Female genital mutilation (FGM)

What is it?

Female genital mutilation (FGM) refers to all procedures involving partial or total removal of the external female genitalia, or other injury to the female organs.

FGM can vary in its type and timing across ethnic groups, cultures and tribes, and can be performed on babies, young children and adolescents. Some cultures perform FGM on adults often just before marriage or during their first pregnancy. FGM is medically unnecessary and can have serious health consequences, both at the time it is carried out and in later life.

FGM remains a growing and challenging problem in the UK and Europe among African and Middle Eastern communities and asylum seekers. Due to the hidden nature of FGM, it is difficult to estimate how many girls and women it actually affects in the UK and worldwide, but it is generally recognised to be more common than previously thought.

FGM is usually practiced for cultural reasons and is often justified by the belief that it is beneficial for the girl or woman. This is deeply embedded in some communities and is performed at different stages from birth, puberty and sometimes on women before marriage or pregnancy. FGM is an extremely painful and dangerous act which violates basic human rights.

Practitioners should be aware that there is an increased risk for girls and young women of FGM in communities where it is known to have been practised and also if they have a female family member who has been subjected to FGM. Advice and guidance should be provided to these families advising them that FGM is illegal, this is discussed below.

The World Health Organisation classifies FGM into four major types:

Minute Facts

- **Type 1 Clitoridectomy** is the partial or total removal of the clitoral and/or the prepuce
- **Type 2 Excision** partial or total removal of clitoris and the labia minor, with or without the labia majora (excision)
- **Type 3 Infibulation** narrowing of the vaginal orifice with creation of a covering seal by cutting and appositioning the labia minor and/or the labia majora, with or without excision of the clitoris (infibulation)
- **Type 4 Uncategorised** all other harmful procedures to the female genitalia for non-medical purposes, for example: pricking, piercing, incising, scraping and cauterization

Immediate and long term consequences of FGM

Immediate — Haemorrhage (or excessive bleeding) which could lead to death, shock, pain, infection (including tetanus, gangrene and HIV, urinary retention and injury to adjacent tissue.

Long term — Delayed wound healing, scarring/ keloid formation, pelvic infection, epidermoid cysts/abscess, Neuromata, Hematocolpos (vaginal closure due to scarring can lead to impaired flow of menstrual blood and dysmenorrhoea), urinary tract infection, child

Female Genital Mutilation (FGM)

birth trauma-tear, painful coitus, infertility, psychological problems, behavioural changes, flash backs, anxiety, depression, low selfesteem and genital phobia. Also the removal of the clitoris takes away the primary female specialised sexual organ.

What does the law say about FGM and what should practitioners do?

FGM has been a criminal offence since 1985, under the Prohibition of Female Circumcision Act (1985) that was replaced by the Female Genital Mutilation Act (2003).

Under the FGM Act 2003, the offence carries a maximum penalty of 14 years' imprisonment. The FGM Act states: It is a criminal offence to excise, infibulate, or otherwise mutilate the whole or any part of a girl's labia majora, labia minora or clitoris.

A person is guilty of an offence if he aids, abets, counsels or procures a girl to excise, infibulate or otherwise mutilate the whole or any part of her own labia majora, labia minora or clitoris. It is an offence for a person to aid, abet, counsel or procure the performance outside the UK of a relevant FGM operation. The act extends the offences outlined to any offence done outside the UK by a national or permanent UK resident, and where an offence is committed outside the UK, even in countries where the practice is legal, treats the offence as having been committed anywhere in England, Wales or Northern Ireland.

The Serious Crime Act 2015 (guide) extends this protection to girls under the age of 18 who are 'habitually resident' (or on short temporary stays) such as students and refugees. The Serious Crime Act also creates a new offence of failing to protect a girl from FGM. If an offence of FGM is committed against a girl under the age of 16, each person who is responsible for the girl at the time the FGM occurred will be liable under this new offence where the maximum penalty is seven years' imprisonment, a fine, or both. A 'responsible' person will have parental responsibility with the girl and frequent contact.

Minute

Facts

The 2015 Act also enables the high court or family courts to make a FGM Protection Order for individuals who are victims or at risk of FGM (similar to forced marriage protection orders). Victims or those at risk, or relevant third parties (including local authorities) can apply for the orders which set restrictions to protect an individual.

Under the 2015 Act there is now a mandatory duty for regulated professions such as health, teaching, social work to notify the police when they identify that an act of FGM appears to have been carried out on a girl under the age of 18. The duty applies when the practitioner is either informed by the girl or where the practitioner has observed physical signs. A failure to comply could be dealt with through existing disciplinary measures which may include referral to the relevant professional regulator.

Anyone under 18 years of age who is known to have had FGM performed either through her disclosure or on physical examination must be reported to the police on 101 by the end of the next working day. If an immediate response is required, dial 999. Any failure to do so could result in fitness to practice proceedings – consent by the patient or family is not required. Anyone under 18 years of age who is thought to be at risk of FGM or her parent/guardian discloses she has had FGM must be reported through usual safeguarding processes to Children's Services at Bolton Council **01204 331500** in working hours or **01204 337777** out of hours.

Female Genital Mutilation (FGM)

Practitioners, particularly those working in schools and in health services should be aware of and consider potential indictors that FGM may or has already taken place e.g. preparations for the child to take a long holiday, arranging vaccinations or planning an absence from school.

A change in the child's behaviour after a prolonged absence from school, including: being withdrawn, crying or being away from class for long periods and/or the child has bladder or menstrual problems and/or may have difficulty walking, sitting or standing. A child/young person could disclose FGM to a professional so it is important that professionals are aware of other terms/language that may be used to describe FGM has taken place, such as Sunna (the term is often used to refer to FGM without infibulation and is used by a number of Muslim communities affected by FGM), Gudiniin (Somali), Bondo (Sierra Leone), Khitan Arabic/ Kurdish), Cut, Circumcised, a celebration to become a woman.

If a practitioner becomes aware of a FGM risk to a child they must contact Children's Services Duty Referral and Assessment Team, who may, in partnership with the Police, undertake Section 47 (safeguarding) enquires and liaise with health services regarding medical assessments. Practitioners should also be aware that children who are at risk of serious harm through child sexual exploitation, trafficking, forced marriage, honour based violence and female genital mutilation are often 'hidden' and may be also missing from view.

Key contacts and for more information...

FGM Mandatory Reporting Procedural Information (GOV.UK)

Minute

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Greater Manchester Safeguarding Partnership

Multi-agency statutory guidance on female genital mutilation (GOV UK)

Bolton FGM Project - <u>Bolton Solidarity</u> Community Association Tel: 01204 334004

Health Education England e-learning

Children's Services at Bolton Council Tel: 01204 331500 in working hours or Tel: 01204 337 777 out of hours

Child Protection Unit Tel: 01204 337479

NSPCC FGM Helpline: 0800 028 3550

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