

BRITISH PAEDIATRIC SURVEILLANCE UNIT

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FEMALE GENITAL MUTILATION IN CHILDREN & YOUNG PEOPLE UNDER 16 YEARS OF AGE

(Short Study Name: Female Genital Mutilation <16 years of age)

Abstract

Female Genital Mutilation (FGM) is a tradition practiced in Africa, Asia and the Middle East by certain ethnic groups of Muslims, Christians, and other religions. FGM is almost always carried out on children, and estimates suggest that 130 million girls and women are living with the consequences of FGM. It is defined by the WHO, as "all procedures that involve partial or total removal of the external female genitalia or other injury to the female genital organs for nonmedical reasons". There are wide misperceptions about the social benefits of FGM in the community; it has no health benefits and can cause serious damage to the physical and psychological health of the girl. Where performed on children they are restrained while the external genitalia are cut, sometime tissue is removed, and/or stitched with a knife, scalpel or other sharp tool.

FGM is illegal in the United Kingdom (UK) and the Republic of Ireland (RoI) and it is also illegal to take a child out of the country for the purpose of FGM.

No one really knows how common FGM is in the UK, but at the moment it is thought to be rare for doctors or any other professional working with children to see FGM but it could also be because professionals are not asking about FGM nor do they recognise the signs.

Information on why children with FGM are seeing doctors, how FGM is presenting, associated medical problems and what care is needed for these children is required. This information could be used to plan health services, to educate professionals and to produce guidelines.

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Website

www.rcpch.ac.uk/bpsu/FGM

Background

FGM is the name given to any procedure such as cutting, removing flesh or other injury to the genitals of women or girls for a nonmedical reason. There are many different types of FGM and you may hear it called by other names like female circumcision or 'Sunna'. FGM can involve cutting or removing the clitoris, or sewing together the vaginal opening; this type is common in some African countries. Another type of FGM is a small prick or cut, sometimes to the skin around the clitoris, this is more common in Southeast Asia. FGM is illegal in the UK and since 2003, it has been illegal to take a child out of the country for the purpose of FGM.

There are few dedicated clinics for FGM, of the 14 clinics listed on the DH website, nine are in London and there is only one clinic in the UK for children, which is also in London. However, new data will allow service planning.

Each Trust should have a designated FGM health professional and a clear referral pathway to a paediatric specialist with the expertise to examine the child as well as knowledge of safeguarding. There should be close links with mental health services and community groups. Given the paucity of services and expertise, this study will help determine future need.

Coverage	United Kingdom and the Republic of Ireland
Duration	November 2015 to November 2017 (25-months of surveillance), with a 12-month follow-up.
Research Questions	<ul style="list-style-type: none">▪ To determine the incidence of childhood FGM presenting to doctors.▪ Identify reasons for referral, collect demographic and vulnerabilities data.▪ Outline clinical presentation, examination findings and medical symptoms and clinical management.▪ Specify physical or mental health treatments, to make recommendations for service delivery.▪ Identify outcomes at 12 months
Case definition	<p>A new presentation of any child aged under 16 (i.e. up to 15 years 11 months), not already known to have FGM who was:</p> <ul style="list-style-type: none">▪ Seen because of suspected or known FGM (for example referrals from social care) <p>OR</p> <ul style="list-style-type: none">▪ Seen for another condition and FGM is suspected following assessment OR▪ Has a genital piercing OR▪ Has had female cosmetic genital surgery including labiaplasty. <p>If uncertain or awaiting further assessment, please notify BPSU about the child.</p>
Reporting instructions	Please report any cases of FGM in children under the age of 16 seen in the past month fitting the surveillance case definition. Please report even if the case has now been referred to or from your paediatric/nurse colleagues.
Methods	Paediatricians reporting a case through the BPSU orange card system will be emailed a clinical questionnaire. Clinical questionnaires are to be completed and submitted online. The Sexual Assault Referral Centres (SARCs) in the four nations have also agreed to participate.
Funding	This study was supported by a grant from Department of Health
Approval	This study has been granted Section 251 HRA-CAG permission (CAG Reference: 15/CAG/0178)
Support group	Foundation for Women's Health Research and Development (FORWARD) Email: forward@forwarduk.org.uk Web: http://www.forwarduk.org.uk/

The Government has announced that the new female genital mutilation mandatory reporting duty will come into force from 31 October 2015, and has published information for professionals and the police on the new duty. Further information on the new female genital mutilation mandatory reporting can be found at www.rcpch.ac.uk/FGM.

Reporting to the BPSU does not replace statutory reporting to the appropriate bodies.

For further information about the study, please contact:

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