

Community nurses urged to highlight dangers of female genital mutilation

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In their trusted professional capacity, community nurses are well placed to develop effective collaboration with patients and families to tackle the harmful and illegal procedure of female genital mutilation, say academics.

Nurses have an important role in preventing female genital mutilation and in providing sensitive care for women and girls who have undergone the procedure, authors writing in Primary Health Care journal warn.

King's College London lecturer in mental health Niall McCrae and lecturer in child health Sheena Bynoe have written about the growing number of girls and women affected by [female genital mutilation](#) (FGM).

The authors state that although FGM has been illegal in the UK since 1985, healthcare services have lacked a 'robust response' until recent years.

They say nurses are in a 'prime position' to help protect girls from the practice, but they note that there are many obstacles to dealing with this complex issue, including changing attitudes in communities where traditional cultures are resilient. The authors say nurses need guidelines, training and robust procedures to help them detect and report actual and potential cases.

However, they acknowledge that progress is beginning to be made in the

UK, citing the launch of a 24-hour helpline by the National Society for the Prevention of Cruelty to Children for anyone at risk of FGM.

'All observed cases of mutilation should be recorded by health practitioners,' they say.

'Opportunities to examine women arise in maternity care, and the recording of FGM by midwives, community nurses and health visitors is a vital contribution to the protection of girls. At booking, midwives should talk about FGM to women from communities where it is practised, particularly as this may have significant implications for the birth.'

According to Unicef report from 2013, more than 125 million girls and women have been cut in the 29 countries in Africa and the Middle East where FGM is concentrated.

FGM involves removing part or all of the female external genitalia for non-medical reasons, and it is illegal for a UK national or permanent resident to be taken abroad for FGM even in countries where the practice is legal.

The authors add: 'Direct evidence from physical examination is not always necessary. There may be an indication from physical symptoms, such as difficulty in passing urine, or inferences of actual or imminent FGM from conversation with a patient or family members.'

They urge [nurses](#) to use 'their trusted professional capacity' to develop effective collaboration with patients and families.

More information: McCrae N, Bynoe S (2015) "The role of community nurses in preventing female genital mutilation." *Primary Health Care*. 25, 2, 30-33. prejournals.rcni.com/doi/full/10.1111/pha.12111

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