

Stop

female genital
mutilation

Be informed

Be aware

Be ready to take action



Merton
Safeguarding
Children Board

Stop

Female Genital Mutilation

comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons (World Health Organisation).

It is also sometimes referred to as female genital cutting or female circumcision. There are no health benefits to FGM and it is recognised internationally as a human rights violation.

UK Statistics

- 60,000 girls under 15 are at risk of FGM in the UK
- 137,000 girls and women are living with the consequences of FGM in the UK
- Over 130 million girls and women worldwide have undergone FGM
- FGM is practiced in more than 29 countries across Africa, parts of the Middle East, South East Asia and countries where migrants from FGM affected communities live.

Signs that FGM has occurred

- prolonged absence from schools
- frequent need to go to the toilet
- long break to urinate
- urinary tract infections
- noticeable behaviour change
- change of dress from tight to loose fitting clothing
- menstrual problems
- difficulty in sitting down comfortably
- complain about pain between their legs
- talk of something somebody did to them that they are not allowed to talk about

Health implications of FGM

- death
- severe pain and shock

- broken limbs from being held down
- injury to adjacent tissues
- urine retention
- increased risk of HIV and AIDS
- uterus, vaginal and pelvic infections
- cysts and neuromas
- infertility
- increased risk of fistula
- complications in childbirth
- depression and post-natal depression
- psychosexual problems
- pregnancy and child birth
- sexual dysfunction
- difficulties in menstruation
- trauma and flashbacks

Justifications for FGM

Many affected communities believe that FGM is a necessary custom to ensure that a girl is accepted within the community and eligible for marriage.

Families who practice FGM on girls usually see it as a way of safeguarding their future.

Other reasons include:

- perceived health benefits
 - preservation of the girl's virginity
 - cleanliness
 - rite of passage into womanhood
 - status in the community
 - protection of family honour
 - perceived religious justifications
- There are no religions that advocate for FGM

FGM and the Law

FGM is illegal in the UK. In England, Wales and Northern Ireland, civil and criminal legislation on FGM is contained in the **Female Genital Mutilation Act 2003** (the act). In Scotland, FGM legislation is contained in the **Prohibition of Female Genital Mutilation (Scotland) Act 2005**. The Female Genital Mutilation Act 2003 was amended by sections 70-75 of the **Serious Crime Act 2015**.

It is an offence for any person (regardless of their nationality or residence status) to:

- perform FGM in England and Wales (section 1 of the act)
- assist a girl to carry out FGM on herself in England and Wales (section 2 of the act)
- assist (from England or Wales) a non-UK person to carry out FGM outside the UK on a UK national or UK resident (section 3 of the act)

Any person found guilty of an offence under sections 1, 2, 3 of the Act faces up to 14 years' imprisonment, a fine or both. Any person found guilty of an offence under section 3A of the act, faces up to 7 years' imprisonment, a fine or both.

Under general provisions of the law which apply to all criminal offences, it is also an offence to:

- aid, abet, counsel or procure a person to commit an FGM offence
- encourage or assist a person to commit an FGM offence
- attempt to commit an FGM offence
- conspire to commit an FGM offence

Any person found guilty of such an offence faces the same maximum penalty for these offences under the act. It is also an offence to fail to protect a girl from FGM and this carries a penalty of up 7 year in prison.

FGM Mandatory Duty and Intervention Flow Chart

You are concerned that a child may have had FGM or may be at risk of FGM?

- The child/young person has told you that they have had FGM
- You have observed a physical sign appearing to show your patient has had FGM

**Mandatory reporting duty applies
The professional who initially identified FGM (you) calls 101 to make a report**

Remember...

- Record all decisions/actions.
- Be prepared for the police to call you back.
- Best practice is to report before COP next working day.
- Update your designated safeguarding lead.

You will have to provide...

- Girl's name, DOB and address.
- Your contact details.
- Contact details of your safeguarding lead.

Is an immediate response required for the identified girl OR another child/other children?

No

Yes

Police and social care take immediate action as appropriate. No further action by you is needed at this point

Assessment of case is required

Multi-agency safeguarding meeting convened in line with local safeguarding arrangements, including police, social care and health as a minimum. The assessment (with consent) may consider the need for:

- Referral for genital examination using colposcope to the designated service in your area.
- General health assessment (physical and mental health).
- Treatment and/or referral for any health needs identified (whether related to the FGM or not).
- Include assessment of presence/absence of additional safeguarding concerns, and document and act accordingly.

Social care and police develop and appropriate pathway.

This is likely to consider:

- Use of FGM Protection orders
- Whether a care plan or other safeguarding response is required
- If safeguarding response required for siblings / family members / others identified through the contact
- Referral to community / third sector
- If there is a need for criminal investigation

Has a parent/carer disclosed that a girl has had FGM?

Follow local safeguarding procedures and refer to children's social care.

Do you consider the girl to be at risk of FGM?

A social care referral may not be required at this point. Please discuss your concerns with your Designated Safeguarding Lead and consider a referral to MASH.

Contact MASH on 020 8545 4226 or 020 8545 4227 or 020 8770 5000 (out of hours)

REMEMBER: Mandatory reporting is only one part of safeguarding against FGM and other abuse. Always ask your local safeguarding lead if in doubt.

