

Female genital mutilation – Medical Perspectives

A/Prof Nesrin Varol

Meaning of FGM

- **Social obligation**
- Marriageability
- Virginity / marital fidelity
- Rite of passage
- Aesthetics
- Family honour

Australian study 2006-2012

- 200 women with FGM
- 9,000 women without FGM

Obstetric outcomes

Maternal:

CS, instrumental birth, episiotomy,
genital tract trauma, PPH

Neonatal:

low birth weight, admission to SCN,
stillbirth

Demographics of women with FGM

- Prevalence 2%-3%
- 90% from countries of Africa
- 2/3 had types II & III
- 90% of women with type III from East Africa
- 50% of women from Somalia & Sudan: type III

Obstetric outcomes

- similar obstetric outcomes

ORIGINAL RESEARCH – QUALITATIVE

Midwives' experiences of caring for women with female genital mutilation: Insights and ways forward for practice in Australia

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Evidence to inform education, training and supportive work environments for midwives involved in the care of women with female genital mutilation: A review of global experience

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REVIEW ARTICLE

A systematic review of doctors' experiences and needs to support the care of women with female genital mutilation

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- <https://www.climate.edu.au/course/view.php?id=169>

Where to from here?

National FGM Taskforce

- Multi-professional
- Research
- Knowledge and training
- Policy and guidelines
- <http://accaf.uonbi.ac.ke>

Thank you

WHO study Lancet 2006

- 30,000 women, 6 African countries, 28 obstetric centres
- Type III – 30% higher CS; 70% higher PPH
- PNM – 15%, 32%, 55% higher with types I, II, III
- neonatal resuscitation - 66% more likely if type III

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RESEARCH ARTICLE

Open Access

The role of men in abandonment of female genital mutilation: a systematic review



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