



Lionheart Academies Trust
Safeguarding Policy Relating to Female Genital
Mutilation (FGM)

This policy applies to all the academies in the
Lionheart Academies Trust

2018-20

Date	Detail
2016	Original policy
2018	Updated
Approved by	Chris Swan, Chair of Lionheart Academies Trust

Background and statutory information

Lion Heart Academies Trust is charged under section 5C (1) of the Female Genital Mutilation Act 2003 to have regard for the statutory guidance stated in “Multi-agency statutory guidance on female genital mutilation” April 2016. All trust staff are charged to follow the guidance and procedures in the document. It also provides guidance and support for staff. Under the Serious Crime Act 2015, there is a mandatory duty to report known cases of FGM in under 18’s to the police and an offence of failing to protect a girl from the risk of FGM. FGM protection orders can be used to protect girls at risk.

The mandatory reporting duty is highlighted in “Keeping Children Safe in Education” September 2018.

Context

FGM is a collective term for all procedures involving partial or total removal of external female genitalia for cultural or other non-therapeutic reasons. Typically it is performed on girls aged between 4 - 15 or on older girls before marriage or pregnancy. It is illegal in the UK and it is also illegal to take a child abroad to undergo FGM. There is a maximum prison sentence of 14 years for anyone found to have aided this procedure in any way. It is considered to be child abuse as it causes physical, psychological and sexual harm.

FGM is more common than many people realise, both across the world and in the UK. It is practised in 28 African countries and in parts of the Middle and Far East and increasingly in developed countries amongst the immigrant and refugee communities. In the UK it has been estimated that 24,000 girls under the age of 15 are at risk of FGM. (See Appendix 1)

Signs and Indicators

Some indications that FGM may have taken place include:

- The family comes from a community that is known to practice FGM, especially if there are elderly women present in the extended family
- A girl / young woman may spend time out of the classroom or from other activities, with bladder or menstrual problems
- A long absence from school or in the school holidays could be an indication that a girl / young woman has recently undergone an FGM procedure, particularly if there are behavioural changes on her return - this may also be due to a forced marriage
- A girl / young woman requiring to be excused from physical exercise lessons without the support of her GP
- A girl / young woman may ask for help, either directly or indirectly
- A girl / young woman who is suffering emotional / psychological effects of undergoing FGM, for example withdrawal or depression
- Midwives and obstetricians may become aware that FGM has taken place when treating a pregnant woman / young woman

Some indications that FGM may be about to take place include:

- A conversation with a girl / young woman where they may refer to FGM, either in relation to themselves or another female family member or friend;

- A girl / young woman requesting help to prevent it happening;
- A girl / young woman expressing anxiety about a 'special procedure' or a 'special occasion' which may include discussion of a holiday to their country of origin;
- A boy may also indicate some concern about his sister or other female relative.

Cultural context

The issue of FGM is very complex. Despite the obvious harm and distress it can cause, many parents from communities who practice FGM believe it important in order to protect their cultural identity.

FGM is often practiced within a religious context. However, neither the Koran nor the Bible supports the practice of FGM. As well as religious reasons, parents may also say that undergoing FGM is in their daughter's best interests because it:

- Gives her status and respect within the community;
- Keeps her virginity / chastity;
- Is a rite of passage within the custom and tradition in their culture;
- Makes her socially acceptable to others, especially to men for the purposes of marriage;
- Ensures the family are seen as honourable;
- Helps girls and women to be clean and hygienic.

Consequences of FGM

Many people may not be aware of the relation between FGM and its health consequences; in particular the complications affecting sexual intercourse and childbirth which occur many years after the mutilation has taken place.

Short term health implications include:

- Severe pain and shock;
- Infections;
- Urine retention;
- Injury to adjacent tissues;
- Fracture or dislocation as a result of restraint;
- Damage to other organs;
- Death.

Long term health implications include:

- Excessive damage to the reproductive system;
- Uterus, vaginal and pelvic infections;
- Infertility;
- Cysts;
- Complications in pregnancy and childbirth;
- Psychological damage;
- Sexual dysfunction;
- Difficulties in menstruation;
- Difficulties in passing urine;
- Increased risk of HIV transmission.

Action to Take

If a member of staff believes a child is at risk of FGM they should report to the Designated Safeguarding Lead (DSL) or phone Leicestershire Children's Social Care First Response on 07966111058

In an emergency - do not delay – ring 999.

If a girl / young woman is thought to be at risk of FGM, staff should be aware of the need to act quickly - before she is abused by undergoing FGM in the UK, or taken abroad to undergo the procedure.

Where it is believed that FGM has already been practiced, a referral should be made to Children's Social Care.

Appendix 1 International prevalence of FGM – Multi-Agency Statutory Guidance on Female Genital Mutilation

2.3. International Prevalence of FGM

FGM is a deeply rooted practice, widely carried out mainly among specific ethnic populations in Africa and parts of the Middle East and Asia. It serves as a complex form of social control of women's sexual and reproductive rights. The exact number of girls and women alive today who have undergone FGM is unknown, however, UNICEF estimates that over 200 million girls and women worldwide have undergone FGM¹⁰.

While FGM is concentrated in countries around the Atlantic coast to the Horn of Africa, and areas of the Middle East like Iraq and Yemen, it has also been documented in communities in:

- Colombia;
- Iran;
- Israel;
- Oman;
- The United Arab Emirates;
- The Occupied Palestinian Territories;
- India;
- Indonesia;
- Malaysia;
- Pakistan; and
- Saudi Arabia.

It has also been identified in parts of Europe, North America and Australia.

¹⁰ UNICEF (2016) *Female Genital Mutilation/ Cutting: a Global Concern*:
www.data.unicef.org/resources/female-genital-mutilation-cutting-a-global-concern.html