

Female genital mutilation

Introduction

Female genital mutilation (sometimes referred to as female circumcision) refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. The practice is illegal in the UK.

It has been estimated that over 20,000 girls under the age of 15 are at risk of female genital mutilation (FGM) in the UK each year, and that 66,000 women in the UK are living with the consequences of FGM. However, the true extent is unknown, due to the “hidden” nature of the crime.

The girls may be taken to their countries of origin so that FGM can be carried out during the summer holidays, allowing them time to “heal” before they return to school. There are also worries that some girls may have FGM performed in the UK.

In February 2014, the UK government announced plans to part-fund a new study into how many women and girls living in England and Wales are affected by FGM. This was part of a wider commitment to preventing FGM during the International Day of Zero Tolerance for Female Genital Mutilation. Read the [2015 Government declaration on female genital mutilation](#) for details on other steps being taken. FGM is an unnecessary and illegal practice that causes significant physical, mental and emotional harm. Find out what FGM is and where to find help if you or someone you know is at risk of having FGM.

Forms of mutilation

FGM is usually carried out on young girls between infancy and the age of 15, most commonly before puberty starts.

The procedure is traditionally carried out by a woman with no medical training. Anaesthetics and antiseptic treatments are not generally used, and the practice is usually carried out using knives, scissors, scalpels, pieces of glass or razor blades. Girls may have to be forcibly restrained.

There are four main types of FGM:

- **Type 1 – clitoridectomy** – removing part or all of the clitoris.
- **Type 2 – excision** – removing part or all of the clitoris and the inner labia (lips that surround the vagina), with or without removal of the labia majora (larger outer lips).
- **Type 3 – infibulation** – narrowing of the vaginal opening by creating a seal, formed by cutting and repositioning the labia.
- **Other harmful procedures** to the female genitals, which include pricking, piercing, cutting, scraping and burning the area.

Effects of FGM:

There are no health benefits to FGM. Removing and damaging healthy and normal female genital tissue interferes with the natural functions of girls’ and women’s bodies.

Immediate effects

- severe pain
- shock
- bleeding
- wound infections, including tetanus and gangrene, as well as blood-borne viruses such as HIV, hepatitis B and hepatitis C
- inability to urinate

- injury to vulval tissues surrounding the entrance to the vagina
 - damage to other organs nearby, such as the urethra (where urine passes) and the bowel
- FGM can sometimes cause death.

Long-term consequences

- chronic vaginal and pelvic infections
- abnormal periods
- difficulty passing urine, and persistent urine infections
- kidney impairment and possible kidney failure
- damage to the reproductive system, including infertility
- cysts and the formation of scar tissue
- complications in pregnancy and newborn deaths
- pain during sex and lack of pleasurable sensation
- psychological damage, including low libido, depression and anxiety (see below)
- flashbacks during pregnancy and childbirth
- the need for later surgery to open the lower vagina for sexual intercourse and childbirth

Psychological and mental health problems

Case histories and personal accounts taken from women indicate that FGM is an extremely traumatic experience for girls and women, which stays with them for the rest of their lives.

Young women receiving psychological counselling in the UK report feelings of betrayal by parents, as well as regret and anger.

The legal situation

FGM is illegal in the UK. It is also illegal to arrange for a child to be taken abroad for FGM. If caught, offenders face a large fine and a prison sentence of up to 14 years.

What you can do:

If you are worried about someone who is at risk of FGM or has had FGM, you must share this information with social care or the police. It is then their responsibility to investigate and protect any girls or women involved.

Read the NHS choices page on [useful links for FGM](#), which has information on organisations you can go to for help.

Health professionals

If you are a health or social care professional who may come into contact with girls and women at risk of FGM, you can read the [Multi-Agency Practice Guidelines on Female Genital Mutilation PDF document](#). These guidelines contain detailed advice and guidance in relation to the protection of girls who may be at risk of FGM, as well as the care and treatment of women who have already undergone FGM.

Other useful resources are listed in the useful links section on this page.

Surgical ‘reversal’

Surgery can be performed to open up the lower vagina. This is sometimes called “reversal”, although it cannot restore sensitive tissue that has been removed.

Surgery may be necessary for women who are unable to have intercourse, as the vagina is too narrow. In addition, some pregnant women who have had FGM will need to have their lower vagina opened up before labour, to allow a safer birth.

