

Spain asks parents to sign declaration to protect daughters from FGM

Protocol says girls from countries where female genital mutilation is practised should meet doctors before and after visits

Ashifa Kassam in Madrid

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Doctors in hospital in San Sebastian, Spain.
The country is introducing a protocol to combat FGM.

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Spanish health professionals will step up scrutiny of families from countries where female genital mutilation (FGM) is practised and in some cases ask parents to sign a declaration promising that their girls will not be subject to FGM, as part of the country's first nationwide protocol on the practice.

Expected to be approved on Wednesday by health authorities from the central and regional governments, the protocol outlines a comprehensive strategy for detecting, treating and preventing FGM among at-risk populations in Spain. It is expected to be implemented in the coming months.

Spain made FGM illegal in 2003, but it is clear that more needs to be done to tackle the issue, said Blanca Hernández of Spain's health ministry. "Immigration has made it so that this problem isn't limited to FGM-affected countries. It exists here too and we're obliged, as mandated by the UN, to take action against any form of violence against women," she said in a statement.

While it is impossible to gauge the extent of FGM in Spain, a draft of the protocol obtained by the Guardian noted there are nearly 17,000 girls under the age of 14 years in Spain whose families are from FGM-affected countries.

The 114-page document outlines a variety of measures that will be required of health professionals, including asking parents from countries where FGM is practised and who are planning a visit home to sign a declaration vowing that FGM will not be carried out on their daughters.

Parents who refuse to sign the declaration risk being reported to child protection services. Public prosecutors may also be notified, in order to determine whether precautionary measures need to be put in place to protect the child.

The hope, explained the protocol, is that families could produce the signed declaration during their visit home to counter any potential pressures to perform the practice. Once the family returns to Spain, the girls must be examined again by a doctor, who could initiate legal action against the parents if FGM is detected.

The protocol targets girls from FGM-affected communities in Spain, asking doctors to develop a relationship with the family that allows the health and legal consequences of FGM to be discussed.

Whenever a doctor attends a girl from an FGM-affected community, the protocol specifies that they must check for any signs of FGM. If FGM has been carried out on the girl, child protection services must be notified and an attempt must be made to find out whether the practice took place before the child arrived in Spain. If there are no signs of FGM, the doctor must also note this on the file.

Much of the protocol echoes in that already in place in Catalonia, where authorities detected the first case of FGM in 1993. Home to the largest at-risk population in Spain, Catalonia developed a protocol on FGM in 2007. Aragon and Navarre soon followed suite.

The Spanish government began working on a countrywide protocol in 2011, said Nieves Crespo, who manages FGM prevention and intervention programs for the Unión de Asociaciones Familiares (Union of Family Associations). As part of the process, the government collaborated with regional authorities and several associations, including Crespo's.

Calling the protocol an "important achievement" she noted that the challenge now lies in how it will be implemented across the country, including the challenge of ensuring that doctors follow it.

"If we are able to train all the health professionals properly, we'll have more possibilities that the protocol will work," she said. Poor implementation could alienate at-risk communities in Spain and drive them away from the health care system, she said, potentially forcing the practice further underground.

As the protocol is directed solely at health care professionals, it is the first step in a much larger process, she said, adding that coordination between groups as diverse as the education and legal system is needed to meaningfully address the issue. “This protocol isn’t the solution, it’s a tool,” Crespo added.