

Female Genital Mutilation – FGM

Female genital mutilation (FGM) is cultural (not religious) practice, with serious health consequences for women, that is still practiced in 28 countries with approximately 2 million girls exposed to the practice annually. The complications of FGM cause suffering to the woman all her life. Pregnancy, childbirth and the postpartum period are of particular concern as there is increased risk of mortality and morbidity from FGM complications. FGM describes any deliberate, non-medical removal of female genitalia. Different countries and communities practice various forms of mutilation.



FGM has been illegal in the UK for nearly 30 years and carries a 14-year jail sentence for those found guilty of this crime, which is an abuse of human rights. This barbaric practice is often performed with razor blades or pieces of broken glass and without anaesthetic. The average age is between 4 and 12 years old.

FGM and male circumcision The most important difference is that FGM impedes the natural functioning of the female body in ways that male circumcision does not. Use of the term 'circumcision' implies that it is the female equivalent of male circumcision, but this masks the magnitude of the practice and suggests that it is far less severe than is the case. Type III in particular has far-reaching consequences for a woman throughout her life, and in particular in childbirth.



Childbirth In childbirth the tissue of the vagina stretches to accommodate the baby's head and shoulders. This is how nature intended things to happen. However, if much or all of this tissue is cut away, especially with Type III FGM (see overleaf), there is nothing to stretch and so serious difficulties, including extensive tearing and ripping are the result. With significant risks of haemorrhage for the mother, FGM will often lead to the increased risk of death or the need for resuscitation of the baby. In addition, a women with Type III FGM is at increased risk of traumatic fistula from having her genitalia cut open during labour to allow the birth of the baby.

The range of health complications associated with FGM is wide and some are severely disabling. They vary according to the type of procedure performed, extent of cutting, skill of the excisor, cleanliness of the tools and the environment and the physical condition of the girl or woman concerned.

Short-term Health Complications:

- Severe pain and shock
- Bleeding
- Infection
- Urine retention
- Injury to adjacent tissue
- Immediate fatal haemorrhaging
- Death

Long-term health Complications:

- Extensive damage of the external reproductive system
- Difficulties in menstruation
- Increased risk of vesico vaginal fistula or recto-vaginal fistula
- Complications in pregnancy and child birth
- Sexual dysfunction
- Psychological damage

For more information visit the Soroptimist UKPAC website www.ukpac.org.uk/about/show/347

Female Genital Mutilation – FGM

Female genital mutilation (FGM) is cultural (not religious) practice, with serious health consequences for women, that is still practiced in 28 countries with approximately 2 million girls exposed to the practice annually. The complications of FGM cause suffering to the woman all her life. Pregnancy, childbirth and the postpartum period are of particular concern as there is increased risk of mortality and morbidity from FGM complications. FGM describes any deliberate, non-medical removal of female genitalia. Different countries and communities practice various forms of mutilation.



FGM has been illegal in the UK for nearly 30 years and carries a 14-year jail sentence for those found guilty of this crime, which is an abuse of human rights. This barbaric practice is often performed with razor blades or pieces of broken glass and without anaesthetic. The average age is between 4 and 12 years old.

FGM and male circumcision The most important difference is that FGM impedes the natural functioning of the female body in ways that male circumcision does not. Use of the term 'circumcision' implies that it is the female equivalent of male circumcision, but this masks the magnitude of the practice and suggests that it is far less severe than is the case. Type III in particular has far-reaching consequences for a woman throughout her life, and in particular in childbirth.



Childbirth In childbirth the tissue of the vagina stretches to accommodate the baby's head and shoulders. This is how nature intended things to happen. However, if much or all of this tissue is cut away, especially with Type III FGM (see overleaf), there is nothing to stretch and so serious difficulties, including extensive tearing and ripping are the result. With significant risks of haemorrhage for the mother, FGM will often lead to the increased risk of death or the need for resuscitation of the baby. In addition, a women with Type III FGM is at increased risk of traumatic fistula from having her genitalia cut open during labour to allow the birth of the baby.

The range of health complications associated with FGM is wide and some are severely disabling. They vary according to the type of procedure performed, extent of cutting, skill of the excisor, cleanliness of the tools and the environment and the physical condition of the girl or woman concerned.

