

## Individual Research Project Presentations Day 10<sup>th</sup> June 2024, Kent and Medway Medical School.

### What are the Workplace Training Experiences of Healthcare Professionals to Assist Them to Identify Female Genital Mutilation?

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#### Abstract:

**Background:** Female Genital Mutilation (FGM) is illegal in the United Kingdom (UK) and involves the removal of parts of the female external genitalia for non-medical purposes. Therefore, FGM is a safeguarding concern and healthcare professionals (HCPs) have a legal duty to report these cases and duty of care to ensure affected patients receive the necessary care and support they require. Due to the sensitive nature of this topic, there is a growing body of research regarding the knowledge and awareness of HCPs surrounding FGM. The literature indicates there to be inadequate FGM training in the workplace, and a subsequent lack of confidence and knowledge amongst HCPs, of the care requirements for this patient group (Surico *et al.*, 2015; Lane *et al.*, 2015; Sheerin *et al.*, 2023). This study aimed to explore the experiences of UK HCPs regarding their FGM training and how this influences HCP competence and confidence in identifying patients subjected to FGM and females who could be at risk of FGM.

**Methods:** HCPs completed an anonymous semi-structured questionnaire, which was published online via social media platforms. The questionnaire was live on the survey platform, JISC, for 10 weeks. The questionnaire included open and closed structured questions, collecting data from participants regarding the following categories: demographics, work experience, workplace FGM training, workplace experience of FGM survivors, those at risk of FGM and provision of care for these patients.

**Results:** A total of 66 HCPs working in 29 different healthcare specialities, across 16 disclosed job roles participated in this survey. The results showed that 59.1% of HCPs had previously received FGM training during their career, 30.3% of HCPs had never received workplace FGM training, with 10.6% unable to remember if they came across any sort of FGM training at all. The data illustrated that 34.8% and 19.7% of HCPs respectively, had clinical encounters with patients who had experienced FGM and females who were at risk of FGM. HCPs who had received workplace FGM training were more confident at providing care to patients affected by FGM, in comparison to HCPs without workplace FGM training.

**Conclusions:** HCPs in this study are proficient in identifying patients who have experienced FGM, however, identifying at risk individuals proved more challenging. HCPs are aware of the physical and psychological requirements of these patients and desire additional FGM

training to increase their knowledge. There were mixed levels of confidence in caring for FGM patients across all specialities. Although, HCPs who had previous clinical FGM experience and training were more confident in providing care. This research demonstrates that although some HCPs have received FGM training, there was a lack of training standardisation across specialities, as well as differences found in training received for similar job roles.

**Keywords:** Female Genital Mutilation | Healthcare Professionals | Training | Healthcare Professional Survey | Healthcare Professional Perspectives

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