Opinion

Female Genital Mutilation (FGM) THE FACTS

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What is Female Genital Mutilation?

Female genital mutilation (FGM) refers to a number of practices which involve harming or cutting away parts or all of a female's external genitalia. Infants, girls and women who have been mutilated face irreversible lifelong physical, emotional, psychological and psycho-sexual health risks. FGM is often referred to as female circumcision or female genital cutting by those

who practise it.
What is the origin of FGM

FGM predates Islam and Christianity and it origins are unknown. It is believed to have started in ancient Egypt and spread to other parts of Africa. FGM is practiced among Muslims, Christians, Jews and Animists. In Western societies a form of FGM was practiced by doctors to cure a number of mental health disorders in women.

Who is affected by Female Genital Mutilation?

The World Health Organization (WHO) estimates that between 100-140 million girls and women worldwide have been genitally mutilated and about 3 million more girls in Africa are at risk each year. FGM is practices in more than 28 countries in Africa and among some communities in in Asia and the Middle East.

FGM has become an important issue in the UK, Europe, Australia, Canada, and the United States due to the continuation of the practice by immigrants from countries where FGM is common.

Women and girls of all ages from affected communities are at risk of being genitally mutilated. However, the procedure is most often practised on girls under the age of 16. In 2007, the Foundation for Women's Health, Research and Development (FORWARD) estimated that around 66,000 women who have undergone FGM are living in England and Wales, and that over 24,000 girls under the age of 16 are at risk of FGM.

What are the types of Female Genital Mutilation

The procedure takes different forms and varies between countries, ethnic groups, urban

and rural areas, and people of different socio-economic status. The procedure is usually carried out by a designated older woman, sometimes by a member of the victim's family, or by trained medical personnel including midwives and doctors. The World Health Organisation forbids health personnel from carrying out this practice. Those who do so breach the medical ethic to 'do no harm'. In many countries, including the UK, medical practitioners carrying out FGM other than for specific medical reasons do so illegally.

The United Nations Children's Fund (UNICEF), reports that FGM is "normally performed by traditional practitioners with crude instruments, such as knives, razor blades and broken glass, usually without anaesthetics."

There are many different variations of FGM. The WHO has categorised these practices into four major types, the procedures employed in each type of FGM are described below:

Type 1

Partial or total removal of the clitoris and/or the prepuce (clitoridectomy).

Type 2
Partial or total rer

Partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (excision).

Type 3

Narrowing of the vaginal orifice with creation of a covering seal by cutting and positioning the labia minora and/or the labia majora, with or without excision of the clitoris (infibulation).

Type 4 (unclassified)

All other harmful procedures to the female genitalia for nonmedical purposes, for example: pricking, incising, scraping and cauterization.

What are the short-term health complications?

The immediate consequences of FGM include the risk of: Extreme pain and shock (neurogenic shock) Severe blood loss, possible haemorrhage (bleeding)

Damage to adjacent tissue (from unskilled operation and/or use of blunt instruments)

Wound infection, including

tetanus and HIV infection Death What are the long term health consequences?

FGM has very severe health risks including death. The process is extremely painful. There is a high risk of developing infections and spreading diseases including HIV/AIDS and hepatitis. There are many significant lifelong physical, emotional, psychological and psycho-sexual consequences for victims. In June 2006, the World Health Organization (WHO) estimated that in the African context 10 - 20 babies die per 1000 deliveries as a result of FGM having been carried out on their mothers.

Long-term health effects of FGM

Blood borne infections, such as risk of HIV/AIDS and hepatitis

Infections, resulting in potential problems with the uterus, fallopian tubes, and ovaries-

Worsening or development of anaemia?? Not sure this is a direct long term effect

Recurrent urinary tract infections

Scar tissue, causing keloid or dermoid cysts (hard ridges/bumps)

Cysts or abscesses

Acute or chronic pelvic inflammatory disease

Painful or blocked menses (period) Retention of urine and

menstrual products
Difficult / impossible

gynaecological examinations
Problems with reproductive

complications and difficulties health including infertility; pregnancy

Obstructed labour, increasing risk of illness or death to mother and child Obstetric fistula (unnatural opening between vagina and rectum or vagina and bladder)

Other psycho-sexual and psychological problems associated with FGM indicate that sever impact on women's sexual wellbeing. They include pain during sexual intercourse, hypersensitivity and sexual dysfunction.

