

Female Circumcision (FC) Type III/infubulation: Culturally sensitive provider educational module to identify, assess, and provide needed services for FC affected communities in the USA

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Abstract

In the current health care system there are many opportunities to screen or assess risk for FC among the Somali women's community in Seattle. Often clinicians, in particular primary care providers, have minimum knowledge of FC, the practicing communities, immediate and long-term health complications, and how to start the conversation (assess) patients from this culture. In this practice transformation process a culturally focused power point lecture was presented to seven clinicians who care for Women of Somalia in the community. They were presented with a pretest prior to lecture; followed by a posttest to measure gained knowledge, identify further learning needs, and suggestions for further information.

Results: there were eight participants: one Midwife, one Nurse practitioner, one Doula, and five Nurses (three Delivery nurses). The number of FC patients the clinicians worked with was >52; only one provider had any formal training and that was at a professional conference; and the participants were equally split access to clinical

guideline – 50% stated there were no sources available to them while the other 50% had found guidelines in Ethno-medicine and under the UK standards for FC care. It is apparent that educating health providers about FC in Various African and other nations is an important subject as the provider beliefs about this subject differed significantly from the patient's perspectives, greatly interfering with the professional and patient-centered relationship that is to be formed.