

Female Genital Mutilation (FGM) Policy



Leytonstone School

Signed by Chair of Governors: Alan Jeffery (Acting Chair)

Date Ratified by Governors: 12/1/16

Date to be Reviewed by Governors: 12/1/17

Female Genital Mutilation (FGM)

FGM is illegal in the UK and a form of child abuse with long-lasting harmful consequences. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM.

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.

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. Professionals should be mindful of at risk times when children go on long holidays and/or are getting a visit by female elder from their country of origin. Additionally, girls are considered at risk where their mother or sisters have undergone FGM, and girls are talking 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. They can sometimes ask about their friend's problem rather than their problem. **Professionals should raise an alert to child social care via the MASH if they have any FGM concerns.**

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 , and Chapter 9 of those Guidelines (pp42-44), which focuses on the role of schools and colleges.

Actions

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 FGM act 2003 and Serious Crime Act 2015. LBWF follows a comprehensive approach comprising prevention, punishment, enforcement, support and protection measures to safeguard young girls from FGM.

If staff have a concern they should activate local safeguarding procedures via the MASH, using existing national and local protocols for multi-agency liaison with police and children's social care. When mandatory reporting commences in October 2015 (see below) these procedures will remain when dealing with concerns regarding the potential for FGM to take place. Where a teacher discovers that an act of FGM appears to have been carried out on a girl who is aged under 18, there will be a statutory duty upon that individual to report it to the police.

Mandatory Reporting Duty

Section 5C of the Female Genital Mutilation Act 2003 (as inserted by section 75 of the Serious Crime Act 2015) gives the Government powers to issue statutory guidance on FGM to relevant persons. Once the government issues any statutory multi-agency guidance this will apply to schools and colleges.

Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) will place a statutory duty upon teachers¹, along with social workers and healthcare professionals, to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. Those failing to report such cases will face disciplinary sanctions. It will be rare for teachers to see visual evidence, and they should not be examining pupils – it is likely that discovery will be made by disclosure by the student, parent or otherwise. These cases **must be referred to police** (via the local CAIT team or by calling 101).

Immediate reporting is required if FGM has been performed recently, and in historical cases, reporting must take place within one month.

Mandatory reporting duty will commence in October 2015. Unless the teacher has a good reason not to, they should still consider and discuss any such case with the school's designated safeguarding lead and involve children's social care as appropriate.

Schools can also:

- Circulate and display materials about FGM
- Display relevant information (for example, details of the NSPCC's Helpline and appropriate black and minority ethnic women's groups)
- Ensure that a private telephone is made available should students need to seek advice discreetly
- Inform colleagues/raise awareness of the issues around FGM – as well as including appropriate training in continuing professional development
- Introduce FGM into the school curriculum in relevant classes, such as personal, social and health education (PSHE), citizenship, religious knowledge, drama and history

¹"teacher" means—

(a) in relation to England, a person within section 141A(1) of the Education Act 2002 (persons employed or engaged to carry out teaching work at schools and other institutions in England);

(b) in relation to Wales, a person who falls within a category listed in the table in paragraph 1 of Schedule 2 to the Education (Wales) Act 2014 (anaw 5) (categories of registration for purposes of Part 2 of that Act) or any other person employed or engaged as a teacher at a school (within the meaning of the Education Act 1996) in Wales.

Reference and further information

[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
<http://www.londonscb.gov.uk/fgm/>)

For support around training around FGM for teachers and students, please contact:

Hibo Wardere
FGM Mediator

Tel: 0208496 6952

Hibo.Wardere@walthamforest.gov.uk

Honour-based violence

The terms “honour crime” or “honour-based violence” or “izzat” embrace a variety of crimes of violence (mainly but not exclusively against women and girls), including assault, imprisonment and murder where the person is being punished by their family or their community. They are being punished for actually, or allegedly, undermining what the family or community believes to be the correct code of behaviour.

In transgressing this correct code of behaviour, the person shows that they have not been properly controlled to conform by their family and this is to the “shame” or “dishonour” of the family. It can be distinguished from other forms of abuse, as it is often committed with some degree of approval and/or collusion from family and/ community members. Victims will have multiple perpetrators not only in the UK; HBV can be a trigger for a forced marriage.

Forced Marriage

A forced marriage is where one or both people do not (or in cases of people with learning disabilities, cannot) consent to the marriage and pressure or abuse is used. It is recognised in the UK as a form of violence against women and men, domestic/child abuse and a serious abuse of human rights.

The pressure put on people to marry against their will can be physical (including threats, actual physical violence and sexual violence) or emotional and psychological (for example, when someone is made to feel like they’re bringing shame on their family). Financial abuse (taking your wages or not giving you any money) can also be a factor.

The Anti-social Behaviour, Crime and Policing Act 2014 makes it a criminal offence to force someone to marry. This includes:

- Taking someone overseas to force them to marry (whether or not the forced marriage takes place)
- Marrying someone who lacks the mental capacity to consent to the marriage (whether they’re pressured to or not)
- Breaching a Forced Marriage Protection Order is also a criminal offence

- The civil remedy of obtaining a Forced Marriage Protection Order through the family courts will continue to exist alongside the new criminal offence, so victims can choose how they wish to be assisted
- Details of the new law can be found on the [Legislation website](#)

Young people and adults with support needs are particularly vulnerable to forced marriage because they are often reliant on their families for care, they may have communication difficulties and they may have fewer opportunities to tell anyone outside the family about what is happening to them.

