

FGM Guidance Policy

FGM is a painful, non-medical procedure undertaken on girls and young women which can seriously harm their long-term health. It is a form of child abuse.

Introduction

'Female Genital Mutilation' (FGM) is a global issue, with victims numbering in the millions every year. Most affected women live in 28 African countries, as well as parts of the Middle East and Asia. National FGM prevalence rates in the African region and Yemen vary from as low as 1% to 90% or more. FGM is usually performed on pre-pubertal girls but even infants and adult women have been targeted. Increased international migration means FGM is a problem in countries such as the UK: data from 2001 suggested that 66,000 women residents in England and Wales may have undergone FGM, and that 23,000 girls from African communities under the age of fifteen were at risk.

or may have already undergone FGM.

FGM is not a religious issue. The World Health Organisation (WHO) has described FGM as a practice that "reflects a deep-rooted inequality between the sexes." In the UK, family members and the wider community, both here and abroad, play a role in pressurising parents to put their children through FGM. Even where prevention is making headway in countries of origin, FGM can be used within UK migrant communities to curb sexuality and preserve the cultural identity of a minority.

Definition of FGM

FGM refers to all procedures involving partial or total removal of the external genitalia or other injury to the female genital organs for non-medical reasons. FGM is also sometimes referred to as female circumcision, cutting or sunna.

There are four different types of FGM:

- Type 1: Prepuce removal only or partial or total removal of the clitoris (clitoridectomy)
- Type 2: Removal of the clitoris plus part or all the labia minora (excision)
- Type 3: Removal of part or all the labia minora with the labia majora either being sewn together covering the urethra and vagina leaving only a small opening for urine and menstrual fluid (infibulation)
- Type 4: Other: all other harmful procedures to the female genitalia for non-medical purposes, e.g., pricking, piercing, incising, scraping, and cauterising the genital area.

Legal requirements:

Female Genital Mutilation (FGM) is illegal in England and Wales under the FGM Act 2003 ("the 2003 Act" and as amended by the Serious Crime Act 2015). It is a form of child abuse and violence against women. FGM comprises all procedures involving partial or total removal of the external female genitalia for non-medical reasons.

Section 5B of the 2003 Act¹ introduces a mandatory reporting duty which requires regulated health and social care professionals and teachers in England and Wales to report 'known' cases of FGM in under 18s which they identify in the course of their professional work to the police. The duty applies from 31 October 2015 onwards.

'Known' cases are those where either a girl informs the person that an act of FGM – however described – has been carried out on her, or where the person observes physical signs on a girl appearing to show that an act of FGM has been carried out and the person has no reason to believe that the act was, or was part of, a surgical operation within section 1(2)(a) or (b) of the FGM Act 2003 - i.e.. they have no reason to believe that the act was necessary for the girl's physical or mental health or for purposes connected with labour or birth. For the purposes of the duty, the relevant age is the girl's age at the time of the disclosure/identification of FGM (i.e., it does not apply where a woman aged 18 or over discloses, she had FGM when she was under 18).

It is good practice to raise awareness within the company about the issues surrounding FGM.

Practice Training:

At least one staff member of Progressive Sports to have to have attend FGM training. This information, in conjunction with the practice policy will be cascaded to all other staff to raise awareness and educate staff on FGM.

Identifying women/children affected:

A primary role of the practice in terms of FGM is prevention and protecting girls or women at risk of FGM. If there is any concern that a child is at immediate risk of FGM or has had FGM, a referral must be made to social services or the police.

When/how FGM is carried out:

- Normally done between 4 – 12 years (but can be any age)
- Varies from community to community but usually by an elder woman in the community using a non-sterile instrument without anaesthetic.
- UK girls are taken on "holiday" to have FGM done.
- Communities in the UK are believed to have their own practitioners here.
- Increased use of health professionals

If a member of staff suspects someone has experienced FGM or as at risk of undergoing FGM they must raise this concern with the Safeguarding Officer within Progressive Sports immediately.

If applicable, confirm that you have undertaken, or will undertake, safeguarding actions, as required by the English or Welsh version of Working Together to Safeguard Children as appropriate.

While the requirement to notify the police of this information is mandatory and overrides any restriction on disclosure which might otherwise apply, in handling and sharing information in all other contexts you should continue to have regard to relevant legislation and guidance, including the Data Protection Act 1998 and any guidance for your profession.

Remember to:

- Make a note of the reference number for the call and document it in the records.
- Ensure practice-safeguarding procedures for children are followed, starting with notifying the Child Safeguarding Team.

- Ensure records are up to date and the practice's designated safeguarding lead is kept updated as appropriate. Throughout the process, keep a comprehensive record of any discussions held and subsequent decisions made, in line with standard safeguarding practice. This will include:
- The circumstances surrounding the initial identification or disclosure of FGM.
- Details of any safeguarding actions which were taken.
- When and how you reported the case to the police (including the case reference number).

Supporting Docs and resources:

- NHS Choices – FGM Services.
- Gov.uk: Female Genital Mutilation: Multi-Agency Practice Guidelines

Checklist for approaching the topic of FGM:

- If you suspect someone is a victim or potential victim of FGM, the following guidelines can be used to approach the topic sensitively and discretely:
- Reassure the individual about confidentiality and explain that you will not pass on any information to their family, friends, or members of the community.
- Be sensitive to the intimate nature of the subject and recognise and respect the individual's wishes.
- Take detailed notes and record them safely.
- Collect information about the urgency of the situation to determine whether there is a need for immediate police involvement.
- Call Safeguarding Officer about how to proceed.

Making a report:

Immediately contact Progressive Sports DSL Lead who will take the following action:

1. Dial 999. The call handler will log the call and refer it to the relevant team within the force, who will call you back to ask for additional information and discuss the case in more detail.

Be prepared to provide the call handler with the following information:

- Explanation that you are making a report under the FGM mandatory reporting duty.
- Your details (name, contact details, and times you are contactable)
- Role
- Place of work
- Details of your organisation's DSL (name and contact details)
- The girl's details (name, age, DOB, address)