

Preferences for deinfibulation (opening) surgery and female genital mutilation service provision: a UK qualitative study

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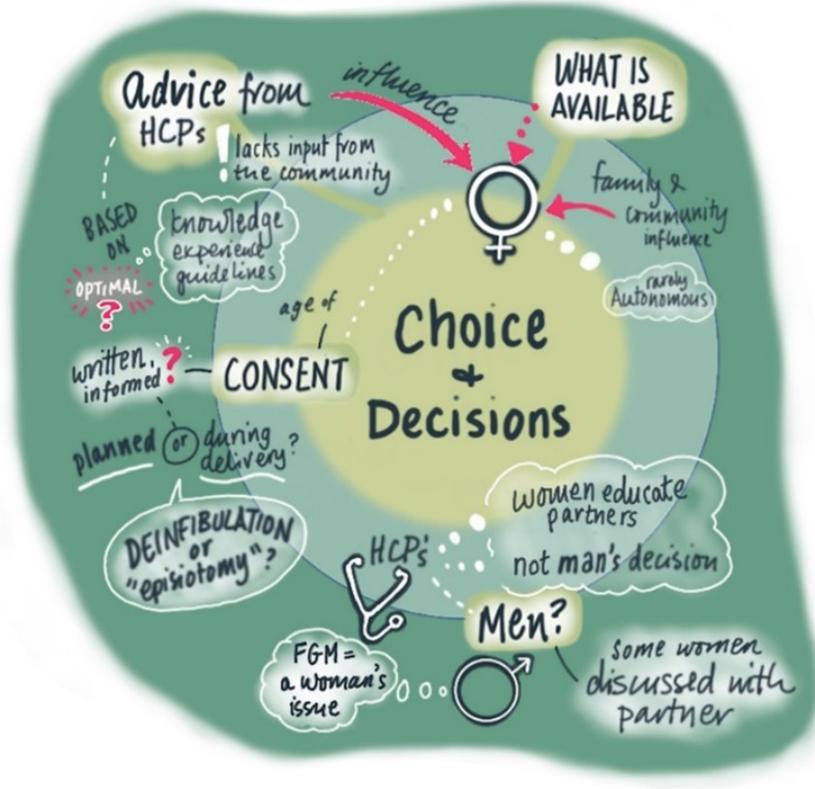
Abstract

Objective: To explore the views of female genital mutilation (FGM) survivors, men, and healthcare professionals (HCPs) on the timing of deinfibulation surgery and NHS service provision. **Design:** Qualitative study informed by the sound of silence framework. **Setting:** Survivors and men were recruited from three FGM prevalent areas of England. HCPs and stakeholders were from across the UK. **Sample:** 44 survivors, 13 men and 44 HCPs. 10 participants at two community workshops and 30 stakeholders at a national workshop. **Methods:** Hybrid framework analysis of 101 interviews and three workshops. **Results:** There was no consensus across groups on the optimal timing of deinfibulation for survivors who wished to be deinfibulated. Within group, survivors expressed a preference for deinfibulation pre-pregnancy and HCPs antenatal deinfibulation. There was no consensus for men. Participants reported that deinfibulation should take place in a hospital setting and be undertaken by a suitable HCP. Decision making around deinfibulation was complex but for those who underwent surgery it helped to mitigate FGM impacts. Whilst there were examples of good practice, in general, FGM service provision was sub-optimal. **Conclusion:** Deinfibulation services need to be widely advertised. Information should highlight that the procedure can be carried out at different time points, according to preference, and in a hospital by suitable HCPs. Future services should ideally be developed with survivors, to ensure that they are clinically and culturally appropriate. Guidelines would benefit from being updated to reflect the needs of survivors and to ensure consistency in provision. Study registration number ISRCTN 14710507

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Figure 3. Influences on decision-making for deinfibulation.docx available at <https://authorea.com/users/485421/articles/570820-preferences-for-deinfibulation-opening-surgery-and-female-genital-mutilation-service-provision-a-uk-qualitative-study>