Safeguards for young people and adults with support needs from forced marriage are essentially the same as those without support needs, however agencies do have a role to play in ensuring they are safeguarded, via the MASH. In cases of forced marriage, involving the family and the community may increase the risk of significant harm to the child or young person. The family may deny that the child or young person is being forced to marry and they may expedite any travel arrangements and bring forward the marriage.

Any discussion and agreement-seeking between the family and the Local Authority children's social care should only be done where it will not place a child at increased risk of significant harm. **In cases of forced marriage, discussion with the family or any type of family involvement will often place the child or young person at greater risk of harm.**

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/322310/HMG_Statutory_Guidance_publication_180614_Final.pdf

What is Child Abuse linked to faith and belief?

There is no agreed definition of or consensus about the concept of 'child abuse linked to faith or belief'. Child abuse linked to faith or belief can be separated into four areas as follows;

- Abuse that occurs as a result of a child being accused of witchcraft or of being a witch
- Abuse that occurs as a result of a child being accused of being 'possessed by spirits' that is, 'spirit possession'
- Ritualistic abuse
- Satanic abuse

The forms the abuse can take include;

- **Physical abuse:** beating, burning, cutting, stabbing, semi-strangulating, tying up the child, or rubbing chilli peppers or other substances on the child's genitals or eyes
- **Emotional abuse:** in the form of isolation {e.g. not allowing a child to eat or share a room with family members or threatening to abandon them}. The child may also be persuaded that they are possessed
- **Neglect:** failure to ensure appropriate medical care, supervision, school attendance, good hygiene, nourishment, clothing or warmth
- **Sexual abuse;** within the family or community, children abused in this way may be particularly vulnerable to sexual exploitation

Where does it take place?

Child Abuse linked to faith and/or belief is not confined to one faith, nationality or ethnic community. Examples have been recorded worldwide among Europeans, Africans, Asians and elsewhere as well as in Christian, Muslim, Hindu and pagan faiths among others.

Not all those who believe in witchcraft or spirit possession harm children. Data on numbers of known cases suggests that only a small minority of people with such beliefs go on to abuse children.

Common factors that put a child at risk of harm include;

- **Belief in evil spirits:** this is commonly accompanied by a belief that the child could 'infect' others with such 'evil'. The explanation for how a child becomes possessed varies widely, but includes through food that they have been given or through spirits that have flown around them;
- **Scapegoating** because of a difference: it may be that the child is being looked after by adults who are not their parents (i.e. privately fostered), and who do not have the same affection for the child as their own children;
- **Rationalising misfortune** by attributing it to spiritual forces and when a carer views a child as being 'different' because of disobedience, rebelliousness, over-independence, bedwetting, nightmares, illness or because they have a perceived or physical abnormality or a disability; Disabilities involved in documented cases included learning disabilities, mental ill health, epilepsy, autism, a stammer and deafness;
- **Changes and / or complexity in family structure or dynamics:** there is research evidence (see Stobart, Child Abuse linked to Accusations of Spirit Possession - see related links) that children become more vulnerable to accusations of spirit possession following a change in family structure (e.g. a parent or carer having a new partner or transient or several partners). The family structure also tended to be complex so that exact relationships to the child were not immediately apparent. This may mean the child is living with extended family or in a private fostering arrangement (see Children Living Away from Home Procedure, Private Fostering - see related link). In some cases, this may even take on a form of servitude;
- **Change of family circumstances for the worse:** a spiritual explanation is sought in order to rationalise misfortune and the child is identified as the source of the problem because they have become possessed by evil spirits. Research evidence is that the family's disillusionment very often had its roots in negative experiences of migration:

In the vast majority of identified cases in the UK to date, the families were first or second generation migrants suffering from isolation from extended family, a sense of not belonging or feeling threatened or misunderstood. These families can also have significantly unfulfilled expectations of quality of life in the UK;

- **Parental difficulties:** a parent's mental ill health appears to be attributed to a child being possessed in a significant minority of cases. Illnesses typically involved include post-traumatic stress disorder, depression and schizophrenia.

The Law in relation to child abuse linked to faith and belief

There are sufficient existing laws within the UK with which to prosecute those responsible for child abuse linked to faith and/or belief thereby negating any need for further more specific offences.

What to do if you suspect a child is at risk from abuse linked to faith and/or belief

Concerns about a child's welfare can vary greatly in terms of their nature and seriousness. If you have concerns about a child, you should ask for help. You should discuss your concerns with your manager, a named or designated professional or a designated member of staff.

For example

- for schools staff (both teaching and non-teaching) concerns should be reported via the schools' or colleges' designated safeguarding lead. The safeguarding lead will usually decide whether to make a referral to children's social care;
- for early years practitioners, the Early Years Foundation Stage sets out that providers should ensure that they have a practitioner who is designated to take a lead responsibility for safeguarding children who should liaise with local statutory children's services agencies: