
A holistic service for African women in England

FGM health services

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African Well Woman Clinics

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Britain's first African Well Woman Clinic opened in 1993, and there are now 15 of them, all but four in London, where most African immigrants live. They offer a holistic service combining health and psychological services, which is tailored to the needs of girls and women who have been subjected to FGM. It is free of charge as it is part of the UK's National Health Service.

Data on users are not collected consistently, but some clinics treat around 100 patients per year. However some clinics open for limited hours and it is not always easy for women to make an appointment. A particularly efficient model is operated by Guy's and St Thomas' in South London, which opens daily and uses a 'one-stop clinic' model clinic' where women who need deinfibulation are seen for counselling and have the surgery on the same day. This saves time and money and avoids waiting lists.

Clinics multiply to meet women's needs

One of the responses to migrant women who had suffered female genital mutilation in the UK was the establishment of a specialised service to cater for their health needs. The first African Well Woman Clinic was opened in 1993 by Harry Gordon at Northwick Park hospital in Brent, North London. Its main aim was to provide obstetric and gynaecological care to women affected by FGM. In 1997, a second clinic was established at Guy's and St Thomas' Hospital in south London by Comfort Momoh MBE. Initially, women used to come to her clinic from other cities. As the distances were great, she trained and encouraged other midwives to open their own clinics. By 1999, four clinics were operating in the UK, and today England has 15 clinics with a 16th due to open soon. London, where a large percentage of the migrant population lives, has 11 clinics, while Birmingham, Bristol, Liverpool and Nottingham have one clinic each. Neither Scotland nor Wales have a specialist FGM clinic. The clinics are all run by doctors and midwives.

Though the clinics do not compile data consistently, an idea of the number of women affected can be gained from the partial statistics available. In 2009 and 2010, University College London Hospital treated 169 cases, with 97 of them being new referrals and 72 follow-up patients, while Whittington Hospital treated 120 cases over a 1-year period in 2004/05 and 194 cases in 2007/08.

Surgery and counselling

The clinics target girls and women, both pregnant and non-pregnant, who have undergone FGM, as well as their families and communities. They provide support, information and counselling to women who have undergone FGM, and offer surgical intervention (reversal) where appropriate. They provide a synchronised service for women, and also support and educate the communities affected so as to change family behaviour.

The services provided include deinfibulation (under local or general anaesthesia), psychological and psychosexual counselling, clinical management of complications due to FGM such as cysts, abscess and infections, interpretation, sexual health services and family planning advice. The clinics also carry out research and advocacy and training work, as well as engaging and empowering communities and negotiating ancient traditions/beliefs. As all the clinics are National Health Service clinics, treatment is free, and most cases are referred by a midwife, nurse, social worker or general medical practitioner.

Variable levels of service

The clinics are clearly succeeding in providing a free, holistic service combining health and psychological services tailored to the needs of girls and women who have been subjected to FGM, and some of them are outstanding. For instance at the Acton African Well Woman Clinic in West London, regular audits are conducted to assess the number of operations and enquiries and the number of women and girls seen, including their age, age at circumcision, country of origin and duration of stay in the UK. The clinic received the Guardian Public Services Award in 2011 for 'Innovation and progress: Diversity and equality'.

However the system as a whole has some drawbacks for users. Forward, a women-led African diaspora campaign and support charity carried out a survey using a 'mystery shopper' model where they requested two young women to try out the African Well Woman Clinics and report back on their perceptions and the attitudes of providers. This revealed the following:

- All the clinics had different operating times – some of them open only once every four weeks – and were difficult to access for illiterate people;
- Referral pathways were quite difficult, with some patients having to go through their GP, some being self-referrals and some unable to access the services because they lived outside the borough (the service catchment area);
- Many of the services only focused on antenatal services. As such, quite a lot of young women felt that they did not have a voice and did not know where to go to use the services;
- Not all the clinics provided comprehensive services;
- Having a community support worker enhanced women's access and enabled them to feel more at ease in accessing the services.

Service quality would be improved if the clinics adopted consistent opening times, perhaps following the lead of Guy's and St Thomas', which opens daily and uses a 'one-stop clinic' model clinic' where women who need deinfibulation are seen for counselling and have the surgery on the same day. This saves time and money and avoids waiting lists. Monitoring the clinics' performance would be easier if they compiled consistent data on their users.

Contacts/Further Information

Contacts

Comfort Momoh MBE: comfort.momoh@gstt.nhs.uk

Further information

National Health Service page on FGM



List of FGM clinics (.pdf)



Forward (the Foundation for Women's Health, Research and Development)



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TOOL: Support services