

Title:

Female Genital Cutting (FGC) in the Eyes of American Healthcare Providers: We Want to Help

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Session Title:

Rising Stars of Research and Scholarship Invited Student Poster Session 2

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American Context, Female Genital Cutting and Perinatal Care

References:

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Abstract Summary:

Presenting this educational poster is a response to the current global and national awareness about FGC. American nurses, nurse-midwives, and midwives are well positioned to engage in and promote effective communication patterns, safe and appropriate interventions and referral relationships that are acceptable to their clients.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
Demonstrate knowledge to address the current challenges that occur for pregnant women with FGC during perinatal care.	Oral Discussion, MSQ, and Poster.
Identify the various social, cultural and policy aspects that concern FGC within American Context	Oral Discussion, MSQ, and Poster

Abstract Text:

Female Genital Cutting (FGC) in The Eyes of American Healthcare Providers: We Want to Help

Aim: This poster explores the medical, social, cultural and ethical controversies of FGC in association with the perinatal experiences and maternity care in American context. The specific objectives of this learning-poster presentation are to: firstly, demonstrate knowledge to address the current challenges that occur for pregnant women with FGC during perinatal care. Secondly, Identify the various social, cultural and policy aspects that concern FGC within American Context.

Background: Female genital cutting (FGC) is a traditional practice in parts of Africa, the Middle East and Asia. It is a public health and human rights issue because it affects at least 200 million women worldwide. Increasing migration to USA and elsewhere from these areas precedes the care of women with FGC to become a global concern. In USA, pregnant women who experienced FGC are vulnerable as they may face more physical and emotional challenges than their non-pregnant counterparts. Their need to access optimal perinatal care is higher as FGC, particularly with more extensive cutting (infibulation), is one of the indirect causes of perinatal morbidity.

However, caring for pregnant women with FGC, particularly during labor, is a key challenge within the American maternity healthcare. This challenge occurs because there is a lack of understanding about the socio-cultural aspects of FGC and lack of knowledge of how to manage the clinical complications that are associated with it. This leads to a decrease in the trust-relationship between the provider and antenatal patient, which may in turn decrease effective therapeutic communication and resultant culturally competent and safe care.

Significance: Presenting this educational poster is a response to the current global and national awareness about FGC. American nurses, nurse-midwives, and midwives are well positioned to engage in and promote effective communication patterns, safe and appropriate interventions and referral relationships that are acceptable to their clients. In comparison with their counterparts, they typically allocate a much longer timeframe for initial and subsequent perinatal visits. Thus allowing for more time to establish a genuine and trusting relationship that will encourage women with FGC to elaborate on needed care and concerns.

Theoretical Framework: The foundation of Adult Learning Theory (ALT) is the theoretical framework for this presentation as it is targeting adult populations. Integrating ALT emphasizes the self-reflective learning strategy, which enhances effective learning-engagement.

Implications: Sharing the information in this poster will imply positively on the quality of health of this group of women. Such positive implications will deepen the healthcare provider's understanding about FGC; enhance the continuity of care, delicate partnership, and trusting relationship for women with FGC; encourage effective-therapeutic communication and engage in mutual problem solving; and provide various options to manage FGC cases.