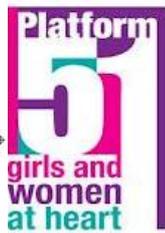


# THE FGM GAME



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# **TEACHING ABOUT FEMALE GENITAL MUTILATION**

Personal, Health Social Economic Education (PSHE Education) is unlike other subjects taught in school. In other subjects there is a set body of knowledge that needs to be taught at different ages. PSHE Education takes its subject content from the lives of children and young people.

We need to plan and deliver PSHE Education work that deals with the actual issues/dilemmas that young people are experiencing. If we plan PSHE Education programmes that are “safe” and more “comfortable” to teach, we are not tackling real issues for young people, leaving them to find their own way without support and guidance.

It is therefore important that a variety of effective ways of consulting with young people are used, plus the evidence base from professionals who provide services for young people, to plan programmes of study for teaching in schools.

PSHE Education lessons are not personal therapy sessions. This distinction needs to be clearly made. PSHE Education lessons need to offer pupils the opportunity to explore an issue, learn facts, discuss, consider, listen to the opinion of others and learn where to access further help and support. To do this effectively in the classroom, and to tackle sensitive and controversial subjects the learning environment must feel safe.

The way these subjects are taught, is therefore more important than the subject content itself.

Two components of particular importance when teaching controversial topics are:

Using ground rules – to control respectful discussion and challenge prejudice.

Distancing – using DVDs/characters/scenarios to illustrate the issues being explored, without expecting young people to talk about personal issues openly in the classroom.

Describing the characteristics of outstanding teaching of PSHE Education, OFSTED state:

“Teachers are confident and skilled in discussing sensitive and/or controversial issues. Effective discussion is a very strong feature; pupils are encouraged to investigate, express opinions and listen to other people”

OFSTED 2012, PSHE subject report,

Female Genital Mutilation (F.G.M) is an illegal practice in this country. It is surrounded by many cultural sensitivities which need to be discussed. It is important that all young people have their awareness raised about this as a human rights issue and young people from practising communities are able to discuss this issue, know how to access support and learn how to keep themselves safe.

# FGM (Female Genital Mutilation/cutting) or Female circumcision

## What is Female Genital Mutilation?

Female Genital Mutilation (FGM) or Female Circumcision or cutting is a procedure involving the removal of part or all of a girl's external sex parts. There are 4 different types. Type 1 includes pricking or removing the clitoris and is sometimes called 'Sunna' or sunnah. The most severe type is called **infibulation** and involves removing the clitoris and the fleshy lips around the vagina known as the labia. The skin is then stitched together leaving only a tiny hole as an opening to the vagina.

## Definitions

1. **Infibulation**: narrowing of the vaginal opening by creating a seal, this seal is formed by cutting or repositioning the inner or outer labia.
2. **Labia**: these are 'the lips' that surround the vagina. The *labia minora* are the inner lips and the *labia majora* are the outer lips.
3. **Clitoridectomy**: Partial or total removal of the clitoris (the small, sensitive and erectile part of the female genitals).
4. **Excision**: partial or total removal of the clitoris AND the labia minora, with or without the excision of the labia majora.

## Why is FGM performed?

One of the biggest reasons of why FGM is performed is because of custom and tradition. It is believed to have started in the 5<sup>th</sup> century BC and originally began because men wanted to control women's sexuality. Today it is practised in about 28 African countries, parts of Asia and Latin America and across the developed world where immigration from practising communities have taken place.

Other reasons given for practising FGM include:

- Preservation of virginity/chastity
- Social acceptance, especially for marriage
- Enhancing fertility
- Increasing sexual pleasure for the male
- Family honour
- Hygiene and cleanliness

The World Health Organisation (WHO) states that in every society in which FGM is practised it is a manifestation of **gender inequality**.

## Religion and FGM

FGM is practised amongst some Christian groups, particularly Coptic Christians in Egypt, Sudan, Eritrea and Ethiopia. The Bible does not support this practise nor is there any suggestion that FGM is a requirement or condoned by Christian teachings and beliefs.

FGM may also take place amongst some Bedouin Jews and Falashas (Ethiopian Jews).

Muslim scholars have condemned the practise and are clear that FGM is an act of violence against women. Additionally, scholars and clerics have stressed that Islam forbids people from inflicting harm on others and therefore the practise of FGM is counter to the teachings of Islam.

## Health Risks

FGM is rarely carried out in a clean environment but usually takes place on the floor or table of someone's home. The instruments used aren't sterile or clean and are often used on many girls at one time. FGM causes both Long term and short term health problems.

