

JSNA Health and Wellbeing Profile 2026/27

Female Genital Mutilation (FGM)

Summary points

- During 2025 there were 90 newly recorded FGM cases in Bristol¹
- Newly recorded cases of FGM have been increasing both locally and nationally since 2021. However, Bristol experienced a decrease in 2025 conflicting with the national trend.

Findings

Female Genital Mutilation (FGM) refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. FGM has been illegal in the UK since 1985, with the law strengthened in 2003 to prevent girls travelling from the UK and undergoing FGM abroad.

The FGM Enhanced Dataset (FGMED) supports the Department of Health's FGM Prevention Programme. Data is collected by healthcare providers in England, and it is a legal requirement for acute hospital providers, mental health providers and GP practices to submit to the FGMED.

Because of the hidden nature of the practice of FGM and the location of the physical signs of the procedure, data is partial at best and it is not possible to assess how many UK or Bristol based women undergo FGM in a given time period. The FGM procedures could have taken place at any time (not necessarily in the last year).

Nationally (England only), there were 4,195 newly recorded women and girls in the period January - December 2025 (Figure 1). The first full year of FGM recording in 2016 noted 5,675 newly recorded women and girls, which reduced significantly over the next five years to 2,990 newly recorded women and girls in 2021. Since then the numbers have slowly been increasing with the latest data reflecting numbers experienced in 2018 (4,190). Newly Recorded women and girls with FGM are those who have had their FGM information collected in the FGMED for the first time. This will include those identified as having FGM and those having treatment for their FGM. 'Newly recorded' does not necessarily mean that the attendance is the woman or girl's first attendance for FGM.

During 2025 there were 90 newly recorded FGM cases in Bristol, this is a decrease on the previous year, bucking the increasing national trend, and is the lowest number recorded since recording began in 2015 (Figure 1).

This data presents a picture of the prevalence of FGM amongst women and girls in Bristol (women and girls who have undergone FGM at some point in their lives). As such we would expect the numbers of newly recorded cases to decrease each year as those living with FGM become more likely to have been captured in the data from previous years. However, as is evidenced this year in England the numbers have increased suggesting that there are still many women and girls who are coming into contact with our healthcare providers for the first time. Bristol has a strong reputation for FGM awareness and we would therefore expect local medical staff to be able to identify FGM and record appropriately.

¹ <https://digital.nhs.uk/data-and-information/publications/statistical/female-genital-mutilation/>

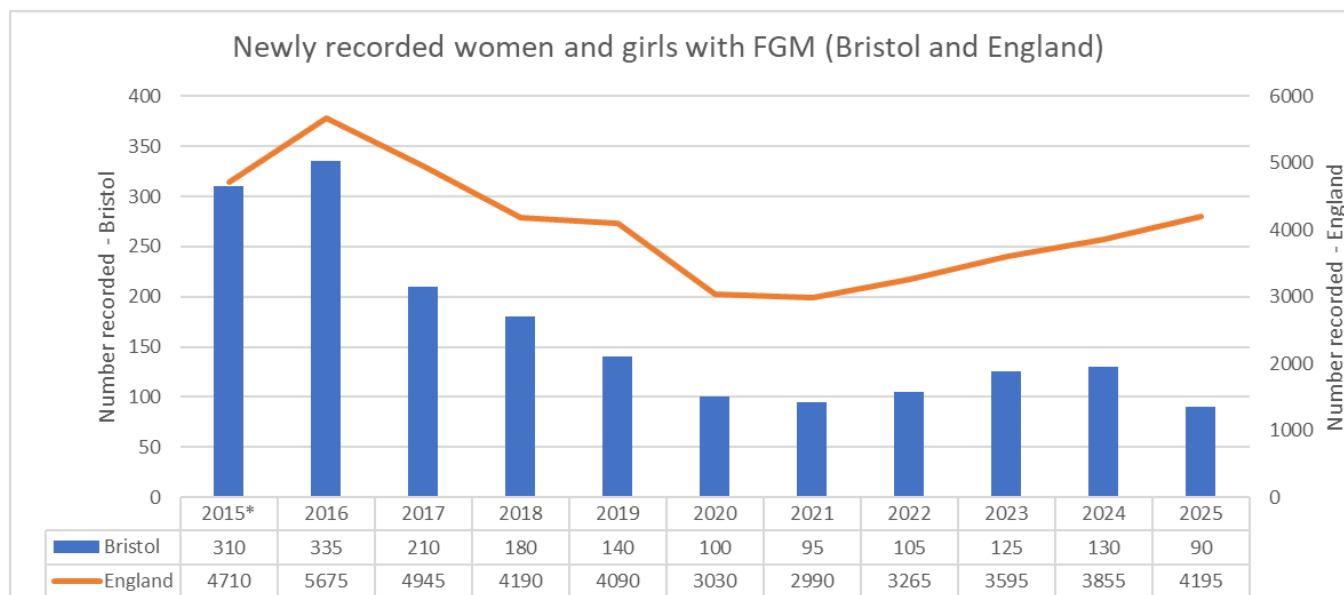


Figure 1: Newly recorded girls and women with FGM in the FGM Enhanced Dataset, NHS England (April 2026)

It is not possible to draw any comparisons with other areas but the FGMED allows us to identify the number of newly recorded attendances in other English Core Cities in 2025 as follows: Birmingham (355), Leeds (25), Liverpool (230), Manchester (180), Newcastle (75), Nottingham (70) and Sheffield (125). All English core cities experienced an increase in newly recorded attendances compared to the previous year, with the exception of Birmingham and Bristol.

Equalities data:

Over 230 million girls and women alive today have undergone female genital mutilation (FGM), according to a 2024 UNICEF report². The updated global estimates show a 15 per cent increase in the total number of survivors – or 30 million more girls and women – compared to data released eight years ago. It is mostly carried out on young girls between infancy and age 15. FGM is child abuse and is recognized internationally as a violation of the human rights of girls and women.

Further data / links / consultations:

- <https://www.nhs.uk/conditions/female-genital-mutilation-fgm/>
- <https://www.who.int/news-room/fact-sheets/detail/female-genital-mutilation>
- <https://digital.nhs.uk/data-and-information/publications/statistical/female-genital-mutilation>
- <https://data.unicef.org/topic/child-protection/female-genital-mutilation/>
- <https://www.cps.gov.uk/types-crime/violence-against-women-and-girls>

COVID 19 Impact:

The COVID-19 pandemic has exacerbated existing gender inequalities and increased the risk of gender-based violence.³ Globally we know schools closures, movement restriction, and

²Female Genital Mutilation: A global concern - UNICEF DATA UNICEF, New York 2024

³ COVID-19 hindering progress against female genital mutilation - The Lancet Public Health

confinement stopped access to prevention, protection, and care services, leaving girls vulnerable, especially in hard-to-reach areas. In other parts of the world, COVID-19 lockdowns presented opportunities to carry out FGM “undetected”, and the lack of integration of services within the COVID-19 response left girls at risk with no recourse to essential prevention, protection, and support services. The latest UN Population Fund (UNFPA) projections suggest that due to the disruption of programmes to prevent FGM in response to COVID-19, 2 million cases might occur over the next decade that could have been averted.

Date updated: April 2026

Next update due: May 2027