Ten tips for teaching medical students about FGM

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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

- 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

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<th>Serious Crime Act March 2015</th>
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<td>▪ Mandatory reporting of all under 18 year olds with FGM to the police</td>
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<td>▪ Call 101 yourself</td>
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<td>- Ideally by end of next working day</td>
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<td>- Within 1 month</td>
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<td>- Genital piercing = Type 4 FGM</td>
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<td>▪ Inform child safeguarding lead / team</td>
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5. Ensure understanding of the potential complications of FGM

- 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

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
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.”
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