<u>Short Term</u>	<u>Long Term</u>
Broken bones from being held down	High risk of infertility
Infections and a high risk of getting HIV and AIDs	Vaginal, urine, kidney and pelvic infections
Urine problems	Problems with pregnancy and childbirth
Damage to other organs and tissues	Emotional and psychological problems (sexual problems)
Haemorrhage which can cause death	Problems with periods and urinating

## Who is at risk?

School aged girls from certain ethnic groups are more at risk; these include Somali, Sudanese, Ethiopian and Gambian girls. In Bristol it is estimated that about 1200 girls are at risk of having FGM.

The World Health Organisation (WHO) estimates that 100-140 million girls and women have experienced female genital mutilation and up to 3 million girls undergo such a procedure each year. There are nearly 16,000 aged 8 or younger at risk of Type 3 FGM and 5,000 at risk of Type 1 and 2. In addition, over 8,000 girls aged 9 or more had a high probability of already having type 3 FGM.

**Type 1** (Clitoridectomy) – This involves the excision of the skin surrounding the clitoris with or without excision of part or the entire clitoris.

**Type 2** (Excision) - Is the removal of the entire clitoris and part or all of the labia minora.

**Type 3** (Infibulation) – The entire clitoris and some or all of the labia minora are excised, and incisions are made in the labia majora to create raw surfaces. This just leaves a tiny opening for menstrual and urinary flow.

**Type 4** - Includes all other harmful procedures to the female genitalia for non-medical purposes such as pricking, piercing or incision of the clitoris and/or labia.

## FGM and the Law

**Child protection:** FGM is considered to be a form of child abuse. Local authorities may take action against it under section 47 of the Children Act 1989; they can apply to the courts for various orders to prevent a child being taken abroad for FGM.

There are two international conventions containing articles which can be applied to FGM

- The UN Convention of the Rights of the Child
- The UN Convention on the Elimination of All Forms of Discrimination Against Women

It is illegal for a girl or woman living in the UK to have FGM either at home or abroad. The maximum penalty for anyone organising or carrying out FGM is 14 years in prison. Even though there have not been any prosecutions yet in the UK the police are confident there will be soon. There have been many prosecutions for FGM in Europe and America.

For more information contact: FORWARD – The Foundation for Women’s Health, Research and Development – for Africa women & girls. Tel: 020 8960 4000 [www.forwarduk.org.uk](http://www.forwarduk.org.uk) or access local guidelines at [www.swcpp.org.uk](http://www.swcpp.org.uk)

# TEACHING CONTROVERSIAL ISSUES

“Controversial issues are seen as central to PSHE and staff encourage pupils to explore issues and reflect on a balance of responses. Most teachers are confident in answering questions and exploring issues.”

Advanced practice in Teaching and Learning PSHE

## Ground rules

Use ground rules in the lesson to agree how the class will behave towards each other in PSHE lessons

## Question Box

This allows young people to ask question they want answering. Make sure they can do this anonymously.

## Language

Agree language you will use to describe issues as they come up in lessons. Challenge prejudice and discrimination. Model alternatives.

## Images

Challenge stereotypes by ensuring that images used reflect the diversity of our culture and avoid reinforcing stereotypes.

## Groups

Balance groups that young people work in to ensure they work with a range of points of view.

## Signposting

Signpost young people to where they can get help and support in school, in the community and further afield, locally and nationally.

## Lesson plan

Think the issue through carefully and plan the lessons to incorporate a range of points of view. Frame the structure of the lesson to enable reflection and discussion.

## Teaching and learning activities

Use active learning techniques to enable discussion to take place in a structured way.

- Scenario cards
- Questions/discussions
- Video clips
- Role play
- Hot seating
- Carousel
- Circle in a circle
- Consequences
- Continuum
- Diamond 9
- Graffiti boards
- Snowballing
- Take a stand/ syndicates
- Tours
- Word storm

**Don't avoid difficult issues. Make them Safe.**

## What to do in the event of a disclosure

If you have concerns that a girl is at risk of FGM, or has made a disclosure concerning herself, a family member or a friend, you must report this.

**FGM IS A FORM OF CHILD ABUSE AND MUST BE DEALT WITH AS SUCH.** Failure to report any concerns may result in a girl being harmed. FGM is also a criminal offence.

