

Ending Female Genital Mutilation: a global call to action from FIGO

Introduction

Female Genital Mutilation (FGM) affects more than 230 million women and girls in over 90 countries. The practice – defined as the partial or total removal of external female genitalia for non-medical reasons or any other injury to the female genital organs for non medical reasons – has no health benefits and is deeply rooted in sociocultural norms around purity, modesty, marriageability, initiation rites and beliefs. The international health community and numerous legal instruments have declared FGM a violation of fundamental human rights, including the right to bodily autonomy and health as a denial of freedom from discrimination and violence; the right to live free from cruel, inhuman and degrading treatment; and in extreme cases which may lead to death, the right to life itself. Despite such global efforts, projections estimate that 4.4 million girls are at risk across 2025, equivalent to more than 12,000 new cases every day.

While prevalence has declined in some countries, population growth among young girls in high-prevalence countries results in an overall ongoing increase in FGM numbers.\(^1\) Moreover, the rise of medicalisation – when FGM is performed by health professionals under the guise of safety – presents a grave threat.\(^2\) An estimated 52 million women and girls have undergone medically performed FGM and healthcare providers are increasingly asked to perform such procedures\(^1\) Cross-border practices further complicate the issue, with families seeking areas where the procedure is legal or perceived to be safer or more socially acceptable.

FGM has many short- and long-term health implications that undermine the sexual and reproductive health of women and girls across their lifespans. Short-term complications can include severe pain, haemorrhage, shock, infection or death. Long-term consequences are extensive and can include adverse feto-maternal outcomes during pregnancy and childbirth, chronic pain, urinary incontinence, infertility, menstrual disturbances and sexual dysfunction. Moreover, routine health procedures may be complicated due to anatomical differences brought about by FGM, including gynaecologic examinations, cervical cancer screening, abortions and intrauterine device placement. Recognising that FGM survivors are at significantly higher risk for anxiety, depression and post-traumatic stress disorder (PTSD), societies should advocate for and support the provision of mental health interventions adapted to their specific needs and consistent with World Health Organization (WHO) guidelines. Organization (WHO) guidelines.

FIGO's position on the issue

FIGO has long recognised FGM as a severe violation of human rights and a significant public health concern. ^{11,12} In its 1994 resolution, FIGO condemned the practice as harmful, medically unnecessary and rooted in gender-based discrimination. FIGO urged its member societies to advocate for legal reform, public awareness and collaboration with global partners. Since then, FIGO has continued its commitment by supporting clinical education on FGM-related complications, integrating gender equity into reproductive health agendas and amplifying survivor voices. Through partnerships with organisations such as WHO, UNFPA and UNICEF, FIGO contributes to global efforts to eliminate FGM

by promoting evidence-based care, training health professionals and strengthening advocacy across its global network.

A broad coalition of professional organisations, global health agencies and civil society organisations actively oppose FGM, recognising it as a violation of human rights, an extreme form of gender-based violence and a major public health emergency. WHO has taken a leading role, most recently releasing updated guidelines in April 2025 that expand on previous recommendations to include clinical management of complications, mental health support, prevention strategies and a strong stance against the medicalisation of FGM. Alongside WHO, many other professional organisations and advocacy groups have called for legal reform, healthcare provider training and survivor-centred care. Together, these efforts underscore a unified global commitment to eliminating FGM through policy change, education, community engagement, increased funding and ethical medical practice.

FIGO unequivocally condemns FGM in all forms, including medicalisation, as a violation of human rights and medical ethics. FIGO pledges to advocate for the global abandonment of FGM and support survivor-centred care.

FIGO's recommendations

OBGYN member societies are encouraged to address persistent misconceptions linking FGM to religious obligation, which continue to influence its practice in many settings. Engaging faith leaders and promoting culturally sensitive education can help dispel these beliefs. Societies should also recognise and respond to the growing trend of medicalised FGM – particularly its performance under the guise of harm reduction. Upholding ethical standards and supporting informed community dialogue are essential to countering these evolving challenges.

To accelerate progress towards the abandonment of FGM, FIGO urges OBGYN member societies and healthcare workers to take the following actions:

- Increase capacity strengthening efforts: FIGO urges its member societies to lead efforts to implement comprehensive training programmes for all health workers on FGM prevention and management. Training should be integrated into both pre-service and in-service education, aiming to build knowledge, clinical skills, confidence and effective communication and counselling. It is essential to provide access to capacity strengthening tools, including WHO clinical guidelines, handbooks, and personcentred communication guides. These resources support health workers to provide appropriate care at the point of service. Training should also address personal values, promote cultural competence and reduce stigma associated with FGM to ensure respectful, patient-centred, trauma-informed care.
- Develop and enforce ethical guidelines: FIGO encourages its member societies
 to advocate for laws and professional codes of conduct that recommend healthcare
 workers adhere to a zero-tolerance approach to FGM, including medicalised
 procedures.⁶

- Improve education and awareness: FIGO emphasises that its member societies should raise awareness among women, girls, men and boys in the community about the immediate dangers and long-term consequences of FGM. Societies should include social workers, social media influencers and community and religious leaders in educational endeavours. FIGO urges members to become visible champions in the movement to eliminate FGM by issuing their own statements, hosting campaigns and supporting local initiatives. Educational interventions for both men and boys and women and girls are crucial for FGM abandonment, particularly given men's significant role in perpetuating the practice.²
- Manage complications: FIGO strongly recommends that national OBGYN societies ensure the availability of reconstructive procedures when requested by survivors of FGM. These procedures can significantly improve health and wellbeing, addressing complications like chronic pain, sexual dysfunction and psychological trauma. The timing of procedures should be guided by expert knowledge, women's preferences and local health system capacities, with pre-procedure counselling offering unbiased information on benefits, risks and expected changes. In high-prevalence countries, where reconstructive surgeries remain scarce, FIGO advocates for specialised training for OBGYNs to build professional capacity and ensure the provision of these essential services. FIGO encourages member societies to expand access to sexual health support for survivors, particularly in regions with high FGM prevalence.
- Support mental health interventions: FIGO is supportive of the advocacy for and provision of mental health interventions adapted to the specific needs of FGM survivors and consistent with WHO guidelines.
- Conduct research: FIGO encourages member societies to collaborate with researchers, NGOs and governments to strengthen evidence-based care, and to research and document the prevalence and harmful effects of FGM.^{13,14,16}

Collectively, these recommendations reflect FIGO's unwavering commitment to advancing the health, rights and dignity of women and girls, including those affected by FGM. By mobilising its global network of OBGYN professionals, FIGO calls for unified action to prevent FGM and to ensure that survivors receive respectful, evidence-based and holistic care – with rights-based, person-centred and trauma-informed care in mind. True progress requires more than clinical intervention. It demands transformation of harmful cultural norms, legal accountability and sustained investment in education and research. FIGO recognises that ending FGM is not only a medical responsibility but a moral imperative, grounded in gender justice and human dignity. Through collaboration with governments, communities and international partners, FIGO envisions a future where no girl is subjected to this violent practice and every survivor receives the compassionate care and justice they deserve.

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T +44 (0)20 7928 1166
E figo@figo.org
www.figo.org | @FIGOHQ

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