



## Guidance for Education

**Female Genital Mutilation (FGM)** is the removal of part or all of the external female genitalia and/or injury to the female genital organs for cultural or other non-therapeutic reasons.

It is also known as cutting, and sometimes referred to as female circumcision, purification or as a girl 'having her bath'.

FGM has no health benefits and is not supported by any religion.

FGM is child abuse. This traditional practice is an extreme form of gender-based abuse, causing significant and lifelong physical and emotional harm.

### FGM is a crime in Scotland:

It is against the law to carry out FGM, assist or arrange FGM for a child in Scotland or take a girl abroad for FGM (Prohibition of FGM (Scotland) Act 2005).

It is possible for the Scottish Courts to impose FGM Protection Orders (FGM Protection & Guidance (Scotland) Act 2020).

Legislation covers the following situations that can be identified in education settings:

- The child is at risk of FGM in Scotland or the UK, based on information they or their family provide.
- There is a plan for a child to travel to a country where FGM is practiced and there is a risk that the practice could be performed during their visit.
- There is a family history of early marriage, and a girl/young woman is approaching the age at which close female relatives were married. Sometimes, FGM is performed in preparation for marriage.

### Local Procedures:

There is currently a multi-agency working group looking to revise the [Edinburgh and Lothians Inter-Agency Procedures for the Protection of Girls and Women at Risk of FGM](#) (2017). This will align with wider work currently being undertaken by Scottish Government which is due July 2026. In the meantime, education staff in Edinburgh are asked to follow this interim guidance when identifying concerns that could be related to FGM.

### Who is at risk of FGM?

The procedure affects only females in a family but may be carried out soon after birth, during childhood or adolescence, just before marriage or during a woman's first pregnancy.

## Families are less likely to continue the practice if:

They demonstrate an awareness of FGM, how it relates to child abuse and the law in Scotland.

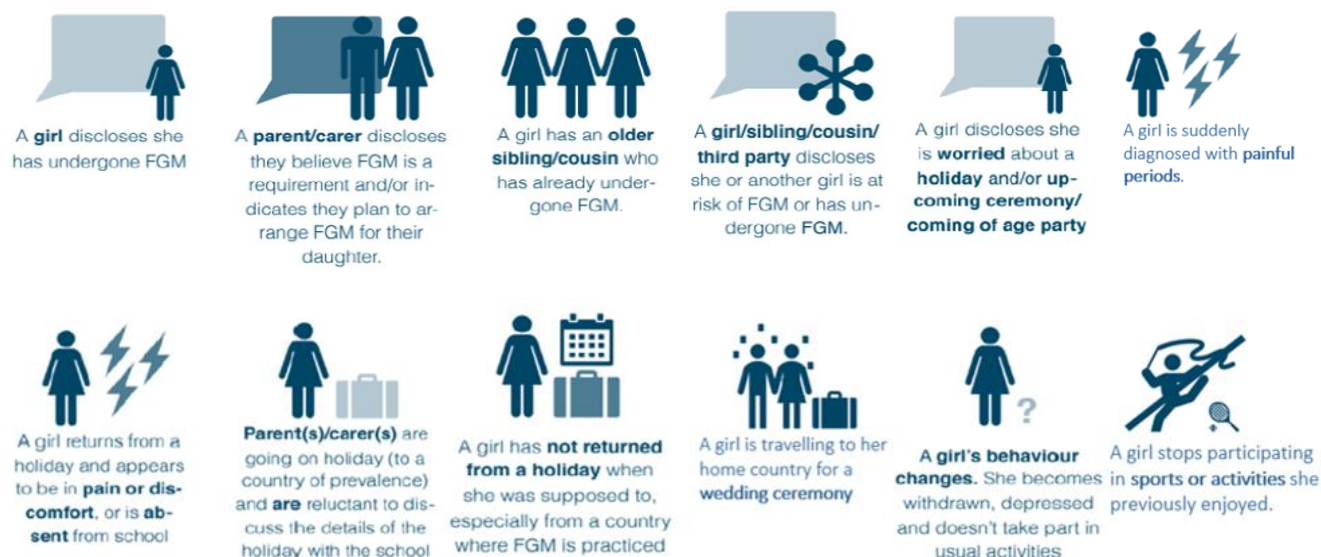
They understand the individual health and legal consequences of this practice and demonstrate they are opposed to FGM.

They understand they have parental responsibility to keep female children safe from FGM.

They have the opportunity to ask questions and seek support.

Their views and beliefs on girls' and women's rights are aligned with Scottish culture, society and legislation.

## Indicators of FGM:



## Prevalence:

Over 230 million girls and women worldwide have undergone FGM. Africa accounts for nearly 65% of the survivor population. FGM is highly concentrated in countries spanning the African continent from the Atlantic coast to the Horn of Africa. It also exists in areas of the South West Asia and in some countries like Indonesia, usually as a result of migration.

