

FEMALE GENITAL MUTILATION

REPORT TO THE LEGISLATIVE RESEARCH COMMISSION

Department for Community Based Services
Cabinet for Health and Family Services
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Introduction

In accordance with Kentucky Revised Statute (KRS) 620.032, the Cabinet for Health and Family Services (cabinet/CHFS) is required to submit an annual report to the Legislative Research Commission (LRC) outlining the cabinet's response to reports of female genital mutilation (FGM). This report details the cabinet's efforts to ensure the safety of child survivors of FGM and the cabinet's collaboration with multiple agencies during investigations. The report provides available statistics and data regarding the number of reports received involving an alleged child survivor of FGM, investigative determinations, and services provided.

Section I: DCBS Female Genital Mutilation Program Overview & Implementation

During the 2020 legislative session, Senate Bill (SB) 72 amended KRS 600.020 to include FGM in the definition of an abused or neglected child and to require that if "any person knows or has reasonable cause to believe that a child is dependent, neglected, or abused shall immediately make a report to the appropriate authorities" (KRS 620.030). As a result, the Department for Community Based Services (department/DCBS) amended Kentucky Administrative Regulations (KAR); and developed and implemented policy and procedures concerning reports of FGM. Additionally, any investigation of FGM is to be conducted with the assistance of law enforcement.

The department's child welfare database, The Worker's Information SysTem (TWIST), was updated to capture an individual's status as a survivor of FGM and physical abuse. Revisions were made to the investigative and assessment tools to include FGM. The DCBS Division of Protection and Permanency (DPP), Child Protection Branch receives notification of all reports that are indicated as having allegations of FGM for tracking and monitoring purposes. Prior to 2025, the reporting period for each legislative report is October 1st through September 30th. In 2025, the report period for the legislative report was changed to July 1st through June 30th to follow the state fiscal year (SFY). All data has been accurately retained and accounted for, despite the change in the reporting period.

SECTION II: Female Genital Mutilation Investigations in Kentucky

As previously noted, the 2025 reporting period was changed from October 1st, 2024, through September 30th, 2025, to SFY 2025. Due to this change one report is counted in both the 2024 and 2025 annual report.

During the 2025 reporting period, five reports of FGM were received concerning five different children. Four reports received concerned allegations against a caretaker, and one report concerned allegations against a non-caretaker. All five reports had a finding of unsubstantiated/FGM not confirmed.

The Two Rivers Service Region received two reports; the Jefferson Service Region received one report; the Southern Bluegrass Service Region received one report; and the Northeastern Service Region received one report. Four of the five children were in their home of origin when the allegations were received, and one was in a relative/fictive kin placement. None of the five children were removed because of these allegations. Three children had a forensic interview conducted at their local child advocacy center and two did not due to their age and speech development. The department engaged law enforcement in all the investigations. No criminal charges were filed in any of the five investigations. One child was referred to mental health services. No subsequent reports of FGM have been received concerning any of these children.

SECTION III: CONCLUSION

DCBS representatives continue to collaborate with community providers to ensure that FGM survivors receive trauma-informed care and other supportive services to address their needs. Community partners include pediatric forensic medicine (PFM), local child advocacy centers, and mental health professionals, among others. This list is not exhaustive, as many additional collaborators contribute to the department's efforts to support survivors in a trauma-informed approach. In addition, staff from the Child Protection Branch consult with field staff, as needed, to provide guidance and technical assistance during the assessment or investigative process. Children's Advocacy Center services are accessed as appropriate, based on the child's age, developmental level, and best interest, with determinations made in consultation with the Family Services Office Supervisor (FSOS) and/or regional office. Law enforcement is notified of every investigation regarding FGM.

Attachment A: DCBS Service Regions Map

DCBS Service Regions

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