Link to London Child Protection Procedure in respect of FGM flow chart (reproduced in this pack):  
[http://forward-usr-bucket.s3.amazonaws.com/downloads/London\\_Child\\_Protection\\_Procedure-FGM\\_FORWARD.pdf](http://forward-usr-bucket.s3.amazonaws.com/downloads/London_Child_Protection_Procedure-FGM_FORWARD.pdf)

Link to the national FGM multi-agency practice guidelines:  
[www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_124551](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_124551)

Link to the South West Child Protection Procedures Female Genital Mutilation Guidelines:  
[www.online-procedures.co.uk/swcpp/contents/guidance-child-protection/female-genital-mutilation/](http://www.online-procedures.co.uk/swcpp/contents/guidance-child-protection/female-genital-mutilation/)

Link to the Bristol Safeguarding Children Board (BSCB) female genital mutilation training courses:  
[www.bristol.gov.uk/page/practice-guidance](http://www.bristol.gov.uk/page/practice-guidance)

For more information about safeguarding issues and female genital mutilation contact:  
Jackie Mathers, Designated Nurse for Safeguarding Children  
Email: [jackie.mathers@bristol.nhs.uk](mailto:jackie.mathers@bristol.nhs.uk)  
Tel: 0117 900 2670

Print out of [http://forward-usr-bucket.s3.amazonaws.com/downloads/London\\_Child\\_Protection\\_Procedure-FGM\\_FORWARD.pdf](http://forward-usr-bucket.s3.amazonaws.com/downloads/London_Child_Protection_Procedure-FGM_FORWARD.pdf)

## Ground Rules

1. Do not ask others personal questions. No one is obliged to disclose personal information.
2. What is said in the room stays in the room. (*Breaking the confidentiality of the discussions in this group could put group members at risk.*)
3. Listen to one another and do not speak over each other.
4. Everyone has a right to their own opinion you may not agree with it but you should respect it.
5. Do not disclose someone else's personal information to the group without permission.

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*(The teacher is welcome to edit the 'Ground Rules' to make them more suitable for their group.)*

PLEASE NOTE: As a teacher you MUST have attended FGM safeguarding training prior to delivering any lessons in this pack. Please contact Nikki Lawrence for further information

[nicola.lawrence@nbt.nhs.uk](mailto:nicola.lawrence@nbt.nhs.uk)

## KEY CONCEPTS

**THIS LESSON IS ONLY FOR USE AS A FIRST LESSON WITH CLASSES THAT HAVE SOME PRIOR UNDERSTANDING OF FGM. If your class has never come across this subject before please use lessons 2a and 2b (p. 18-34).**

### KEY CONCEPTS

- ❖ Recognising that healthy lifestyles and the well being of self and others are dependent on information and making choices.
- ❖ Understanding that our physical, mental, sexual and emotional health affects our ability to lead fulfilling lives and that there is help and support available when it is threatened.

### KEY PROCESSES

- ❖ Find and evaluate information, advice and support from a variety of sources and be able to support others in doing so.
- ❖ Know when and how to get help.
- ❖ Value differences between people and opinions.

### CONTENT

- ❖ Types and effects of FGM.
- ❖ Explore FGM from a variety of different viewpoints.

### LEARNING OUTCOMES

*By the end of the lesson, the student will be able to:*

- ❖ Understand that there are different types of FGM.
- ❖ Understand the legal standing on FGM.
- ❖ Name places that they can seek help from.

### RESOURCES

- ❖ Laminated number/statement cards
- ❖ 3 x background boards
- ❖ Characters
- ❖ Speech bubbles
- ❖ Questions for use with characters and backgrounds
- ❖ Cloths
- ❖ Pens

**IT IS IMPORTANT TO GO OVER THE GROUNDRULES WITH YOUR CLASS BEFORE PROCEEDING.**

## Ground Rules

1. Do not ask others personal questions. No one is obliged to disclose personal information.
  2. What is said in the room stays in the room. (*Breaking the confidentiality of the discussions in this group could put group members at risk.*)
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## Activity 1 - Opening

<b>Timing</b>
<b>10mins. approx</b>

Establish ground rules with the group (see p.12 for some ideas). These will be particularly important for this session.

It may be important to stress the importance of confidentiality in this session. Breaking the confidentiality of the discussions in this group could put group members at risk. However, if you have any concerns about a girl, or where there has been a disclosure of FGM please refer to guidance notes: “What to do in the event of a disclosure” (p 8).

## Activity 2 – Statements

<b>Timing</b>	<b>Resources</b>
<b>10 mins. approx</b>	Numbered statement cards 

Hand out the 8 statement cards to members of the group. Ask the pupils to read out their statement. Discuss any words that the group are unfamiliar with.

