**40. Female Genital Mutilation (FGM)**

**FGM**

Definition

“Female Genital Mutilation (FGM) comprises of all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs whether for cultural or non- therapeutic reasons” (World Health Organisation- 1997)

“FGM is considered child abuse in the UK and is a grave violation of the human rights of girls and women. In all circumstances where FGM is practiced on a child it is a violation of the child’s right to life, their right to their bodily integrity, as well as their right to health. The UK Government has signed a number of international human right laws against FGM, including the Convention on the Rights of the Child”.

**Understanding FGM**

Procedures can cause severe bleeding and problems urinating, and later cysts, infections, as well as complications in childbirth and increased risk of new-born deaths.

More than 200 million girls and women alive today have been cut in 30 countries in Africa, the Middle East and Asia where FGM is concentrated.

FGM is mostly carried out on young girls between infancyand age 15.

It is illegal for FGM to be carried out on any child it is an offence for support or aid any family or person in leaving the county to perform FGM on a child.

Families do not see FGM as abuse but a ritual that should take place. They may not recognise terms like FGM but could use terms like FGC (female genital cutting or circumcision) FGCS (Female genital cosmetic surgery)

A child at risk of FGM may not present with any other forms of child abuse and their maybe no other concerns relating to the family of the child

There is no religious or medical reason for FGM to take place, it is more often than not a tradition that has been passed down over generations and, most children are mutilated through families believing that it purifies their daughter, that it a matter of family honour, that without it they will bring evil to the family and even death.

Immediate complications could be:

* severe pain
* excessive bleeding (haemorrhage)
* genital tissue swelling
* fever
* infections e.g., tetanus
* urinary problems
* wound healing problems
* injury to surrounding genital tissue
* shock
* death.
* Broken or dislocated bones/joints

Often the victim is awake and has had no anaesthetic, they are cut by someone they know; usually an elder relative such as a grandparent they are held down during this process; sometimes the people that they love and trust the most. This alone can cause broken bones dislocations and untold emotional trauma.

* urinary problems (painful urination, urinary tract infections);
* vaginal problems (discharge, itching, bacterial vaginosis and other infections);
* menstrual problems (painful menstruations, difficulty in passing menstrual blood, etc.);
* scar tissue and keloid;
* sexual problems (pain during intercourse, decreased satisfaction, etc.);
* increased risk of childbirth complications (difficult delivery, excessive bleeding, caesarean section, need to resuscitate the baby, etc.) and newborn deaths;
* need for later surgeries: for example, the FGM procedure that seals or narrows a vaginal opening (type 3) needs to be cut open later to allow for sexual intercourse and childbirth (deinfibulation). Sometimes genital tissue is stitched again several times, including after childbirth, hence the woman goes through repeated opening and closing procedures, further increasing both immediate and long-term risks;
* psychological problems (depression, anxiety, post-traumatic stress disorder, low self-esteem, etc.);
* health complications of female genital mutilation

Warning signs that FGM may be taking place

* The arrival of an elder female relative
* A prolonged planned holiday typically over the summer months but could be at any time of year
* A child talking about a special celebration
* Previous family history of FGM

Signs that FGM may have taken place

* Difficulty in sitting and walking
* Difficulty or pain in urinating and spending longer in the bathroom
* Persistent infection
* Appear withdrawn, anxious and/or depressed
* Be particularly reluctant to undergo normal medical examinations
* Asking for help; disclosing.
* When changing a younger child’s nappy, you may notice aesthetic changes

All children have the right to be protected against FGM and every person has a duty to safeguard against FGM, for more information please go the world health organisation website or the NSPCC

[fgmhelp@nspcc.or.uk](mailto:fgmhelp@nspcc.or.uk)

FGM help line 0800 0283550

In the event that we feel a child is at risk of FGM or has been a victim of FGM Staff will contact ART and then the police. If it is felt that the child is at immediate significant risk the parents will not be informed and the case will be referred without consent.

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