



Female genital mutilation/cutting position statement

1. Purpose

This position statement expresses the Australian Nursing and Midwifery Federation's (ANMF) condemnation of the practice of female genital mutilation/cutting (FGM/C) in any form and details the responsibilities the ANMF considers health services and nurses, midwives and assistants in nursing should meet to ensure women affected by FGM/C receive quality healthcare.¹

2. Definitions

The World Health Organization (WHO) defines **female genital mutilation** as all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons.²

In Australia, the term 'female cutting and /or traditional cutting' is considered more respectful of communities. The Australian Government uses the hybrid term 'female genital mutilation/cutting' to bring policy and community approaches together.³

3. Context

Female genital mutilation/cutting is illegal in Australia and it is illegal for a nurse, midwife or assistant in nursing to assist in FGM/C.⁴ This includes sending a person overseas to have such a procedure, or facilitating, supporting or encouraging someone to have such a procedure while overseas. All Australian states and territories also have mandatory reporting laws requiring selected professions, including nurses and midwives, to report suspected child abuse, including FGM/C. Despite this, Australia has no national integrated FGM/C prevention policy linking health, education and community services.

4. Position

The ANMF:

1. condemns the practice of FGM/C in any form as a fundamental violation of human rights
2. supports the current Australian legal status outlawing FGM/C and re-infibulation (defined by the WHO as re-stitching a vulva that has been opened through FGM/C)
3. supports reasonable efforts and projects aiming to eliminate the practice of FGM/C
4. is concerned that Australia has no national integrated FGM/C prevention policy linking health, education and community services and considers the development of such a policy is a priority
5. encourages nurses, midwives and assistants in nursing to work with community groups involved in eliminating FGM/C and to act as advocates for vulnerable people and their families.

¹ Assistants in nursing includes all care workers however titled.

² See <https://www.who.int/news-room/fact-sheets/detail/female-genital-mutilation>.

³ See https://www.dss.gov.au/sites/default/files/documents/02_2019/female-genital-mutilation-and-cutting-english.pdf

⁴ Ibid.



It is the position of the ANMF that:

6. People in Australia have diverse cultural beliefs that should be respected within the community. However, any cultural practice which results in any individual or group being subjected to procedures which are physically and psychologically harmful is unacceptable.
7. FGM/C has a significant impact on a person's psychological and physical wellbeing. It causes complications for menstruation; sexual problems; urinary tract infections; and bleeding as well as complications during childbirth and for the newborn.
8. Women who have experienced FGM/C should not be discriminated against and should be cared for in a culturally safe and respectful manner.
9. Health services must provide access to physical and psychological care to those affected by FGM/C. This includes providing sensitive nursing and midwifery models of care so that women who have experienced FGM/C feel safe and secure to identify their history of FGM/C when needed to support their care.
10. Health services must ensure that the antenatal care of a pregnant woman who has experienced FGM/C includes intrapartum and postpartum care planning to address potential complications resulting from the FGM/C. Where possible, the health services should allocate a midwife who is known to the woman to provide her care.
11. Health services must provide nurses, midwives and assistants in nursing who are caring for, or likely to be caring for, women who have experienced FGM/C, appropriate support education and training to enable them to develop the skills they need to provide culturally safe care, advice and management options to women affected by FGM/C.
12. Health services must offer nurses, midwives and assistants in nursing who are distressed by encountering FGM/C through their work free professional counselling.
13. Nurses, midwives and assistants in nursing have a duty of care to be informed about FGM/C and be able to provide or make referrals to appropriate and culturally sensitive health education, information, and counselling for individuals and groups as needed.

5. Position statement management

Document type: Position statement	Review process: Federal Executive every three years
Title: Female genital mutilation/cutting	Last reviewed: November 2023
Endorsed: June 1998	Next review: November 2026