## Activity 2- The FGM Game

<b>Timing</b>	<b>Resources</b>	
<b>30 mins. approx</b>	Backgrounds 	
	Characters 	
	Speech bubbles (includes 3 pre-filled in ones) 	
	Questions for use with characters and background	p.16-17
	Pens	
	Cloths	

3. Introduce the game to the class by assigning the three pre-filled in speech bubbles to three characters. Place one speech bubble and one character on each background.

For example, it might look like this:



4. Encourage the small groups to work together to think through how some of their characters might reply to the speech bubble on their background. Encourage them to write answers in the blank speech bubbles. The prefilled speech bubbles say:

- You can be sent to jail for 14 years if you have a girl cut.
- I think all girls should have their genitals examined by a school nurse.
- Type 1 FGM is part of our religion. It's called Sunnah.

**It is your role as the teacher to ensure that the class have accurate information about FGM at all times.**

Please refer to the background notes at the start of this pack. The following points may also help you:

- Any person found guilty of an offence under the Female Genital Mutilation Act 2003 will be liable to a maximum penalty of a fine or imprisonment of up to 14 years, or both.
- There are different views on the acceptability of routine genital exams for girls as a preventative approach towards FGM. Many parents may disagree with this approach and be unwilling to have their daughters examined whether she has been circumcised or not and see this as unnecessarily invasive. Others may think that if every girl had her genitals examined people would stop performing FGM as they would be more likely to get caught and it would help the authorities to stamp down on FGM. In France, some girls are examined in this way.
- Type 1 FGM is not a part of any religion. Female circumcision is a practice that predates Islam as well as Christianity and Judaism.

5. Swap the speech bubbles around and give a new one to each group. This time encourage the groups to think about *where* the statement might be said, as well as practicing responding in character.

You may wish to do this one more time so that each group has had a go with each pre-filled in speech bubble.

6. Give each group a handful of additional characters and some more speech bubbles. Try and ensure a diverse mix of characters. Do not take too long doing this and do not allow the groups to become overwhelmed with the number of characters. You do not need to use all of the characters in the pack.

7. Ask the groups to think about how, and where, they might position which characters to answer the following statements:

**- All schools teach their students about FGM.**

Teachers note: While it is true that some schools (both Primary and Secondary) include FGM in their school syllabus, many do not. A common mind-set while approaching the topic of FGM is: *"This does not affect me."* This may well be the reason that some schools choose not to educate their students about FGM, they may also be uncomfortable teaching their students about it because they may be worried about appearing culturally insensitive and may not want to offend students and their families. Pupils could think about what parents might think about this and say while at home.

**- FGM has been happening for centuries. No one is going to stop it.**

Teachers note: While it is true that FGM has been happening for centuries it is not impossible for the practice to cease. There are many organisations dedicated to stopping the practice of FGM throughout the country, such as FORWARD.

Laws have been passed in the UK and in other countries to stop FGM being practised. In fact, the law clearly states that it is illegal for UK nationals or permanent UK residents to perform FGM abroad or even assist a girl in having FGM abroad or assist a girl in having FGM done to her outside the UK. So as you can see laws are constantly being adjusted to clamp down on FGM practitioners.

Using characters and backgrounds pupils might decide that a police officer in the police station might say: "FGM is against the law in this country and in many countries around the world. Slavery was considered perfectly normal in this country until the nineteenth century. It is now recognised as an abuse of people's human rights. Some people are still treated very much like slaves unfortunately, for example if they have been trafficked, but as a country, and as a community, we work hard to stop this. We do the same with FGM. We know it happens but we work to stop it."

Meanwhile, a teenager in the park might respond to this by saying "What can you do? It's like smacking isn't it. People know it's wrong but it's all about how you are brought up. Look, that woman over there just whacked her kid. He doesn't seem to mind too much. It never did me any harm."

**- Men and women can be circumcised.**

Teachers note: About one-fifth of men worldwide have been circumcised. Male circumcision is a religious practice with supporting evidence from Holy Scriptures. It is compulsory for male Jews and the practice is mentioned in the Torah as it was a command from God to Abraham that every male child shall be circumcised.

However, FGM, which is sometime called female circumcision is not encouraged by any religion nor is it mentioned in any Religious Scriptures. Contrary to popular belief it is not "Sunna". The practice is based on culture and tradition. Sunna is an Arabic word that means habit or usual practice.

8. Once the class is familiar with working in this way move on to select a range of questions from the list on the next two pages (p. 16-17). You **MUST** ask either question one or two or your class may be unsure what to if they have concerns about themselves or another being at risk of FGM.