Countries where the practice is almost universal:

**Somalia**  
**Egypt**

**Djibouti**  
**Sudan**

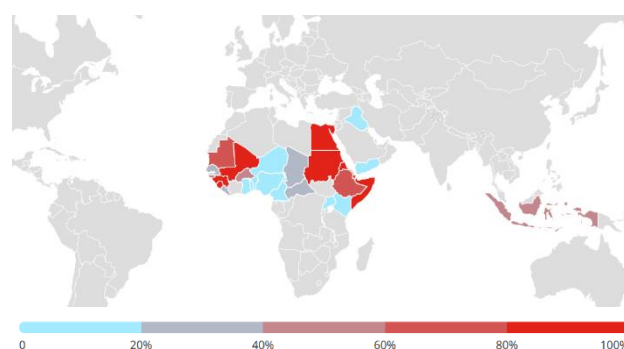
**Guinea**  
**Eritrea**

**Mali**  
**Sierra Leone**

Edinburgh has the most populated Sudanese community in Scotland, where FGM is almost universal.

FGM is also prevalent in Iraqi Kurdistan (particularly rural areas and there is a sizeable Sorani (Iraqi)

Kurdish community in Edinburgh. It is important to be vigilant about any girls/young women planning to travel to the region.



## Your responsibilities if you become aware of FGM concerns:

Education professionals are ideally suited not only to raise awareness of FGM, but also to safeguard and support girls and young women. As with all wellbeing or child protection concerns, staff should involve children/young people and parents/carers wherever possible, unless there is clear evidence that doing so would put the child at further risk of harm.

If there are imminent or unplanned risks identified, then an immediate Child Protection Referral should be made, as would be the case in any circumstance.

However, in all other circumstances, before considering a referral to Social Care Direct, you should:

Gather as much information as you can.

Speak to the parents/carers to understand and explore the concern.

Speak to a girl to explore her holiday plans (before) or experiences (after), if she is old enough.

Record the information on a Wellbeing Concern Form and decide on next steps...

## Information sharing:

Child protection concerns arise in those circumstances when there is actual or a risk of significant harm to a child, arising from abuse or neglect. It is important that professionals respond proportionately, and child protection referrals are only made to Social Work and the Police where the child is at risk of significant harm.

Once professionals have spoken with a child, and, where appropriate their parent/carer(s), they should record the information on a Wellbeing Concern Form including how they have informed the family and then share relevant and proportionate information with other services if required.

For more information refer to the [10-step guide to sharing information to safeguard children](#) (Information Commissioner's Office).

## Speaking to parent/carer(s) about FGM:

Speaking about a Holiday:	Speaking about a Health or Wellbeing matter:
<p>It is important to remember families have the right to go on holiday, including heritage holidays, and this should not be restricted without clear evidence a girl is at risk.</p> <p>Any conversation is focused on care for the child's wellbeing and not suspicion of the family.</p> <p>We recommend you:</p> <ul style="list-style-type: none"><li>• explore the family's country of origin, including information on the destination of any trip</li><li>• explore the purpose of the holiday/trip, who will be going, who will they be visiting, when do they expect to return?</li><li>• invite parent/carer(s) into school or conduct a conversation over the phone about the requested absence and explain you want to discuss the practice of FGM (also known as 'cutting' or 'female circumcision').</li></ul>	<p>If a girl or young person is showing physical indicators of discomfort or there is a change in her behaviour, you should speak to the girl first (if possible) and her parent/carer(s). Due to the subject matter, it may be better to speak with a female caregiver.</p> <p>We recommend you:</p> <ul style="list-style-type: none"><li>• explain what has been observed and give the child and their parent/carer(s) an opportunity to provide any context. Be transparent about next steps if you have concerns.</li><li>• tell the girl and her family that you may need to seek further advice from the health visitor (early years), school nurse (school age) or social work.</li><li>• if there is an immediate medical concern, you should suggest the girl is taken to her GP for further assessment and check this has occurred.</li></ul>
<b>Record the information on a Wellbeing Concern Form and add an entry to the child's Chronology.</b>	

## Have you heard of FGM/Cutting/Female Circumcision?

Yes

- What term do you use for it?
- What do you know about it?
- Is it something that is practiced where you are going?
  - If yes, but not anymore, what made people stop?
- What are your and your family's views on the practice?
- Is it something you would be worried about your daughter undergoing?

No

- Explain that FGM is a practice that is reported to happen where the family are going and is considered child abuse and illegal in the UK
- You should share the national [Statement Opposing FGM](#) (Scottish Government)
- Explain that FGM involves damaging a girl's genitalia and can have physical and emotional health implications

### At the end of the conversation ensure parent(s)/carer(s):

- ☑ Understand what FGM is
- ☑ Understand the consequences of FGM (emotional, physical and legal)
- ☑ Understand they have a parental responsibility to keep their daughter safe from FGM in the UK and abroad
- ☑ Know that FGM is considered child abuse and illegal in the UK
- ☑ Have leaflets and any other educational documents regarding FGM, especially those in other languages they can show family members
- ☑ Have the opportunity to ask any questions
- ☑ Understand you are there to support them

Further Concern

- **Record** the information and concerns carefully on a **Wellbeing Concern Form**.
- Speak to your **Child Protection Lead**.
- Follow the **Child Protection Referral Process**.
- Include details of all conversations held with the parent/carers and any dates of travel.

No Concern

- Explain to parent/carers they can contact you any time
- **Record** the information and concerns carefully on a **Wellbeing Concern Form** and/or **Pastoral Notes** and add an entry to the **Chronology**.
- Debrief with the Child Protection Lead.

**THIS DOES NOT REQUIRE A CHILD PROTECTION REFERRAL**