

## Testimony Before the Maryland Senate Finance Committee

### Regarding SB907: Public Health - Female Genital Mutilation Legislation

**Date:** March 6, 2026

**Submitted by:** Mariya Taher, Co-Founder and Executive Director, Sahiyo

Dear Chair Senator Beidle, Vice-Chair Senator Hayes, and esteemed members of the Senate Finance Committee,

My name is Mariya Taher, and I am the Co-Founder and Executive Director of [Sahiyo](#), an organization dedicated to empowering survivors and advocates to end female genital mutilation/cutting (FGM/C). I also helped form the [DMV Coalition to End FGM/C](#), a coalition who has been advocating for stronger policy solutions to address FGM/C for years. And I am a survivor of FGM/C who is writing to express Sahiyo's and my unwavering support for [SB907](#), a critical piece of legislation that updates and strengthens Maryland's existing law to address a severe public health crisis and human rights violation within our communities.

FGM/C is a form of gender-based violence that inflicts lifelong harm on girls and women. It is a profound public health issue, resulting in a host of physical and psychological complications, including chronic pain, recurrent infections, childbirth complications, PTSD, and severe emotional trauma. While this bill directly addresses public health and human rights, we urge you, as the Finance Committee, to also consider the long-term financial implications. The recurrent and chronic health issues resulting from FGM/C create an unnecessary, preventable burden on Maryland's healthcare and social services budgets.

A common misconception is that FGM/C only affects communities in other countries. My own story, and the stories collected from over 80 survivors for Sahiyo's [Voices to End FGM/C](#) project, dispel this myth. I was born in the U.S. and underwent FGM/C on a family trip to India. In the years following, family and friends of mine underwent the procedure here on U.S. soil. The 2017 Federal Michigan case is another clear example of FGM/C occurring domestically. It is important to recognize that FGM/C is not a new occurrence in the U.S. Up until the 1960s, a form of FGM/C called clitoridectomy was even recommended in medical books to treat women for "hysteria" or "mental illness." FGM/C does not discriminate; it affects girls across all backgrounds. The CDC has estimated that half a million women and girls in the U.S. have undergone or are at risk of undergoing FGM/C.

This legislation is essential for several key reasons:

- **Strengthening Legal Protection for Minors:** Maryland was an early leader in criminalizing FGM/C, and SB907 ensures that the law remains effective and aligned with best practices nationwide. This is not a symbolic revision; it is a practical, necessary modernization.
- **Support for Survivors and Fiscal Responsibility:** It opens the door to creating necessary resources for survivors, including specialized healthcare, counseling services, and

community-based support. Investing in prevention and support services now is a fiscally responsible measure that reduces the higher, recurring costs of emergency care and chronic health management later. Legislation is a crucial first step in acknowledging the harm and providing a pathway to healing.

- **Empowering Enforcement and Prevention:** A clear, modern state law is vital to ensure that medical professionals, social workers, educators, and law enforcement agencies are equipped with the legal framework to identify, prevent, and respond to FGM/C cases effectively. Prevention depends on early identification, culturally informed education and outreach, and a coordinated response.

Passing **SB907** is a decisive step toward preventing this violence and ensuring that all young girls in Maryland are protected from this form of gender-based violence.

Thank you again for considering my testimony in your decision regarding the passage of SB907, Public Health Female Genital Mutilation. If you need additional follow-up information, please do not hesitate to reach me at [mariya@sahiyo.org](mailto:mariya@sahiyo.org) or by phone at 661-496-6976.

Sincerely,

Mariya Taher, MSW, MFA