



## GENITAL CUTTING

# Moving from rites to rights

It takes great courage to combat deeply ingrained traditions, such as female genital mutilation, but trends are changing with the help of legislation and education.

**Antoniella Gatt** from the National Commission for the Promotion of Equality (NCPE) says it will be a slow road to success, but every uncut girl is a success story in itself.

*"I still remember the day they tied my wrists and legs down to the surgical table to prick and mutilate the hell out of me. I screamed with pain as I fought to get free, but no one listened to the cries rising from my depth. The pain was unbearable and I felt like my body was sitting on a fast sewing machine. That deep and private pain was stamped into my mind, forever."*

- Soraya Miré, activist and speaker against female genital mutilation/cutting.

This is the reality faced by millions of girls and women victims of female genital mutilation/cutting (FGM/C), the partial or total removal of the female genitals - a worldwide procedure based on tradition and religion.

The World Health Organisation states that FGM/C interferes with the normal female genital organ and its natural functions. It puts health at great risk and it can cause severe health complications which, at times, lead to death.

Moreover, girls who went through FGM/C are subject to long-term consequences, including recurrent infections, cysts, infertility and complications during childbirth.

It is believed that a genitally mutilated girl ensures virginity and fidelity during marriage because it controls her sexual desire.

Girls who have not been genitally mutilated are considered as dirty and not hygienic.

WHO, the United Nations Children's Fund (Unicef) and the United Nations Population Fund (UNFPA), with the wider support of the UN, have been working on

opposing this practice for quite some time now. In 2012, all the UN member states unanimously agreed to ban FGM/C.

Similarly, the EU Charter of Fundamental Rights and Freedoms strongly condemns FGM/C as a violation of fundamental human rights, and the EC has been working to prevent FGM/C through its Daphne Programmes.

FGM/C has also emerged in Malta. Focus groups have been held with migrant families, and seminars and lectures have been organised by the Migrant Health Unit of the Health Ministry. Malta disapproves the practice of FGM/C.

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It will be a slow road to success, but every uncut girl is a success story in itself.

"Women deserve the right to be whole and complete. Female genital mutilation is a violation of that right," said Ted Chaiban, representative of Unicef.

### The WHO identifies four types of FGM/C:

**Type I:** Clitoridectomy - partial or total removal of the clitoris (a small, sensitive and erectile part of the female genitals) and/or the clitoral hood.

**Type II:** Excision - partial or total removal of the clitoris and the *labia minora*, with or without excision of the *labia majora* (the labia are the 'lips' that surround the vagina).

**Type III:** Infibulation - narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the inner or outer labia with or without removal of the clitoris.

**Type IV:** All other harmful procedures to the female genitalia for non-medical purposes, for example, pricking, piercing, incising, scraping or cauterisation of the genital area.

### Facts and figures

- 100-140 million females were genitally mutilated worldwide.
- 92.5 million genitally mutilated females come from Africa.
  - Three million African girls are at risk of the practice every year.
  - 20 out of the 28 African countries where FGM/C is found have banned the practice.
  - 8,809 genitally mutilated females come from EU countries.
  - 90 per cent of FGM/C cases are Types I, II or IV.



## Let's talk about thrush...

Thrush is a very common infection that is caused by yeast called *Candida albicans*. Normally, the *Candida* organisms live harmlessly in the gut and in one in five women they also reside in the vagina.

They are kept in check by your immune system, good bacteria and the pH levels in a healthy vagina. But it does not take much for the finely tuned systems to start getting unbalanced and *Candida* will start to overgrow if the conditions are favourable.

That is why most women will probably experience at least one attack of thrush in their life, and some suffer from it more often.

Thrush is not a sexually transmitted disease - you may get infected another way - but if you are sexually active, it may pass between you and your partner.

The first, most obvious sign of infection is discomfort 'down below'. You might feel a bit itchy or sore around the labia and the entrance to the vagina. You might also feel a little swollen.

The next sign, which not all women will notice, is a whitish, generally odourless discharge. Some people say that it looks a little bit like cottage cheese.

Other symptoms are an uncomfortable, burning sensation when you pass urine, and pain or a burning sensation during sex.

Canesten has a wide range of thrush treatments that offer a combined internal/oral treatment to treat the internal infection and cream to alleviate external symptoms fast - speak to your doctor or pharmacist to find out more about the range. Details at [www.canesten.co.uk](http://www.canesten.co.uk).

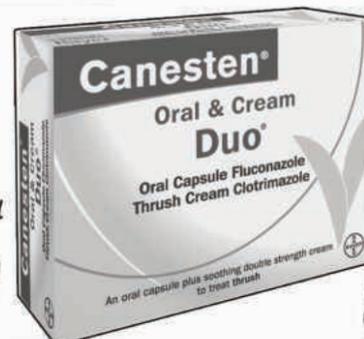
## Canesten®

### It takes... two

Canesten Oral & Cream Duo

This is a convenient pack containing two effective treatments for thrush - a single Canesten Oral capsule, to help clear the infection and a handy tube of Canesten 2% Thrush Cream to immediately treat the external symptoms.

Contains Fluconazole and Clotrimazole. This is a medicine always read the leaflet and ask your pharmacist or doctor for advice.



Soothes and Clears



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