

FEMALE GENITAL MUTILATION

Pocket guide for health care professionals

What is Female Genital Mutilation (FGM)?

FGM comprises of all procedures involving partial or total removal of the external female genital organs or any other injury to the female genital organs for non-medical reasons. FGM is most often carried out on young girls aged between infancy and 15 years old. It is often referred to as 'cutting', 'female circumcision', 'initiation', 'Sunna' and 'infibulation'.



FGM in the UK

It is estimated that 65,000 girls aged 13 and under are at risk of FGM in the UK. UK communities most at risk include Kenyan, Somali, Sudanese, Sierra Leonean, Egyptian, Nigerian and Eritrean. Non-African countries that practise FGM include Yemen, Afghanistan, Kurdistan, Indonesia, Malaysia, Turkey, Thailand (South) and Pakistani. Please note this list is not exhaustive.

In practice what you should consider:-

- Is it going to occur?
- Has it occurred?

Spotting the signs

Suspicious may arise in a number of ways that a child may be at risk of FGM. These include:-

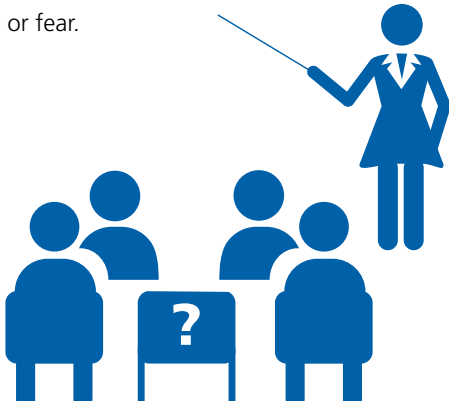
- Knowing that a mother or older sibling has undergone FGM
- A girl talks about plans to have a 'special procedure' or to attend a special occasion/celebration to 'become a woman'.
- A girl's parents state that they or a relative will take the child out of the country for a prolonged period, or school holidays or when attending for travel vaccinations.
- A girl may talk about a long holiday to her country of origin or another country where the practice is present.
- The girl is a member of the community that is less integrated into UK society and whose country of origin practices FGM.

Signs that a child may have already undergone FGM:-

- Difficultly walking, sitting or standing
- Spending longer than normal in the bathroom or toilet due to difficulties urinating
- Soreness, infection or unusual presentation noticed by practitioner when changing a nappy or helping with toileting
- Spending long periods of time away from the classroom during the day with bladder or menstrual problems
- Having frequent unusual menstrual problems



- Prolonged or repeated absence from school or college
- A prolonged absence from school or college with personal or behaviour changes e.g. withdrawn, depressed
- Being particularly reluctant to undergo normal medical examinations
- Asking for help or advice but not being explicit about the procedure due to embarrassment or fear.



FGM is child abuse

FGM causes significant harm and constitutes physical and emotional abuse. FGM is a violation of a child's right to life, their bodily integrity as well as their right to health.

The FGM Prevention Programme is a programme of work led by the Department of Health to improve the NHS response to FGM; this includes projects to improve awareness, provision of services and management of FGM, and safeguarding of girls at risk.

The UK Law

FGM is against the law in the UK and has been a criminal offence since 1985. It is a serious crime that carries a penalty of 14 years in prison. It is an offence to make arrangements for FGM to be undertaken within the UK or to take, or plan to take a child out of the UK for the purpose of FGM.

What to do if you are concerned or have been made aware FGM has occurred

It is a mandatory duty for a regulated healthcare professional to report any concerns they have about a female under 18 years and record when FGM is disclosed or identified as part of NHS healthcare.

As FGM is **illegal** this should be **reported to the Police via the 101 non-emergency number**. (See below for links to Home Office guidance).

The duty is a personal duty which requires the individual professional who becomes aware of the case to make a report; the responsibility cannot be transferred.

There is a mandatory requirement for health care professionals to submit their FGM data for both children and adults via the Health & Social Care Information Centre.

Further details can be accessed on their website: <http://www.hscic.gov.uk/FGM>. Submission became mandatory for acute trusts, GP practices and mental health trusts in 2015.

If you believe that a victim or potential victim of FGM is in immediate danger, always dial 999. If you are concerned that a child is at risk you must make a referral to Children's Social Care immediately using your local Safeguarding Board procedures. The NSPCC has a 24 hour helpline to provide advice and support to victims of FGM, or to anyone who may be concerned a child is at risk - call the helpline on **0800 028 3550** or email fgmhelp@nspcc.org.uk

Further information

Guidance and resources have been published by the Home Office that give relevant professionals and the police an understanding of the new (FGM) mandatory reporting duty, which can be accessed in the link below:-

<https://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information>

<https://www.gov.uk/government/publications/female-genital-mutilation-resource-pack/female-genital-mutilation-resource-pack>

Reporting Flowchart:-

<https://www.gov.uk/government/publications/fgm-mandatory-reporting-in-healthcare>

Further help and information including multi agency procedures for FGM can be found on your local authority Safeguarding Children Board website.

Alternatively you can contact:-

NSPCC FGM helpline: 0800 028 3550
or email: fgmhelp@nspcc.org.uk

Childline helpline: 0800 1111
Website: www.childline.org.uk

or your local designated nurse for safeguarding children.

NHS Choices also has information on support:- <http://www.nhs.uk/NHSENGLAND/ABOUTNHSSERVICES/SEXUAL-HEALTH-SERVICES/Pages/fgm-resources.aspx>

Police dial 101 (if a non-emergency)

Female Genital Mutilation: Guidelines to protect children and women. (2014)
<https://www.gov.uk/government/publications/female-genital-mutilation-guidelines>

Safeguarding

www.england.nhs.uk/ourwork/safeguarding/

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