



Safeguarding Children from Female Genital Mutilation

Female Genital Mutilation (FGM) refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. Other terms used include sunna, circumcision, initiation or cut. FGM is illegal in the UK. In June 2015 the Government issued 'A Statement Opposing Female Genital Mutilation' in which FGM was identified as child abuse that can have 'devastating health consequences for girls and women'.

The cultural background of FGM is one of the reasons that inhibit women from seeking help. City University London carried out research in 2014 which concluded that, '... approximately 103,000 women aged 15-49 and approximately 24,000 women aged 50 and over who have migrated to England and Wales are living with the consequences of FGM. In addition, approximately 10,000 girls aged under 15 who have migrated to England and Wales are likely to have undergone FGM. FGM is carried out on girls as young as 5 years old and, in some countries, it is carried out shortly after birth.

FGM is prevalent in at least 30 countries, from the Atlantic coast to the Horn of Africa, areas of the Middle East and some Asian countries. In many of these cultures, FGM is a deeply embedded social norm, practised by families for a variety of complex reasons. It is often thought to be essential for a girl to experience FGM if she is to become a marriageable woman. The practice is not seen as essential to the beliefs of any faith.

Some of the reasons given for FGM being carried out are:

- It brings status and respect
- It preserves a girl's virginity/chastity.
- It is a rite of passage.
- It gives a girl social acceptance, especially for marriage.
- It upholds the family honour.
- It cleanses and purifies
- It gives the girl and her family a sense of belonging to the community.
- It rids the family of bad luck or evil spirits.
- It is incorrectly believed to make childbirth safer for an infant.
- It is aesthetically desirable.
- It perpetuates a custom/tradition.

Symptoms of FGM include:

- Difficulty urinating
- Incontinence
- Frequent or chronic vaginal, pelvic or urinary infections
- Menstrual problems
- Kidney damage and possible failure
- Cysts and abscesses

- Pain when having sex
- Infertility
- Complications during pregnancy and childbirth
- Emotional and mental health problems
- Shock due to loss of blood

Action to be taken

It is now mandatory to report FGM and AFA staff must, as soon as they are aware of a disclosure, or a concern that FGM may have taken place or is being arranged, contact the Designated Safeguarding Lead and refer to the Safeguarding procedures. If a girl states that she has been subject to FGM, or there are signs that it has been carried out, staff should contact a Senior Manager. In an emergency, the Police and Ambulance Service should be contacted directly.

FGM is a serious criminal offence and there is a penalty of up to 14 years in prison for anyone committing or helping someone to commit it. If FGM is committed, each person who has been responsible for a child whilst it has been carried out is considered guilty of an offence.

For further information

<https://www.nhs.uk/conditions/female-genital-mutilation-fgm/>

<https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation>

<https://www.gov.uk/female-genital-mutilation-help-advice>

<https://www.who.int/news-room/fact-sheets/detail/female-genital-mutilation>

<https://www.endfgm.eu/female-genital-mutilation/what-is-fgm/>

Also refer to:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/942454/Working_together_to_safeguard_children_inter_agency_guidance.pdf

Connected Policies or Guidance

Name of Policy / Guidance	Relevant for
Record Keeping and Confidentiality Policy	All staff and Foster Carers
Safeguarding Policy	All staff and Foster Carers
Foster Carer Handbook	Foster Carers, Placement Managers
Safeguarding Children from Honour-Based Violence	All staff and Foster Carers

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