

Barlows Primary School FGM Statement

This policy should be read in conjunction with the school's Safeguarding Policy.

Rationale

Barlows Primary School has robust and rigorous safeguarding procedures and practices and takes its responsibilities of child protection seriously.

Female Genital Mutilation is illegal and is a form of child abuse and as such, is dealt with under the schools Safeguarding Policy. At Barlows Primary, the Headteacher and Governors expect Safeguarding to be everybody's responsibility and expect all staff to adhere to and follow these policies.

World Health Organisation definition of FGM:

"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)

The school has taken information from several documents to write this appendix. These include, Government Home Office Guidelines, Ealing Safeguarding Children Board and NSPCC Guidance.

The UK Government has written advice and guidance on FGM that states:

- "FGM is considered child abuse in the UK and a grave violation of the human rights of girls and women. In all circumstances where FGM is practised 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 rights laws against FGM, including the Convention on the Rights of the Child."
- "Girls are at particular risk of FGM during school summer holidays. This is the time when families may take their children abroad for the procedure. Many girls may not be aware that they may be at risk of undergoing FGM."
- "UK communities that are most at risk of FGM include Kenyans, Somalis, Sudanese, Sierra Leoneans, Egyptians, Nigerians and Eritreans. However women from non-African communities who are at risk of FGM include Yemeni, Kurdish, Indonesian and Pakistani women."

From 31 October 2015 onwards, regulated health and social care professionals and teachers in England and Wales have a <u>mandatory requirement</u> to report visually confirmed or verbally disclosed cases of FGM in girls under 18 to the police.

In light of this information Barlows Primary School has decided to take proactive action to protect and prevent our girls being forced to undertake FGM. The Headteacher and Governors do this in 4 ways:

- 1. A robust Attendance Policy that does not authorise holidays, extended or otherwise, unless in exceptional circumstances and with evidence of reason where possible.
- 2. FGM training for all staff at the front line dealing with the children (all our staff are Safeguard Trained)
- 3. FGM discussions by Safeguarding lead with parents of children from practising communities who are at risk.
- 4. Comprehensive PSHE and Relationship and Sex Education delivered to children which a discussion about FGM in an appropriate way and at the appropriate age.

In order to protect our children it is important that key information is known by all of the school community.

Indications that FGM has taken place:

- Difficulty walking, sitting or standing.
- Prolonged absences from school.
- Spending long periods away from the classroom/office with urinary or menstrual problems.
- Reluctant to undergo medical examinations.
- Noticeable changes in behaviour FGM can result in post-traumatic stress.
- Soreness, infection or unusual presentation when using the toilet.
- Asking for help but not being explicit about the problem due to embarrassment or fear.

Indications that a child is at risk of FGM:

- The family comes from a community known to practice FGM especially if there are elderly women present.
- In conversation a child may talk about FGM.
- Parents seeking to withdraw their children from learning about FGM.
- A child may express anxiety or excitement about a special ceremony.
- The child may talk or have anxieties about forthcoming holidays to their country of origin.
- Parent/Guardian requests permission for authorised absence for overseas travel or you are aware that absence is required for vaccinations.

If a woman has already undergone FGM – and it comes to the attention of any professional, consideration needs to be given to any Child Protection implications e.g. for younger siblings, extended family members and a referral made to Social Care or the Police.

Referring concerns to the Designated Safeguarding Team

Should you have any concerns that a child is at risk of or has been subject to FGM you must immediately refer it to the designated Safeguarding Lead Clare Bakstad. In her absence speak to the Deputy Designated Lead Stacey Feenan; the Headteacher David Robinson or Rachel Daye.

They will then ensure that the police are contacted immediately. In the unlikely event that none of the people listed above are available, contact the police on 101. In an emergency dial 999.

APPENDIX

TERMS USED FOR FGM IN OTHER LANGUAGES

| Country | Term used for FGM | Language |
|--------------------------------|--|----------|
| CHAD – the Ngama Sara subgroup | Bagne | |
| | Gadja | |
| GAMBIA | Niaka | Mandinka |
| | Kuyungo | Mandinka |
| | Musolula Karoola | Mandinka |
| GUINEA-BISSAU | Fanadu di Mindjer | Kriolu |
| EGYPT | Thara | Arabic |
| | Khitan | Arabic |
| | Khifad | Arabic |
| ETHIOPIA | Megrez | Amharic |
| | Absum | Harrari |
| ERITREA | Mekhnishab | Tigregna |
| IRAN | Xatna | Farsi |
| KENYA | Kutairi | Swahili |
| | Kutairi was ichana | Swahili |
| NIGERIA | Ibi/Ugwu | Igbo |
| | Didabe fun omobirin/ ila kiko fun omobirin | Yoruba |
| SIERRA LEONE | Sunna | Soussou |
| | Bondo | Temenee |
| | Bondo/sonde | Mendee |
| | Bondo | Mandinka |
| | Bondo | Limba |
| SOMALIA | Gudiniin | Somali |
| | Halalays | Somali |
| | Qodiin | Somali |
| SUDAN | Khifad | Arabic |
| | Tahoor | Arabic |
| TURKEY | Kadin Sunneti | Turkish |
| | | |

FGM SPECIALIST HEALTH SERVICES IN ENGLAND AND WALES

For an up to date list of FGM Clinics, please click the link below and then go to 'Download a list of all available clinics'.

http://www.nhs.uk/NHSEngland/AboutNHSservices/sexual-health-services/Pages/fgm-health-services-for-women.aspx

ORGANISATIONS WORKING ON ISSUES ON AROUND FGM

POLICE SERVICE

Metropolitan Police Service / Project Azure 020 7161 2888

UK GOVERNMENT

https://www.gov.uk/female-genital-mutilation

HELPLINES

National Society for the Prevention of Cruelty to Children (NSPCC) FGM Helpline

24 –hour Helpline. Free phone 0800 028 3550 www.nspcc.org.uk/fgm

Black Association of Women Step Out (BAWSO)

24-hour Helpline: 0800 731 8147 www.bawso.org.uk

ChildLine

24-hour Helpline for children: 0800 1111 www.childline.org.uk

National Domestic Violence Helpline

24-hour Helpline: 0808 2000 247 www.nationaldomesticviolencehelpline.org.uk

NSPCC British Sign Language Helpline for deaf or hard-of-hearing callers

ISDN videophone: 020 8463 1148

Webcam: nspcc.signvideo.tv (available Monday – Friday, 9am – 5pm, in English language only)

Text: 0800 056 0566

OTHER ORGANISATIONS

28 Too Many

http://28toomany.org/

Africans Unite Against Child Abuse (AFRUCA)

http://www.afruca.org/

Agency for Culture and Change Management UK (ACCM UK)

http://www.accmuk.com/

Birmingham & Solihull Women's Aid

http://bswaid.org/

Foundation for Women's Health Research & Development (FORWARD)

http://www.forwarduk.org.uk/

Halo Project

http://www.haloproject.org.uk/

Manor Gardens Health Advocacy Project

http://www.manorgardenscentre.org/

The Maya Centre

www.mayacentre.org.uk

For more organisations and local services, please visit

https://www.gov.uk/female-genital-mutilation