Short-term Health Complications:

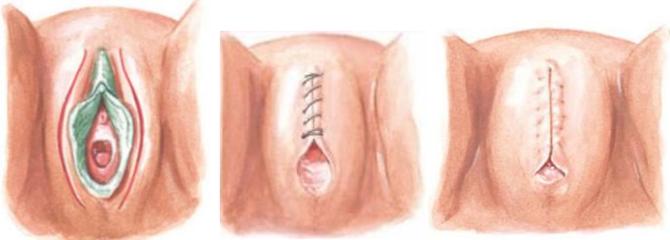
- Severe pain and shock
- Bleeding
- Infection
- Urine retention
- Injury to adjacent tissue
- Immediate fatal haemorrhaging
- Death

Long-term health Complications:

- Extensive damage of the external reproductive system
- Difficulties in menstruation
- Increased risk of vesico vaginal fistula or recto-vaginal fistula
- Complications in pregnancy and child birth
- Sexual dysfunction
- Psychological damage

For more information visit the Soroptimist UKPAC website www.ukpac.org.uk/about/show/347

Types of FGM (images courtesy of Daughters of Eve)

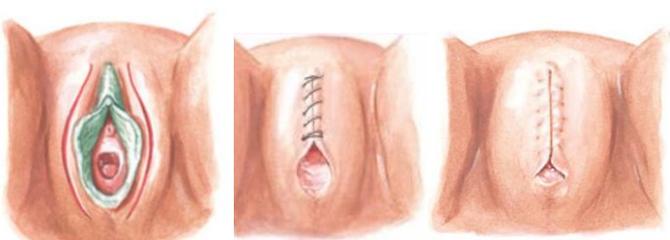
 <p>Type I Clitoridectomy Partial or total removal of the clitoris (a small, sensitive and erectile part of the female genitals) and, in very rare cases, only the prepuce (the fold of skin surrounding the clitoris). This practice is extremely painful and distressing, damages sexually-sensitive skin and is an infection risk.</p>	 <p>Type II Excision This involves partial or total removal of the clitoris and the labia minora, with or without cutting of the labia majora - the 'lips' that surround the vagina. This is extremely painful, distressing, damages sexually-sensitive skin and is a serious risk to infection.</p>
 <p>Type III – Infibulation Narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and sewing over the outer, labia, with or without removal of the clitoris or inner labia. This practice is extremely painful and distressing, damages sexually-sensitive skin and is an on-going infection risk. The closing over of the vagina and the urethra leaves women with a very small opening in which to pass urine and menstrual fluid. The opening can be so small that it needs to be cut open to be able to have sexual intercourse. Cutting is also needed in order to give birth and can cause complications that harm both mother and baby.</p>	

What are the Health complications of FGM?

FGM is traditionally carried out by elderly women 'specialised' in this task, usually without anaesthetics and with crude instruments such as razor blades, knives and broken shards of glass. In some communities, affluent families take their girls to medical personnel in an attempt to avoid the dangers of unskilled operations performed in unsanitary conditions.

WHY? By now you must be wondering why on earth anyone would want to mutilate and torture little girls in this way. One of the main reasons is **control over women's sexuality**: virginity is a pre-requisite for marriage and equated to female honour in many communities. FGM, in particular infibulation, is defended in this context as it reduces (or completely removes) a woman's sexual desire and lessens temptations to have extramarital sex thereby preserving a girl's virginity. Often sex is so painful for the rest of a woman's life that there is no desire to indulge in sexual behaviour at all.

Types of FGM (images courtesy of Daughters of Eve)

 <p>Type I Clitoridectomy Partial or total removal of the clitoris (a small, sensitive and erectile part of the female genitals) and, in very rare cases, only the prepuce (the fold of skin surrounding the clitoris). This practice is extremely painful and distressing, damages sexually-sensitive skin and is an infection risk.</p>	 <p>Type II Excision This involves partial or total removal of the clitoris and the labia minora, with or without cutting of the labia majora - the 'lips' that surround the vagina. This is extremely painful, distressing, damages sexually-sensitive skin and is a serious risk to infection.</p>
 <p>Type III – Infibulation Narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and sewing over the outer, labia, with or without removal of the clitoris or inner labia. This practice is extremely painful and distressing, damages sexually-sensitive skin and is an on-going infection risk. The closing over of the vagina and the urethra leaves women with a very small opening in which to pass urine and menstrual fluid. The opening can be so small that it needs to be cut open to be able to have sexual intercourse. Cutting is also needed in order to give birth and can cause complications that harm both mother and baby.</p>	

What are the Health complications of FGM?

FGM is traditionally carried out by elderly women 'specialised' in this task, usually without anaesthetics and with crude instruments such as razor blades, knives and broken shards of glass. In some communities, affluent families take their girls to medical personnel in an attempt to avoid the dangers of unskilled operations performed in unsanitary conditions.

WHY? By now you must be wondering why on earth anyone would want to mutilate and torture little girls in this way. One of the main reasons is **control over women's sexuality**: virginity is a pre-requisite for marriage and equated to female honour in many communities. FGM, in particular infibulation, is defended in this context as it reduces (or completely removes) a woman's sexual desire and lessens temptations to have extramarital sex thereby preserving a girl's virginity. Often sex is so painful for the rest of a woman's life that there is no desire to indulge in sexual behaviour at all.