

# FGM POLICY

## The definition of FGM:

The World Health Organisation (WHO) defines female genital mutilation (FGM) as "all procedures (not operations) which involve partial or total removal of the external female genitalia or injury to the female genital organs whether for cultural or other non-therapeutic reasons" (WHO, 1996).

## Legal advice:

The practice of FGM is illegal in the UK, carries a maximum prison term of 14 years for any UK national or permanent resident convicted of carrying it out, or aiding and abetting the process, while in the UK or overseas.

It is therefore a child protection issue and a referral should be made to social services to enable enquiries under S.47 to be made if the practice is suspected. Any situation where an intentional or actual FGM is suspected should be reported.

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## Why is it done?

FGM is carried out for cultural, religious and social reasons within families and communities. The school summer holidays in particular are when many young girls are taken abroad, often to their family's birth country, to have FGM performed.

It is practised in 28 countries in Africa and some in the Middle East and Asia.

UK communities that are most at risk of FGM include Kenyan, Somali, Sudanese, Sierra Leonean, Egyptian, Nigerian and Eritrean.

Non-African communities that practise FGM include Yemeni, Afghani, Kurdish, Indonesian and Pakistani.

## Effects of FGM

FGM can have serious consequences for a woman's health and in some instances can lead to death. Infections, severe pain, bleeding and tetanus are just some of the short term consequences. In the long term women can suffer pain and discomfort during sex, chronic pain, infection, cysts, abscesses, difficulties with periods and fertility problems. Women also often

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suffer severe psychological trauma, including flashbacks and depression.

There are no health benefits to FGM. Removing and damaging healthy and normal female genital tissue interferes with the natural functions of girls' and women's bodies.

Case histories and personal accounts taken from women indicate that FGM is an extremely traumatic experience for girls and women, which stays with them for the rest of their lives. Young women receiving psychological counselling in the UK report feelings of betrayal by parents, as well as regret and anger.

Identifying girls at risk of FGM is not straight forward because:

- It may be the only incidence of child abuse, usually from what is otherwise a loving family.
- There are rarely reasons for routine examinations of girls' genitalia, so they are not routinely seen by people outside the family
- Girls are unlikely to disclose FGM for fear of the consequences to and from family members and the wider community.

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Indications that FGM may be about to take place include:

- The family comes from a community that is known to practice FGM
- A child may talk about a long holiday to her country of origin or another country where the practice is prevalent
- A child may confide to a professional that she is to have a "special procedure" or to attend a special occasion

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Indications that FGM may have already taken place include:

- Signs include difficulty walking, sitting or standing;
- A child may spend long periods of time away from the classroom during the day with bladder or menstrual problems
- A prolonged absence from school
- A child requiring to be excused from physical exercise lessons without the support of the GP;
- Reluctance to undergo normal medical examinations;
- Asking for help but not being explicit due to embarrassment or fear

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If professionals can identify signs that FGM has already taken place:

- The girl or women affected can be offered help to deal with the consequences of FGM;
- Enquiries can be made about other family members who may need to be safeguarded from harm;
- Criminal investigations into the perpetrators and to protect others from harm. Where a child is thought to be at risk of FGM, practitioners should be alert to the need to act quickly
- before the child is abused through the FGM procedure in the UK or taken abroad to undergo the procedure.

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Any indication or concern that a child is at immediate risk of, or has undergone, female genital mutilation should be treated as an urgent Child Protection issue in school and the Information shared in line with HSLC Child Protection Policy and Procedures.

Additional Free Training The free Home Officer Female Genital Mutilation e-learning can be accessed at:

<https://www.fgmelearning.co.uk/>