**After pupils have each written something, or written something as a small group, it is the role of the teacher to pull out common themes, dispel any myths and challenge stereotypes. It is also up to the teacher to encourage the class to reflect upon why people may say different things depending on their location.**

## Questions for use with characters and backgrounds

### \* 1. What would your character do if they had concerns about a girl or woman being cut?

Teachers note: You **MUST** ask this question or question 2. Ensure pupils can identify who they need to speak to if they have any concerns, for example, a teacher, a GP, a police officer, a hospital worker, a youth worker.

### \* 2. Where could your character go if they were worried that a girl or woman was at risk of being cut?

Teachers note: You **MUST** ask this question or question 1. Each background has at least one source of medical support – be that a family practice, a pharmacy, an emergency vehicle, a walk-in centre or a hospital. One background has a police station and another a community police portacabin. Other places characters could go would be schools or social services (not marked on backgrounds).

### 3. Has your character ever heard of FGM? Why is this?

Teachers note: It is particularly important with this question that pupils do not engage in racist stereotyping. It is important to allow pupils to speak openly however and if they argue that a white girl is unlikely to have ever heard of FGM while saying that a brown girl has encourage them to think about why this might be the case while ensuring respectful discussion takes place.

### 4. What does your character know about FGM?

Teachers note: The characters of the Sheikh/Imam and his wife would know a considerable amount about FGM and know that it is not “*Sunna*” and is not a part of Islam. The white teachers should be aware of the procedure and would know what type of girls are more at risk.

### 5. Where might your character find out about FGM?

Teachers note: Highlight family practice, a school, library, hospital or even the police station. The internet is also a useful source when learning about FGM. People may also find out about FGM from their parents or other members of their community or youth club.

### 6. Which, if any, characters are not affected by FGM?

Teacher’s note: Ask pupils to explain their reasoning before explaining to the class that everyone is affected by FGM:

- FGM is a human rights abuse. It is child abuse, physical abuse and emotional abuse.
- Approximately 2000 girls are at risk in Bristol (relate this to the size of your school)
- Just because you might be unaware of FGM does not mean it is not happening.
- Women/girls who are at risk of being circumcised, or who have had it done, need support and help - everyone has a duty to look after one another.
- You may like to encourage your class to putting themselves in other’s shoes and use this poem:

“First they came for the Communists, and I did not speak out-  
Because I was not a Communist.  
Then they came for the Trade Unionists, and I did not speak out-

### Questions for use with characters and backgrounds (cont.)

Because I was not a Trade Unionist.  
Then they came for the Jews, and I did not speak out-  
Because I was not a Jew.  
Then they came for me--and there was no one left to speak for me.”

#### 7. What might be said about FGM in this location?

Teachers note: Answers may not be character-specific. Possible things pupils might say could include:

- “FGM does not affect us.”
- “FGM is only practised by Muslims”
- “FGM is only practised in Africa”
- “There are no girls in this community that are at risk of FGM, it is not practised in this country.”
- “Many girls in this town are at risk of FGM and it is up to us, as a community, to keep them safe.”

#### 8. Is FGM ever acceptable?

Teachers note: Allow the groups to have open discussions on this matter but ensure that pupils leave the class knowing that the answer is **No**.

No religion encourages the practice of FGM. This is a practice known to have begun 5,000 years ago, in many cultures, female genital mutilation or circumcision is culturally acceptable and forced if the young women wants to become marketable upon puberty. FGM is a practice that is beginning to attract a lot of attention.

FGM is performed on young women without their consent, leaving their bodies mutilated, sometimes before reaching puberty.

Whilst FGM is often seen as an act of love (enabling a girl to fit in to her community, ‘protecting’ her from rape where she is sewn shut), rather than cruelty, it causes significant harm and constitutes physical and emotional abuse. FGM is considered to be child abuse in the UK and is a violation of the child’s right to life, their bodily integrity as well as of their right to health.

This lesson, and its sequel (2b), are designed for use with classes that have little or no prior knowledge of FGM. For classes that already have some understanding of the subject, please use lesson 1 (p.11-17).

## KEY CONCEPTS

- ❖ Understand that our physical, mental, sexual and emotional health affects our abilities to lead fulfilling lives and that there is help and support available when this is threatened.

## KEY PROCESSES

- ❖ Know when and how to get help.
- ❖ Use knowledge and understanding to make informed choices about safety, health and well-being.
- ❖ Access and manage the element of risk in personal choices and situations.

## CONTENT

- ❖ Example of diverse values encountered in society and the clarification of personal values.
- ❖ Ways of recognizing and reducing risks, minimizing harm and getting help in emergency and risky situations.