Reduced sexual fulfilment is common due to partial or total destruction of vulvanerve endings. Long term psychological problems include depression; enxiety, lsot of self-esteem; phobias' post-traumatic stress

disorder and psychosomatic

In some communities not going through the procedure can also have traumatic experiences due to the perceived social benefits of FGM. In general many women suffer in silence and continue to live with the traumas associated with FGM.

Does FGM have any basis in any religion?

FGM is neither part of Muslim tradition nor is it required by the Islamic faith - the practice predates Islam. FGM is not practised by the majority of Muslims. It is often associated with Islam, as individuals in Muslim societies where FGM is practised frequently cite religious teachings to justify their actions and beliefs. FGM is also practised by some Christians, Jews and Animists.

Many who practise FGM do so because they mistakenly believe it to be a Muslim requirement. It has become a "law by custom" in many Muslim countries. However, neither of the two main sources of the Islamic Shariah law - the Quran and the Sunnah specifically mention female circumcision, and most Islamic scholars agree that it is not an Islamic religious rite.

However, there is a new wave of the practice in many communities including the UK who view the practice of sunnah as a necessary reliefous obligation.

Why is FGM a violation of human rights?

FGM is a clear violation of the human rights of girls and women. It is discriminatory and violates the rights to equality, freedom from violence, health, injury, abuse, torture, and cruel or inhuman and undignified treatment. These rights are protected in international law by the following treaties and consensus documents.

International treaties

Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment

Covenant on Civil and Political Rights

Covenant on Economic, Social and Cultural Rights Convention on the Elimination of all Forms of Discrimination

against Women (CEDAW)
Convention on the Rights of the
Child

Convention relating to the Status of Refugees and its Protocol relating to the Status of Refugees Regional treaties

African Charter on Human and Peoples' Rights (the Banjul Charter) and its

Protocol on the Rights of Women in Africa

African Charter on the Rights and Welfare of the Child

European Convention for the Protection of Human Rights and Fundamental Freedoms. Consensus documents

Beijing Declaration and Platform for Action of the Fourth

World Conference on Women

General Assembly Declaration on the Elimination of Violence against Women

Programme of Action of the International Conference on Population and Development (ICPD)

UNESCO Universal Declaration on Cultural Diversity

United Nations Economic and Social Council (ECOSOC), Commission on the Status of Women.

Resolution on Ending Female Genital Mutilation. E/CN.6/2007/L.3/Rev.1.

Why does FGM occur in Britain?
FGM has also been practised in
the West. According to one
academic:

The practice of clitoridectomy was actually promoted in the United States and Britain during the 19th and early 20th centuries as a cure for lesbian practices or suspected inclinations, masturbation, hysteria, epilepsy,

and nervousness For a variety of reasons, the number of girls and women at risk and those living with FGM in the UK has increased in the past decade due to immigration. The issue is compounded by the complex problems and barriers that refugees and immigrants often face. This may include difficulties with cultural adaptation and identity, poverty, immigration status, isolation, lack of health awareness and access to education. A study conducted by FORWARD found that some of the primary drivers for women to undergo FGM were no different. They included pressure from families in country of origin to have their daughters go through FGM to make them marriageable; to suppress women's sexuality and enhance men's sexual pleasure and to maintain cultural identity. Additionally, those affected and harmed may not be able to access specialist healthcare services. Many mothers fear that their children may be taken away by social services if they come into

contact with local authorities.

FGM is illegal in the UK, and
any person involved - except for
the victim herself - risks being
charged with an offence, including
family members who assisted with
the crime. Therefore, due to the
fear of criminal repercussions,
where complications arise from
the illegal operation, a girl or
woman may not be taken to a
health care facility for treatment.

Is FGM illegal in the UK?

Under section I of the Female Genital Mutilation Act 2003, 'a person is guilty of an offence if he excises, infibulates or otherwise mutilates the whole or any part of a girl's labia majora, labia minora or clitoris.' This provision applies to women as well as to girls. There is no defence for cultural or religious reasons. So an FGM operation could not legally occur on the ground that a girl's mental health would suffer if she did not conform with the prevailing

The views expressed in the article are the author's own

custom of her community. It is only where mental or physical health grounds arise that a registered medical practitioner can carry out the operation within the law.

