



European Medical Students' Association

Association Européenne des Étudiants en Médecine

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Fight Against Female Genital Mutilation

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The European Medical Students' Association (EMSA) represents medical students across Europe. We envision a healthy and solidary Europe in which medical students actively promote health. EMSA empowers medical students to advocate health in all policies, excellence in medical research, interprofessional healthcare education and the protection of human rights across Europe.

EMSA. HEALTH. EUROPE. TOGETHER.

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Problem statement.

Female Genital Mutilation (FGM) is defined by the World Health Organisation (WHO) as “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” (WHO, 2022). This procedure becomes reality for approximately 6000 women every day, amounting to an estimated amount of 200 million affected females world-wide (UNICEF, 2023). With most mutilations being undertaken before the age of 15, the practice results in aggravating physical and psychological problems, ranging from immediate complications such as infection, blood loss, or death to life-long health issues like vaginal, menstrual, urinary, and sexual problems as well as complications in childbirth (WHO, 2022).

While the practice of FGM is especially prominent in the North-Eastern and -Western countries of Africa and the Middle East, the topic is becoming increasingly relevant in Europe. An estimated 600.000 affected live in the EU, Norway and Switzerland, with around 50.000 - 90.000 additional girls and women being at risk of undergoing FGM in the future (European Commission, 2021).

Due to the various complications resulting from FGM, the lack of medical reasoning behind the practice and the sensitive topic, special expertise, knowledge and awareness on the topic are needed from trained medical personnel treating mutilated women. While the WHO has published guidelines on the management of health complications from FGM, studies performed on an European level suggest that medical professionals do not feel equipped to handle the topic and that they lack the knowledge to adequately treat mutilated patients (Baillot et al., 2017) . Additionally, FGM has yet to be included into the medical curriculum of universities.

Our view. Aim

Female genital mutilation is a threat towards the values EMSA represents. The procedure goes against articles three and five of the “Universal Declaration of Human Rights” (UN, 1948) and is thus a grave violation of human rights. Additionally, FGM violates the UN “Convention on the Elimination of all Discrimination Against Women” (UN, 1981) and the UN “Convention on the Rights of the Child” (UN 1990).

The medical risk which mutilated girls and women are faced with throughout their entire life is alarming and related complications must be treated immediately. In order for women to achieve bodily autonomy and make informed decisions about the course of their medical treatment, a comprehensive education is essential. Hence, medical students and the health care system in general must be aware of the required medical knowledge and the responsibility to inform girls and women about the topic. As an organisation composed of medical students, EMSA is aware of the importance of the implementation of FGM awareness into the medical curriculum and advocates for it.

It is our duty to solve all myths and misconceptions about FGM and clarify that no reasoning - be it for cultural, hygienic, religious, socioeconomic or psychosexual reasons - relativizes the practice of FGM. In accordance with EMSAs striving to engage in scientific-based policy making, we support the establishment of an infrastructure of centres in Europe which are prepared to care for survivors of FGM psychologically, physically and, if desired, with surgery to reverse the mutilation (Anand et al., 2014).

EMSA believes it is imperative to fight FGM and eradicate the practice in the high-prevalence countries. However, medical students and professionals should especially focus on the facilitation of recognizing affected women, efficiently treating arising complications, supplying psychological assistance, and minimising the rate of new mutilations being performed in Europe, especially in the context of medicalisation. Nonetheless, it must be said that in order to eradicate the practice in Europe, also the deep-rooted tradition of FGM must be tackled, as well as the inequality of females regarding their social, political and economic standing in society. The best method to reach this goal in Europe as well as the high-prevalence countries is through education, not only of women, but also of men (The Guardian, 2014; Hearst/Molnar, 2013).

Recommendations

EMSA calls on the **European Union** to:

- Support and provide funds for any non-governmental organizations concerned with eradicating FGM practices and providing medical and mental health to all FGM survivors;
- Criminalize all FGM practices in EU and non-EU states;
- Urge its member states as well as non-EU countries to propose laws that ban FGM including the Medicalized FGM;
- Cooperate with governments and NGOs tackling FGM outside the EU (European Commission, 2021);
- Employ a holistic approach when addressing the issue of FGM, as promoted by the UNFPA (UNFPA, 2007);
- Promote education about not only FGM itself, but also cultural contexts in which it arises, including all the implications thereof.

EMSA calls on **governments and related health institutions** to:

- Educate all generations about the risks and complications of FGM in order to facilitate the fight against FGM with special attention given to older generations ;
- Implement and adhere to WHO guidelines¹ on the management of health complications from female genital mutilation for the health management of the survivors of FGM;
- Educate health care professionals by using recommended guides and tools, such as *Person-centred communication for female genital mutilation prevention: a facilitator's guide for training health-care providers* issued by the WHO (WHO, 2022);
- Implement adequate monitoring programs in order to surveil all aspects of FGM (WHO, 2022);
- All religious leaders should distance themselves from the misleading norms and myths contributing to the continuation of the practice;
- Accept and protect girls and women at risk of FGM that seek admission as refugees;
- Implement sex education programs in schools at the appropriate grade levels for all genders;

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EMSA calls on NGOs to:

- Identify myths and misconceptions regarding FGM and work to eliminate any misinformation contributing to practicing FGM by raising awareness;²
- De-stigmatize and empower FGM survivors;
- Connect and support FGM survivors by establishing support groups;
- Involve all the members of communities when tackling the issue of FGM;
- Collaborate with relevant stakeholders that are working on ending FGM to provide a stronger impact;
- Initiate country-centered fieldwork in countries where interventions should be more prominent.

EMSA calls on European medical faculties to:

- Adopt FGM as a part of the medical curriculum involving causes and consequences of the practice;
- Provide multi-dimensional and objective education on FGM emphasizing social, medical, and psychological aspects of this practice;
- Encourage communication with survivors of FGM who wish to share their stories so that the students can obtain more knowledge on the matter.

EMSA calls on Health Workers to:

- Give non-judgemental, unbiased medical service to FGM survivors;
- Employ a person-centered approach when caring for a patient;
- Strive to obtain more education about FGM and update their current knowledge on the matter.

EMSA calls on media as well as social media platforms to:

- Increase the visibility of FGM;
- Encourage training of media professionals so that they can cover the issue in an ethical; informative and holistic manner, as promoted by NGOs such as Equality Now

EMSA commits itself to:

- Advocate against FGM practices;
- Support FGM survivors;
- Spread awareness on the topic by using different platforms such as online webinars, face-to-face sessions;
- Develop relationships with and support external partners who advocate against FGM.

²

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