

Issues with provision of health services to women with female genital mutilation in Europe

Findings from an EU wide-study

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The health care services approach to FGM,
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EIGE Study

- Study to map FGM in all EU MS + Croatia
- For European Institute for Gender Equality
- December 1, 2011 to December 15, 2012
- Coordinated by ICRH and Yellow Window Consultant in collaboration with national researchers, University of Tilburg, and advisory committee



Objectives & methodology

- To provide an analysis of the current situation of FGM in the EU 27 and Croatia
- Mapping in 28 EU countries + in-depth interviews in nine EU countries (DE, FR, IE, IT, NL, PT, ES, SE, UK)
- Human rights based approach (FGM = VAW), focusing on prevention, protection, prosecution, provision of services, partnerships and prevalence



FGM in the EU and the health services

- Health professionals one of main actors in the EU
- Wealth of materials developed for health sector
- Number of issues remain with regard to prevention, protection, prevalence, provision of services and partnership



Data collection and prevalence

- No ongoing systematic representative surveys on FGM prevalence across MS
- Other data sources and studies to estimate the extent of FGM: surveys among health professionals, compilations of data sets such as registered births in families originating from FGM countries
- Potential information and data sets include a.o. hospital/medical records
 - Issues: non systematical use of records, not collated centrally, data collection not obligatory, no comparable data, etc.



Prevention & health services

- Prevention in the EU MS focuses mainly on:
 - Raising awareness among general public, communities and professionals
 - Providing training for professionals
 - Advocacy activities
- Few activities focus on behaviour change
- Prevention undertaken in absence of accurate prevalence estimates and baseline data
- Paucity of evaluation procedures of prevention efforts and resources
- Few health professionals play a preventative role



Child protection and health services

- Role of health professionals in child protection in the EU:
 - Identifying girls at risk of FGM
 - Reporting concerns to competent authorities
 - Initiating protective measures
- Lack of (information on) duty/right to report, reporting protocols, situations to breach secrecy provisions and related procedures in EU MS
- Need for clear, documented policies on professional secrecy and conditions of disclosure in cases of suspected planned FGM



Provision of health services

- Civil society organisations and health services are main actors in providing services across all EU MS
- CSOs: provide training for a.o. health professionals
- Main focus of health service provisions = gynaecological services related to childbirth and defibulation
- Lack of psychological care and sexual support services (counselling, cognitive behavioural therapy, etc)
- Gender sensitive approach of health services is necessary



Provision of health services (continued)

- Specialised health services: only in a few EU countries
- Specialised services concentrated in larger urban centres (accessibility issues)
- Ad-hoc provision of services and lack of mainstreaming and institutionalisation of services
- Training (if it occurs) not on ongoing or regular basis
- Including FGM in formal education curricula is scarce
- Substantial number of guidelines, teaching tools, handbooks and manuals on FGM to support service provision but no resources for dissemination, content updates and complementary training



Partnership

- Partnership have key role in coordinating actions, exchange of information and knowledge to achieve progress
- Reduction of resources in some EU MS raises concern (i.e. ES, IT)



Follow up

- Publication of FGM report by EC Commissioner Reding beginning of March 2013
- Country fact sheets on FGM for all EU MS
- Database on website EIGE www.eige.eu
- Launch of public consultation on FGM
- ? EU Policies on FGM end of 2013



Health practices with potential: IE

- FGM: Health information for health-care professionals working in Ireland, 2008
 - Handbook, by AkiDwA and Royal College for Surgeons in Ireland, Women's Health Programme
 - Target group: HCPs (MDs, nurses, midwives, Obs/gyn, psychologists, counsellors and social workers)
 - Upcoming second edition; included on UN Alliance for Civilization website as international example of good practice
 - Free download from AkiDwA website



Practice with potential: IT

- Dermatological Institute for tropical disease, Regional Centre for Cure and Treatment of FGM, San Gallicano Hospital, Roma - Created in 2001
 - To provide medical treatment, training, cultural mediation, counselling, networking and information in relation to FGM
- Centre for the Prevention and Care of Complications of FGM, Careggi Hospital, Florence – created in 2003
 - > 300 women/year; multidisciplinary centre
 - To provide medical treatment for women with FGM (defibulation, treatment of complications), training for professionals, promotes research



Practice with potential: UK

- African Well Women Clinics – Acton Well Woman Clinic
 - West London, 2008
 - To provide adequate health care for women and girls in a culturally sensitive way
 - In response to large African community in locality
 - Provide medical treatment (defibulation, management and treatment of complications, counselling, prevention, training of professionals)



Thank you for your
attention!

