

1. What is FGM? is defined as a procedure that involves the partial or total removal of the external female genitalia, or other injury to the female genital organs, for non-medical reasons. It is nearly always carried out without consent. Female Genital Mutilation is an offence in the UK, under the Female Genital Mutilation Act 2003. It is not an offence for a registered medical practitioner to perform a surgical operation on a patient which is necessary for her physical/mental health (due to the abnormality).

Safeguarding: 7 Minute Briefing Feb 2022

FEMALE GENITAL MUTILATION (FGM)



7. Contact Information:

[Local Kirklees resources including Adult and Child FGM Pathways](#)

Karma Nirvana Helpline – UK Based supporting people for honour-based abuse 0800 5999 247

<https://karmanirvana.org.uk/>

[NSPCC UK Helpline on Female Genital Mutilation:](#) operates a helpline, specializing in responses to FGM. It is a UK-wide service and operates 24/7 and is staffed by specially trained child protection helpline counsellors who can offer advice, information. The helpline can be contacted on **0800 028 3550** or fgmhelp@nspcc.org.uk

[The National FGM centre](#) is also an excellent resource website.

6. Good Practice:

The GP ensured the patient took their time to consider the surgery to make sure this is what they wanted.

There was clear documentation that the risks of the procedure were discussed in the gynaecology clinic.

There was written documentation that a chaperone was used when the procedure was carried out.

2. Case Study 1

A 16-year-old patient discussed with her GP to be referred to Gynaecology for consideration of surgery to her right labia. Following careful consideration, she returned a year later asking again to be referred. Gynaecology clinic undertook the procedure to trim the right labia without complication. The patient did not attend her 3 months follow up appointment. 4 years later the patient attended her GP still expressing concern about the appearance of her labia. The patient was referred and seen in the Gynaecology Clinic, where a full discussion took place regarding the previous procedure, the mental health implications and psychological factors influencing her decisions when she was 17.



5. Learning Points:

Psychological, emotional factors and safeguarding concerns should be fully explored for procedures affecting genitalia. Must ensure mandatory, legal, and professional considerations for FGM have been looked at and met.

Consider factors affecting decision making in giving consent including potential coercion. Also, [Gillick competence](#) if under 18.

Ensure you are up to date with your safeguarding Training relevant to your role including FGM training.

3. Review

A review raised questions whether the procedure was undertaken without full discussion and exploration of all psychological factors. This included safeguarding concerns noting the patient was under 18. It was found that there were no coercive factors in the patient's decision making and there had been discussions with the patient to inform her consent, and that the procedure met the definitions of Female Genital Cosmetic Surgery and was not Female Genital Mutilation (FGM).

Consent, capacity and Safeguarding decision making was not documented in the records regarding consultations when under 16. This is not best practice

4. Further Information:

"Royal College of Obstetricians and Gynaecologists Ethical Opinion Paper – Ethical considerations in relation to female genital cosmetic surgery (FGCS)" [RCOG ethical opinion paper](#)