

# Ten tips for teaching medical students about FGM

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Undergraduate  
Medical Education

## What is FGM?

*“all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons”*

## What is the problem?

- Commonly encountered by doctors in obstetrics and gynaecology as well as primary care
- Guidance exists for healthcare professionals from various UK bodies
- At UCLMS we have taught dedicated sessions about FGM for a number of years

# 1. Acknowledge sensitivity of the topic and provide staff contact information

- Students may have undergone FGM, or have relatives/friends who have undergone FGM
- Provide contact details of a dedicated staff member who can discuss their concerns


## 2. Develop students' cultural understanding of FGM

- Students will have a range of understanding about the cultural context of FGM
- We utilise a documentary video commissioned by the International Federation of Gynecology and Obstetrics



(The Cutting Tradition, 2012)

### 3. Bring students' basic level of knowledge to the same level



How many girls/women worldwide are estimated to have undergone FGM?

- 20 - 30 million
- 50 - 75 million
- 100 - 140 million

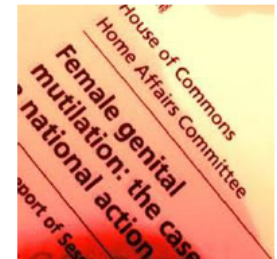
- Assess what students already know about FGM
- We use a structured quiz to ensure students achieve the learning objectives

## 4. Clarify current law on FGM and legal requirements for doctors

- Doctors have a legal duty to report all instances of FGM in certain circumstances
- Vital that all new doctors know their legal duties

### Serious Crime Act March 2015

- Mandatory reporting of all under 18 year olds with FGM to the police
- Call 101 yourself
  - Ideally by end of next working day
  - Within 1 month
  - Genital piercing = Type 4 FGM
- Inform child safeguarding lead / team



## 5. Ensure understanding of the potential complications of FGM

Which of the following is not a long-term complication of FGM?

- Chronic pain
  - Chronic infections
  - **Hernia**
  - Difficulties with menstruation and passing urine
  - Sexual problems
  - Difficulty conceiving/infertility
  - Mental health / psychological problems (PTSD)
  - Obstetric complications
- There is significant variation in doctor's knowledge of the complications of FGM (Purchase et al, 2013)
  - Knowing the complications allows doctors to recognise cases and provide appropriate support



## 6. Analyse/refute justifications and dispel myths

- There are many commonly held myths/misconceptions
- By addressing them in the session, doctors can help give women the information they need to dispel these

### FGM is not a religious requirement

- Many people believe FGM has a religious basis
- It is not required by Islam, Christianity or Judaism and is not in the Bible or Koran



## **7. Develop students' skills to conduct an effective consultation with women and protect girls at risk of FGM**

<https://mediacentral.ucl.ac.uk/Player/9972>

1:47

## 8. Involve women with experience of FGM

- Students highly value hearing from an FGM survivor and having the opportunity to ask her questions
- This helps students to feel more confident in talking to women about FGM

## 9. Discuss ethical issues

- Give students space to discuss the ethical issues thrown up by FGM
- E.g. mandatory duty to breach confidentiality

### GMC response to the consultation

- “...we sound caution about reports to the police being mandatory in all cases. The proposed duty leaves no scope for considering the best interests of the child or young person.”

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## **10. Recruit facilitators with experience of caring for women/girls from FGM practising communities and teaching medical ethics**

- FGM is a complex clinical, social, cultural, ethical and legal issue
- Teaching ideally facilitated by someone with the expertise to help students understand / negotiate these different aspects

## Conclusion

- There is little evidence about how to teach medical students about FGM
- We hope these tips can help medical educators prepare future doctors to support women who have undergone FGM and protect children at risk of FGM

## References

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