## LEARNING OUTCOMES

*By the end of the lesson the pupils will be able to:*

- ❖ Distinguish between myth and facts about FGM.
- ❖ Identify help and support to keep anyone at risk of FGM.
- ❖ Safeguard and protect their human rights.
- ❖ Consider how to respond if they are concerned about the threat of FGM.

## RESOURCES

- ❖ Think Again DVD
- ❖ FGM – Myth or fact laminated cards

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*(The teacher is welcome to edit the 'Ground Rules' to make them more suitable for their group.)*

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**Activity 1 - Opening**

<b>Timing</b>
<b>10mins. approx</b>

Establish ground rules with the group (see p.19 for some ideas). These will be particularly important for this session.

It may be important to stress the importance of confidentiality in this session. Breaking the confidentiality of the discussions in this group could put group members at risk. However, if you have any concerns about a girl, or where there has been a disclosure of FGM please refer to guidance notes: “What to do in the event of a disclosure” (p.8).

You may like to carry out a warm up activity based on trust.

A simple one to use would be to get the group into pairs and blindfold one of the pair. Get the pupil without the blindfold to guide their pair through a series of activities – you can start simple and build up gradually.

**Activity 2 – Think Again DVD**

<b>Timing</b>	<b>Resources</b>
<b>25 mins. approx</b>	Think Again DVD 

Allow the class to watch the DVD.

**Activity 3 – Myth or Fact**

<b>Timing</b>	<b>Resources</b>
<b>15 mins. approx</b>	Myth or fact laminated cards 

Explain that you on the DVD they heard young women talking about FGM. Some of the things they heard were myths and some were facts. The aim of the next exercise is what to decide is a myth and what is a fact.

Ask the class to work in pairs, give out the statements and ask them to discuss and decide if the statement is a myth or a fact.

Go through each statement with the group and establish if it is a myth or a fact. Additional copies of the myth/fact cards for photocopying can be found on p. 21-23. The correct answers can be found on p.24-26.

**MYTH**

**FACT**

IF YOU DON'T HAVE F.G.M. YOU WILL SMELL

SUNNA IS NOT A TYPE OF F.G.M.

IF YOU ARE A GOOD MUSLIM YOU SHOULD HAVE F.G.M.

WHEN YOU HAVE F.G.M. YOU ARE USUALLY GIVEN AN INJECTION TO MAKE  
YOU FALL ASLEEP

IF YOU DON'T HAVE F.G.M. YOU WILL THINK ABOUT SEX ALL THE TIME AND WANT TO HAVE SEX WITH MANY MEN

IF YOUR FAMILY WANT YOU TO HAVE F.G.M., YOU DON'T HAVE A CHOICE

IF YOU ARE CUT IT USUALLY HEALS UP QUICKLY

HAVING F.G.M. IS A MATTER OF PERSONAL CHOICE

F.G.M. IS AGAINST THE LAW IN THIS COUNTRY AND PUNISHABLE WITH A PRISON SENTENCE

IT IS OKAY IF YOU GO TO ANOTHER COUNTRY TO HAVE F.G.M. DONE

F.G.M. ISN'T REALLY A BIG THING – A LOT OF FUSS IS BEING MADE ABOUT NOTHING

EVERY WOMAN IN THE WORLD HAS THE RIGHT NOT TO HAVE F.G.M.

PEOPLE FROM OTHER COMMUNITIES SHOULDN'T GET INVOLVED. F.G.M. IS NOTHING TO DO WITH THEM AND THEY DON'T UNDERSTAND

# MYTH

# FACT

IF YOU DON'T HAVE F.G.M. YOU WILL SMELL

Answer: This is a myth. The body is designed to ensure that a woman can pass urine, menstruate, have intercourse and deliver a baby. If the opening is narrowed or closed there is a high risk of infection as the body can't get rid of urine and blood effectively. This can back up and cause infections which can also cause the woman/ girl to smell

SUNNA IS NOT A TYPE OF F.G.M.

Answer: Myth Sunna is a word that is used in the Koran to mean something sacred. This word has been adopted by FGM practicing communities to describe type 1 FGM (pricking or cutting the clitoris). FGM is not a religious practice but people often think it is because this word is used. Many Muslim communities do not practice FGM and some Christian communities do

IF YOU ARE A GOOD MUSLIM YOU SHOULD HAVE F.G.M

Answer: Myth FGM is not a religious practice but people often think it is because this word is used. Many Muslim communities do not practice FGM and some Christian communities do. The practice of FGM is believed to have started in 5<sup>th</sup> Century BC and predates all religions.

