Safeguarding and Welfare Requirement: Child protection

## Female genital mutilation (FGM)

## **Policy statement**

At Redwood Preschool we are fully aware and committed to the on-going protection and safety of our pupils, parents, staff and wider community. We are aware that FGM is illegal in the UK and a form of child abuse with long-lasting harmful consequences. As professionals, and as individuals living in our local community, we need to be alert to the possibility of girls and women being at risk of FGM, or already having suffered FGM. Staff are aware of our mandatory reporting duty.

### **Procedures**

All staff have a basic understanding of FGM and the relevant indicators detailed below. Children
who are felt to be at risk of FGM will be referred to the MASH team through our safeguarding and
child protection procedures.

FGM refers to procedures of any alteration involving partial or total removal of the external female genital organs. The procedure may lead to short term and long-lasting harmful consequences such as death, trauma, infections, flashbacks, infertility, kidney problems, sexual dysfunctions, incontinence, post-traumatic stress disorder etc. It is known to be practised in the North African countries, the Middle-East, Indonesia, Malaysia, India and Pakistan. However, with migration worldwide it is also practised in the UK, the USA, Canada, Australia etc.

One of the prominent reasons for the practice is to suppress women's sexual desire. There is a social pressure on women to undergo the procedure otherwise they may be segregated by their peers, or labelled "unclean". Furthermore, FGM is often a requirement for getting married in practicing communities. FGM is not a religious practice.

We are aware that children who attend the preschool may be at risk of FGM, as may their older sisters. Mothers and other older female relatives of children who attend may already have experienced FGM.

#### Indicators

There is a range of potential indicators that a girl may be at risk of FGM.

FGM often takes place in the summer holidays, as the recovery period after FGM can be 6 to 9 weeks. We are mindful of risk times when children go on long holidays and/or are getting a visit by a female elder from their country of origin. Additionally, girls are considered at risk where their mother or sisters have undergone FGM. Girls may talk about a 'special' event or procedure to 'become a woman.'

The post FGM symptoms include, but are not limited to, difficulty in walking, sitting or standing, spending longer than normal in the bathroom or toilet, unusual behaviour after a lengthy absence, reluctance to undergo normal medical examinations, and asking for help but not be explicit about the problem due to embarrassment or fear. A girl may sometimes ask about their friend's problem rather than their problem. Further information on warning signs that FGM may be about to take place, or may have already taken place, can be found on pages 16-17 of the Multi-Agency Practice Guidelines.

The United Nations addresses FGM as violation of human rights. In the UK, FGM is a criminal offence and a harmful form of child abuse. It is illegal to practice in the UK and/or anyone involved in taking girl outside of the UK to have FGM carried out will be punished under the <a href="FGM Act 2003">FGM Act 2003</a> and <a href="Serious Crime Act 2015">Serious Crime Act 2015</a>. LBWF follows a comprehensive approach comprising prevention, punishment, enforcement, support and protection measures to safeguard young girls from FGM.

- All staff are aware that they have a Mandatory Reporting Duty which require them to report any
  case of FGM carried out on someone under 18 which becomes known to them to the Police (via
  the Metropolitan Police Child Abuse and Investigation Team (CAIT) on 020 8345 3633 or 020
  8345 3693, or by calling 101)
- Staff are also aware that they should inform the Designated Safeguarding Lead (DSL) who will
  involve Children's Social Care as appropriate through the MASH team.

Since 31 October 2015 there has been 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 to the police. The duty applies to all regulated professionals (as defined in section 5B(2)(a), (11) and (12) of the 2003 Act) working within healthcare or social care, and teachers. It therefore covers: healthcare professionals regulated by a body which is overseen by the Professional Standards Authority for Health and Social Care (with the exception of the Pharmaceutical Society of Northern Ireland). This includes doctors, nurses, midwives, and, in England, social workers; teachers; and social care workers in Wales. The duty applies where, in the course of their professional duties, the professional either:

- o is informed by the girl that an act of FGM has been carried out on her; or
- observes physical signs which appear to show an act of FGM has been carried out and has 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.

Where a professional discovers such a case, they must make a report to the police

Section 5C of the Female Genital Mutilation Act 2003 (as inserted by section 75 of the Serious Crime Act 2015) gave the Government powers to issue statutory guidance on FGM to relevant persons. The <u>draft statutory guidance</u> draws on the existing FGM multi-agency practice guidelines and has been updated to capture legal changes resulting from provisions in the Serious Crime Act 2015, new guidance for health professionals, new sources of data on FGM and wider safeguarding responsibilities, duties and resources for professionals

The guidance provides professionals with the information they need to help them understand the issues around FGM; professionals' responsibilities on FGM linked to wider safeguarding duties and good practice; the range of legal interventions to deal with FGM; guidelines for key professionals including police, healthcare professionals, children's social care and schools and colleges, and working with communities to prevent FGM.

Further advice for professionals about FGM is available from <a href="mailto:mamta.sagar@walthamforest.gov.uk">mamta.sagar@walthamforest.gov.uk</a>

## Legal framework

Female Genital Mutilation Act (2003)

Section 5C of the Female Genital Mutilation Act 2003 (as inserted by section 75 of the Serious Crime Act 2015)

# Further guidance

Annex A: Draft Multi-Agency Statutory Guidance on Female Genital Mutilation (for consultation) Keeping children safe in education, DfE (see pages 14-15) Multi-agency practice guidelines: FGM, Home Office, DfE (see pages 8, 16, 17 and 42 <a href="http://www.londonscb.gov.uk/fgm/">http://www.londonscb.gov.uk/fgm/</a>

Free online training from the Home Office <a href="https://www.fgmelearning.co.uk/">https://www.fgmelearning.co.uk/</a>

This policy was adopted by	(name of
	provider)
On	(date)
Date to be reviewed	(date)
Signed on behalf of the provider	
Name of signatory	
Role of signatory (e.g. chair, director or owner)	