FGM increases the risk of the vagina tearing during delivery, which causes damage and can lead to heavy bleeding. It can also increase the risk of the baby dying during, or just after birth.

Surgery is best performed before pregnancy, or at least within the second trimester of pregnancy (between about 13 and 28 weeks).

Some women may be reluctant to undergo reversal until labour starts, because this may be normal practice in their country of origin.

Surgery involves making a careful incision along the scar tissue that has closed up the entrance to the vagina, to expose the underlying vagina.

Adequate pain relief is essential – the procedure is usually performed under local anaesthetic in the outpatient clinic. However, a small number of women will need either a general or spinal anaesthetic (injection in the back), which would normally involve a one-day stay in hospital.

Where does FGM happen?

FGM is prevalent in Africa, the Middle East and Asia.

In the UK, FGM tends to occur in areas with larger populations of communities who practise FGM, such as first-generation immigrants, refugees and asylum seekers. These areas include London, Cardiff, Manchester, Sheffield, Northampton, Birmingham, Oxford, Crawley, Reading, Slough and Milton Keynes.

Why is it done?

FGM is carried out for cultural, religious and social reasons within families and communities.

For example, it is often considered a necessary part of raising a girl properly, and as a way to prepare her for adulthood and marriage. FGM is often motivated by the belief that it is beneficial for the girl or woman. Many communities believe it will reduce a woman's libido and discourage sexual activity before marriage.

FGM information collection

Information about FGM is being collected by the Health and Social Care Information Centre (HSCIC) on behalf of the Department of Health and NHS England. This is to support their work on preventing FGM.

To find out more about what information is being collected, why, and how it will be used, please go to the [HSCIC website](#). If you wish to object to your information being used, please email: enquiries@hscic.gov.uk

Key points

- Over 66,000 women and girls living in Britain have experienced FGM.
- FGM is illegal – it is an offence for anyone to perform FGM in the UK or to arrange for a girl to be taken abroad for it.
- FGM causes long-lasting physical and psychological damage.
- There are [a number of specialist clinics in the NHS](#) that offer a range of healthcare services for women and girls who have been subjected to FGM, including reversal surgery. In some areas women can attend without referral, but in other areas a GP referral letter is required.

Statement opposing female genital mutilation

The school summer holidays in particular are when many young girls are taken abroad, often to their family's birth country, to have FGM performed. The FGM statement highlights the fact that FGM is a serious criminal offence in the UK, with a maximum penalty of 14 years in prison.

If you're worried about FGM, print out this statement, take it with you abroad and show it to your family. Keep the declaration in your passport, purse or bag, and carry it with you all the time.

[Download the 2015 FGM statement \(PDF, 218kb\)](#)

If you work with FGM-practising communities, you may wish to order printed copies for your healthcare setting, youth club or community group. Please e-mail: FGMEnquiries@homeoffice.gsi.gov.uk stating the number of copies required and a postal address for them to be sent to.

Leaflets to download

The Department of Health has published a leaflet giving information about FGM in the following languages:

[More about FGM](#) – English version (PDF, 248Kb)

[Mwy o wybodaeth am FGM](#) – Welsh version (PDF, 175Kb)

[ሰለ ኤፍ ጂ ኤም ተጨማሪ መረጃ](#) – Amharic version (PDF, 1.09Mb)

[الإزات ختان حول المعلومات من مزد](#) – Arabic version (PDF, 177Kb)

[FGM در باره ر بیشتر اطلاعات](#) – Farsi version (PDF, 221Kb)

[Renseignements complémentaires sur les MGF](#) – French version (PDF, 182Kb)

[FGM دهر باره زباته زان باری](#) – Kurdish Sorani version (PDF, 246Kb)

[Macluumaad dheeraad ah ee ku saabsan FGM](#) – Somali version (PDF, 196Kb)

[Habari zaidi kuhusu ukeketaji wa wanawake](#) – Swahili version (PDF, 176Kb)

[ብዛዕባ ኤፍ ጂ ኤም ተወሳኺ ሓበሬታ](#) – Tigrinya version (PDF, 766Kb)

[معلومات مزید م سے بارے کے اور م جی اے ف](#) – Urdu version (PDF, 188Kb)