WHEN YOU HAVE F.G.M. YOU ARE USUALLY GIVEN AN INJECTION TO MAKE YOU FALL ASLEEP

Answer: Myth FGM is usually carried out while the girl is awake and without any anaesthetic. It is usually carried out by 'cutters' who have no medical training and the instruments used are usually not sterilised so there is a high risk of infection. There is also a risk of heavy bleeding after having FGM which can result in illness and sometimes death.

**IF YOU DON'T HAVE F.G.M. YOU WILL THINK ABOUT SEX ALL THE TIME AND WANT TO HAVE SEX WITH MANY MEN**

Answer: Myth This is not true women who have not had FGM do not think about or want sex all the time. The difference is that a woman who has had FGM often feels pain during intercourse so does not enjoy it. This can mean that even women who are married can find sex very painful and this can cause problems in their relationship

**IF YOUR FAMILY WANT YOU TO HAVE F.G.M., YOU DON'T HAVE A CHOICE**

Answer: Myth FGM is against the law and anyone who makes you have it done could be arrested and may end up going to prison for 14 years. It is your body and nobody should hurt or damage it in any way.

**IF YOU ARE CUT IT USUALLY HEALS UP QUICKLY**

Answer: Myth the cut can take up to 7 weeks to heal and sometimes it gets infected and never heals properly. The cutting can cause infections and haemorrhaging and can severely damage the girls' health, cause long term problems and even death

**HAVING F.G.M. IS A MATTER OF PERSONAL CHOICE**

Answer: Myth FGM is against the law for children and women in this country and even if you choose to have this done you will be breaking the law and the person arranging the cutting or carrying it out could go to prison. This is because women or girls may be persuaded to have FGM or feel they have no choice.

**F.G.M. IS AGAINST THE LAW IN THIS COUNTRY AND PUNISHABLE WITH A PRISON SENTENCE**

Answer: True It is against the law for a British national to have FGM in the UK or abroad and anyone caught arranging or performing it risks going to prison for up to 14 years,

**IT IS OKAY IF YOU GO TO ANOTHER COUNTRY TO HAVE F.G.M. DONE**

Answer: Myth, It is against the law for a British national to have FGM in the UK or abroad.

**F.G.M. ISN'T REALLY A BIG THING – A LOT OF FUSS IS BEING MADE ABOUT NOTHING**

Answer: Myth Women who have undergone FGM can develop serious health problems and even death. Women often have problems getting pregnant or having babies. FGM can destroy a girl's or woman's life and can leave them in constant pain.

**EVERY WOMAN IN THE WORLD HAS THE RIGHT NOT TO HAVE F.G.M.**

Answer: True the UN Convention of the rights of the child article 19 states everyone has 'a right to be protected from being hurt or mistreated'.

**PEOPLE FROM OTHER COMMUNITIES SHOULDN'T GET INVOLVED. F.G.M. IS NOTHING TO DO WITH THEM AND THEY DON'T UNDERSTAND**

Answer: Myth many different people including teachers, health professionals and the police are working to stop FGM as it can cause long term problems, pain and distress for those who have had it done. Members of the FGM practicing communities are working in partnership with professionals to help stop the practice.

This lesson is designed to run after lesson 2a (p. 18-26) and is designed for classes with little prior knowledge of FGM. If you class has pre-existing knowledge of the subject please use lesson 1 (p.11-17).

## KEY CONCEPTS

- ❖ Understand that our physical, mental, sexual and emotional health affects our abilities to lead fulfilling lives and that there is help and support available when this is threatened.

## KEY PROCESSES

- ❖ Find and evaluate information, advice and support from a variety of sources and be able to support others in doing so.
- ❖ Assess and manage risk in personal choices and situations.
- ❖ Minimise harm in risky situations and demonstrate how to help others do so.

## CONTENT

- ❖ Where and how to obtain health information.
- ❖ How to recognise and follow health information.
- ❖ Recognise and follow health and safety procedures and ways of reducing risk and minimising harm in risky situations.
- ❖ Recognise sources of emergency help and use.

## LEARNING OUTCOMES

*By the end of the lesson the pupils will be able to:*

- ❖ To be able to say what FGM is.
- ❖ To know the effects that FGM can have on a girl/woman.
- ❖ To know the consequences of FGM in terms of the British Law.
- ❖ To consider how to respond if you are concerned about the threat of FGM.

