



FACT SHEET: Female Genital Mutilation (FGM)

FGM is a collective term for all procedures which include the partial or total removal of the external female genital organs for non medical or therapeutic reasons. It is acknowledged that some FGM-practising families do not see it as an act of abuse. However, Female Genital Mutilation has severe significant physical and mental health consequences both in the short and long term, and must not be excused, accepted or condoned. The procedures are more common than most people realise and work is taking place worldwide to eradicate this illegal and dangerous practice

Some Signs and Risk factors

- The age at which the procedure takes place may vary from birth to adolescence to just before marriage or during the first pregnancy. The most common age group is between 5 and 8 years.
- There may be other girls or women in the family or household who have had the procedure
- A girl may confide in a friend or a teacher of a special ceremony to 'become a woman'
- Prolonged absence from school or college
- Reluctance to undergo medical examinations or participate in PE
- Signs of pain and frequent urinary or menstrual problems
- A request for help which may not be explicit for reasons of fear and embarrassment.

Justifications given for FGM

- Custom and tradition
- Family honour
- Hygiene and cleanliness
- Preservation of virginity/chastity
- Social acceptance especially for marriage
- The mistaken belief that it is a religious requirement
- A sense of belonging to the group and conversely the fear of social exclusion.

Referral and Assessment

All practitioners have a duty to act to safeguard girls at risk of FGM and need to consider that it is an illegal act and that the girl may be removed from the UK to have the procedure performed. Delay must be avoided.

Referrals should be made to Children's Social Care and a **Strategy Meeting** will be called within a maximum of two working days.

The multi-agency Strategy Meeting must consider if the family are aware of the harmful aspects of FGM and the law in the UK. If they are not, they should be provided with the information as a part of the assessment.

Where the procedure has already taken place the information and risks must be assessed and consideration must be given to convening a Child Protection Conference.

Careful consideration must also be given to the potential risks to any younger females in the family or household.

Counselling and medical help should be provided as needed.

All assessments and investigations should be mindful of issues of language and communication, religion, culture and race. The needs of the child remain paramount.

For further details see **chapter 3.10** in the Sheffield Safeguarding Children Board Child Protection Procedures.