A person is also guilty of an offence if he or she assists a girl to mutilate her own genitalia or if the assistance involves a non-UK person mutilating her overseas. The scope of assistance is wide, covering aiding, abetting, counselling or procuring. So if a girl's father in Britain arranges or pays for the operation to be carried out abroad, he will be guilty of an offence just as he would be if the operation had been carried out in the UK,

The penalties for offences on conviction in the Crown Court are up to 14 years imprisonment or an unlimited fine (or both). Where the conviction is in the magistrates' courts, the maximum sentence is 6 months imprisonment or a maximum fine of £5,000 (or both). In Scotland, a the Prohibition of Female Genital Mutilation (Scotland) Act 2005 provides for similar offences.

Despite the scope of legislation intended to protect girls and women, the evidence suggests that the police very rarely use it to charge suspects. There have been very few convictions, and this remains a great concern for us all.

If you suspect that someone you know is at risk of being subjected to any form of FGM, you should take action to report it immediately. Time counts so please act as soon as you suspect that a girl may be at risk of FGM. If you are concerned that a British national may be taken overseas for the purpose of FGM please call the Foreign and Commonwealth Office on 020 7008 1500. You should also call:

· your local Children's Services

or Local Safeguarding Children's Board

your local Police Child Protection Unit

•the NSPCC on 0808 800 5000 •FORWARD on 0208 960 4000

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Opinion World Suicide **Prevention Day**

By Dr A Majid Katme (MBBCh, DPM) Spokesman: Islamic Medical Association/UK

THE FACTS ARE:

-1 million commit suicide in the world every year (WHO)

-3000 commit suicide every day

-20 million attempt suicide in the world every

For every case of suicide :20 people try to attempt suicide

-6000 commit suicide in the UK every year 140 000 attempt suicide in England and Wales every year.

-Women are 3 times more likely to attempt suicide than men

WHAT ISLAM SAY ABOUT SUICIDE?

Sanctity of human life is a basic Islamic concept; All Muslims believe that ALLAH(GOD) is the Creator and the only Owner of life.

He Almighty starts human life from conception and He only will end it through natural death. The moment of death is fixed only by our Creator...and not by man or doctor or judge or a Member of the Parliament

There are many verses in the final Holy Book AL QUR'AN which emphasize these basic Islamic

In the Name of ALLAH, the Most Compassionate the Most Merciful
"DO NOT KILL YOURSELVES, FOR VERILY

ALLAH HAS BEEN TO YOU MOST MERCIFUL" (chapter 4, verse 29)

.. TAKE NOT LIFE WHICH ALLAH HAS MADE SACRED"

(chapter 6, verse 151)

AND(ALLAH) IS THE ONE WHO GAVE YOU LIFE, THEN SHALL HE ORDAIN YOU TO DIE, THEN SHALL HE GIVE YOU YOUR LIFE AGAIN, TRULY MANKIND IS UNGRATEFUL"

(chapter 22, verse 66)
Also, the final prophet Muhammad(peace be upon him) has said:

"Whoever purposely throws himself(herself) from a mountain and kills himself(herself), will be in the (Hell) Fire falling down into it and abiding therein perpetually forever;

and whoever drinks poison and kills himself(herself) with it, he(she) will be carrying his poison in his(her) hand and drinking it in the (Hell) Fire wherein he will abide eternally forever;

and whoever kills himself (herself) with an iron weapon, will be carrying that weapon in his(her) hand and stabbing his(her) abdomen with it in the (Hell) Fire wherein he(she) will abide eternally for-

The European Council for Fatwa and Research(Muslim) in Europe has stated: "It is for-bidden to end deliberately (by intention) or to hasten the death of any person."

Common RISK FACTORS for suicide are:

-Lack of religious belief in the Sanctity of human life

-Alcohol and drugs

-Depression

-Loneliness and social isolation

-Bereavement

Poverty and unemployment

British Muslims should be aware of the "PUSHED" suicide laws for legalisation here in Britain like

Assisted suicide, Euthanasia(direct or indirect, voluntary or non voluntary...)

We all should join our Christian friends in their

PRO-LIFE noble humane divine campaign against Assisted suicide and Euthanasia.

On this day: 12 September World Suicide Prevention Day ,we would like to appeal to every Muslim man and woman believer to STICK to their Islamic teachings on THE PROHIBITION OF SUI-

