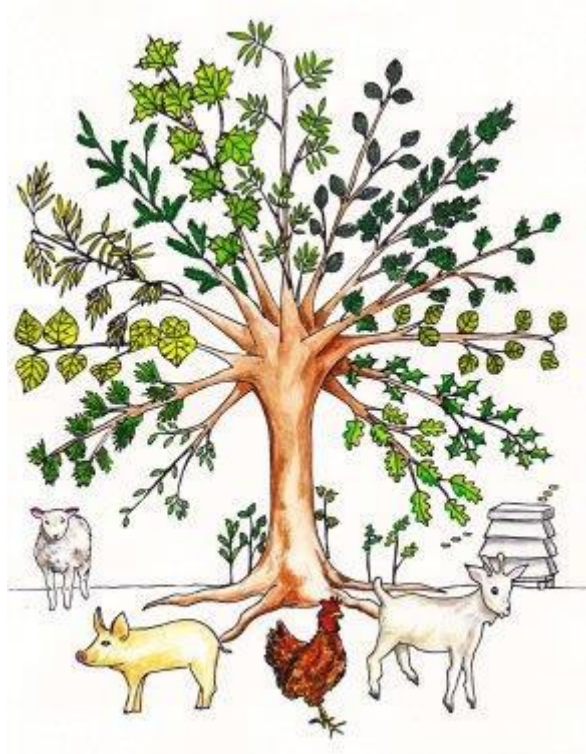


Edwalton Primary School

FGM Policy Statement



Written by Trish Gilbert DSL

Written in accordance with Government regulations and guidelines, Nottinghamshire safeguarding children partnership guidance and NSPCC guidance.

September 2025

Due to review September 2027

This policy should be read in conjunction with the school's safeguarding and child protection policy.

Edwalton Primary School has robust safeguarding and child protection procedures and practices in place and takes its responsibilities seriously and works in accordance with the legal frameworks. (Female Genital Mutilation Act 2003 and the Serious Crime Act 2015.) Female Genital Mutilation is a form of child abuse, and as such, is dealt with under the school's Child Protection and Safeguarding Policy. All staff at Edwalton Primary School have received appropriate training and are aware of their legal responsibilities within this framework and who to discuss any concerns with within school and the Head Teacher and Governors expect all staff to adhere to these policies and procedures.

"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"

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 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 Leonians, Egyptians, Nigerians and Eritreans. However, women from non- African communities who are at risk of FGM include Yemeni Kurdish, Indonesian and Pakistani women.”

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

With this in mind, at Edwalton Primary School, we will be proactive in our actions to prevent our girls being forced to undertake FGM.

The Head Teacher and Governors do this in the following ways:-

1. A robust attendance policy that does not authorise holidays, extended or otherwise.
2. FGM training for all staff in school.
3. FGM discussions by DSL's with parents of children from practising communities who are at risk.
4. We teach PSHE and RSHE at an age appropriate level to all pupils which includes an age appropriate discussion about FGM.

The following may be indicators that FGM has taken place:

Difficulty walking, sitting or standing

Prolonged absence from school

Spending long periods of time away from school with urinary problems

Reluctance to undergo medical examinations

Noticeable changes in behaviour-FGM can result in post-traumatic stress

Soreness or infection or frequent visits to the toilet

Asking for help but not being explicit about the problem due to embarrassment or fear

Indications that a child may be at risk of FGM:

The family are 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 about a special ceremony.

Parents/carers may request permission for authorised holidays to their country of origin. Parents may request 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, eg. younger siblings or extended family members and a referral made to children's social care as appropriate.

Mandatory reporting

Teachers must report to the police cases where they discover that an act of FGM appears to have been carried out. Unless the teacher has a good reason not to, they should still consider and discuss any such case with the school's designated safeguarding leads and involve children's social care as appropriate.

Section 5B of the Female Genital Mutilation Act 2003 (and section 74 of the Serious Crime Act 2015) will place a statutory duty upon teachers, along with social workers and healthcare professionals, to report to the police if they discover (either through disclosure by the victim or visual evidence) that FGM has 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, but the same definition of what is

meant by “to discover that an act of FGM appears to have been carried out” is used for all professionals to whom this mandatory report duty applies.