

**Female Genital Mutilation (FGM)**

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**What is Female Genital Mutilation (FGM)?**

Female Genital Mutilation (FGM) comprises all procedures involving the partial or total removal of the external female genitalia or any other injury to the female genital organs for non-medical reasons. FGM is sometimes known as ‘female genital cutting’ or female circumcision. Communities tend to use local names for referring to this practice, including ‘sunna’.

**FGM is considered to be child abuse in the UK**

**Key facts about FGM**

- It is practised in 28 countries in Africa and some in the Middle East and Asia.
- FGM is also found in the UK amongst members of migrant communities.
- It is estimated that approximately 60,000 girls aged 0-14 were born in England and Wales to mothers who had undergone FGM1.
- UK communities that are most at risk of FGM include Kenyan, Somali, Sudanese, Sierra Leonean, Egyptian, Nigerian and Eritrean. Non-African communities that practise FGM include Yemeni, Afghani, Kurdish, Indonesian and Pakistani.

1 Macfarlane A, Dorkenoo E. Prevalence of Female Genital Mutilation in England and Wales: National and local estimates. London: City University London and Equality Now, 2015

- It is an offence for any person (regardless of their nationality or residence status) to:
  - perform FGM in England and Wales;
  - assist a girl to carry out FGM on herself in England and Wales; and
  - assist (from England or Wales) a non-UK person to carry out FGM outside the UK on a UK national or UK resident.

**Signs**

**Suspicious may arise in a number of ways that a child is being prepared for FGM to take place abroad.** These include knowing both that the family belongs to a community in which FGM is practised and is making preparations for the child to take a holiday, arranging vaccinations or planning absence from school. The child may also talk about a special procedure/ceremony that is going to take place.

**Indicators that FGM may already have occurred** include prolonged absence from school or other activities with noticeable behaviour change on return, possibly with bladder or menstrual problems. Some teachers have described how children find it difficult to sit still and look uncomfortable, or may complain about pain between their legs, or talk of something somebody did to them that they are not allowed to talk about.

**School role**

Mandatory reporting of FGM\* requires health, social care professionals and teachers to make a report to the police if, in the course of their professional duties, they:

- are informed by a girl under 18 that an act of FGM has been carried out on her; or
- observe physical signs which appear to show that an act of FGM has been carried out on a girl under 18 and 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 example, if a girl tells her teacher that she has had FGM, the teacher will need to report this to the police.

**If someone is at imminent risk of FGM, you should contact the police immediately.**

**Further information:** S:\Safeguarding\FGM

