3	82.9
Hungary	Nigeria	50.4	Egypt	24.9	Ethiopia	5.7	81.0
Sweden	Somalia	62.6	Eritrea	11.1	Iraq	6.3	80.0
Finland	Somalia	68.7	Sudan	5.6	Ethiopia	5.4	79.7
Portugal	Egypt	29.2	Indonesia	25.0	Ethiopia	12.3	66.5
Denmark	Somalia	51.4	Ethiopia	6.5	Sudan	5.6	63.5
Slovakia	Indonesia	22.7	Sudan	22.0	Egypt	16.3	61.0
United Kingdom	Nigeria	35.2	Somalia	14.2	Sierra Leone	10.5	59.6
Austria	Nigeria	29.3	Egypt	17.2	Somalia	10.7	57.2
Netherlands	Indonesia	33.8	Ethiopia	12.8	Egypt	10.5	57.1
France	Mali	30.6	Guinea	14.0	Ivory Coast	11.8	56.4
Spain	Mali	21.2	Gambia	16.0	Guinea	15.5	52.7
Belgium	Guinea	38.3	Nigeria	6.9	Somalia	5.5	50.7
Italy	Egypt	27.2	Senegal	12.0	Nigeria	10.9	50.1
Poland	Indonesia	17.3	Ethiopia	15.3	Somalia	13.7	46.3
Czech Republic	Egypt	17.1	Nigeria	16.9	Indonesia	12.1	46.1
Luxembourg	Nigeria	17.3	Guinea	15.3	Gambia	9.1	41.7
Germany	Egypt	12.4	Nigeria	11.8	Indonesia	10.1	34.3

Flows of girls aged 0-14 estimated to be cut or at risk of FGM/C by EU28 country, 2016-2020 and 2016-2030

	2016-2020					2016-2030				
	Total flows	With FGM/C at migration		At risk after migration		Total flows	With FGM/C at migration		At risk after migration	
		Selection hyp.	baseline est.	Selection hyp.	baseline est.		Selection hyp.	baseline est.	Selection hyp.	baseline est.
Austria	2,100	500	500	200	200	7,300	1,500	1,500	700	700
Belgium	4,200	800	900	400	400	14,300	2,600	2,800	1,100	1,200
Bulgaria	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10
Croatia	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10
Cyprus	<100	<10	<50	<10	<10	200	<50	<50	<50	<50
Czech Rep.	200	<50	<50	<100	<100	500	<100	<100	<100	<100
Denmark	1,000	200	200	<100	<100	3,200	700	800	300	300
Estonia	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10
Finland	800	300	300	100	100	2,800	900	1,000	400	400
France	17,400	3,700	4,200	1,100	1,200	59,300	12,500	13,900	3,500	4,000
Germany	12,200	1,800	1,900	700	800	40,500	5,400	5,700	2,200	2,500
Greece	1,100	300	300	200	200	3,500	800	900	500	600
Hungary	100	<50	<50	<50	<50	500	<50	<50	<50	<50
Ireland	600	100	100	<100	<100	2,100	400	400	200	200
Italy	14,000	3,000	3,300	1,300	1,400	47,000	9,200	10,000	4,100	4,500
Latvia	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10
Lithuania	<10	<10	<10	<10	<10	<50	<10	<10	<10	<10
Luxembourg	200	<50	<50	<10	<10	600	100	100	<50	<50
Malta	100	<100	<100	<50	<50	400	200	200	100	100
Netherlands	2,200	500	500	100	200	7,000	1,300	1,300	400	500
Poland	<50	<10	<10	<10	<10	100	<50	<50	<10	<10
Portugal	<100	<50	<50	<50	<50	300	<100	<100	<50	<50
Romania	<10	<10	<10	<10	<10	<50	<10	<10	<10	<10
Slovakia	<50	<10	<10	<10	<10	<100	<50	<50	<50	<50
Slovenia	<50	<10	<10	<10	<10	<50	<10	<10	<10	<10
Spain	12,400	3,500	3,700	900	1,000	42,500	11,700	12,400	3,000	3,200
Sweden	8,200	2,200	2,300	800	900	27,700	7,300	7,600	2,700	2,800
UK	14,900	2,300	2,300	800	900	50,500	6,700	6,700	2,400	2,600
Total	92,000	19,400	20,700	6,900	7,500	310,500	61,600	65,700	21,900	23,800



Conclusions

- Results suggest that the issue will gain even **more importance in Europe** in the coming years due to the sizeable inflows of women with FGM/C and of girls moving in the typical age bracket for cutting that are expected as the consequence of demographic and job market-related push factors in FGM/C practicing countries.
- The EU28 area will receive a flow of around 400,000 female migrants from FGM/C practicing countries between 2016 and 2020, and of around 1.3 million between 2016 and 2030. About one-third of them, corresponding to an estimated 127,000 women between 2016 and 2020, and to more than 400,000 women between 2016 and 2030 will have undergone FGM/C before migration. Such sizeable flows of women are expected to determine a considerable growth in the number of women with FGM/C settled in Europe.
- The number of incoming girls aged 0–14 at the time of migration is expected to be around 92,000 between 2016 and 2020 and around 310,000 between 2016 and 2030.
- Future flows are expected to be strongly geographically selective. They will involve mainly France, Italy, Spain, the UK, and Sweden while leaving Eastern Europe largely unaffected.

Thank you for your attention!



More details in:

Ortensi, L.E. & Menonna, A. (2017). *Migrating with Special Needs? Projections of Flows of Migrant Women with Female Genital Mutilation/Cutting Toward Europe 2016–2030*. Eur J Population, Volume 33, Issue 4, pp 559–583