## RESOURCES

- ❖ 3 x background boards
- ❖ Characters
- ❖ Speech bubbles
- ❖ Questions for use with characters and backgrounds
- ❖ Cloths
- ❖ Pens
- ❖ Leaflets:
  - Female Genital Mutilation - the facts
  - Young People speak out postcards
  - Female Genital Mutilation/cutting – Information and help.
  - 16 ways to help end FGM

**IT IS IMPORTANT TO GO OVER THE GROUNDRULES WITH YOUR CLASS BEFORE PROCEEDING.**

## Ground Rules

1. Do not ask others personal questions. No one is obliged to disclose personal information.
  2. What is said in the room stays in the room. (*Breaking the confidentiality of the discussions in this group could put group members at risk.*)
  3. Listen to one another and do not speak over each other.
  4. Everyone has a right to their own opinion you may not agree with it but you should respect it. Do not disclose someone else's personal information to the group without permission.
- 

*(The teacher is welcome to edit the 'Ground Rules' to make them more suitable for their group.)*

PLEASE NOTE: As a teacher you MUST have attended FGM safeguarding training prior to delivering any lessons in this pack. Please contact Nikki Lawrence for further information

[nicola.lawrence@nbt.nhs.uk](mailto:nicola.lawrence@nbt.nhs.uk)

## Activity 1 - Recap

**Timing**

**10-15mins.**

**Approx.**

Go over the ground rules with the class (see p. 28 for some ideas). These will be particularly important for this session.

Remind the students of their previous session. You may like to do a mind map saying ‘What is FGM?’ To start things off you may add some information from the FGM information sheets for the teachers. E.g. *“it is illegal”, “it stands for Female Genital Mutilation”*.

It may also be useful to go through the fact and myth exercise from the previous session.

This activity is very useful for the second activity.

## Activity 2- The FGM Game

Timing	Resources	
<b>30 mins. approx</b>	Backgrounds	
	Characters	
	Speech bubbles (includes 3 pre-filled in ones)	
	Questions for use with characters and background	p.32-33
	Pens	
	Cloths	

3. Introduce the game to the class by assigning the three pre-filled in speech bubbles to three characters. Place one speech bubble and one character on each background.

For example, it might look like this:



4. Encourage the small groups to work together to think through how some of their characters might reply to the speech bubble on their background. Encourage them to write answers in the blank speech bubbles. The prefilled speech bubbles say:

- You can be sent to jail for 14 years if you have a girl cut.
- I think all girls should have their genitals examined by a school nurse.
- Type 1 FGM is part of our religion. It's called Sunnah.

**It is your role as the teacher to ensure that the class have accurate information about FGM at all times.**

Please refer to the background notes at the start of this pack. The following points may also help you:

- Any person found guilty of an offence under the Female Genital Mutilation Act 2003 will be liable to a maximum penalty of a fine or imprisonment of up to 14 years, or both.
- There are different views on the acceptability of routine genital exams for girls as a preventative approach towards FGM. Many parents may disagree with this approach and be unwilling to have their daughters examined whether she has been circumcised or not and see this as unnecessarily invasive. Others may think that if every girl had her genitals examined people would stop performing FGM as they would be more likely to get caught and it would help the authorities to stamp down on FGM. In France, some girls are examined in this way.
- Type 1 FGM is not a part of any religion. Female circumcision is a practice that predates Islam as well as Christianity and Judaism.

5. Swap the speech bubbles around and give a new one to each group. This time encourage the groups to think about *where* the statement might be said, as well as practicing responding in character.

You may wish to do this one more time so that each group has had a go with each pre-filled in speech bubble.

6. Give each group a handful of additional characters and some more speech bubbles. Try and ensure a diverse mix of characters. Do not take too long doing this and do not allow the groups to become overwhelmed with the number of characters. You do not need to use all of the characters in the pack.

7. Ask the groups to think about how, and where, they might position which characters to answer the following statements:

**- All schools teach their students about FGM.**

Teachers note: While it is true that some schools (both Primary and Secondary) include FGM in their school syllabus, many do not. A common mind-set while approaching the topic of FGM is: *"This does not affect me."* This may well be the reason that some schools choose not to educate their students about FGM, they may also be uncomfortable teaching their students about it because they may be worried about appearing culturally insensitive and may not want to offend students and their families. Pupils could think about what parents might think about this and say while at home.

### **- FGM has been happening for centuries. No one is going to stop it.**

Teachers note: While it is true that FGM has been happening for centuries it is not impossible for the practice to cease. There are many organisations dedicated to stopping the practice of FGM throughout the country, such as FORWARD.

Laws have been passed in the UK and in other countries to stop FGM being practised. In fact, the law clearly states that it is illegal for UK nationals or permanent UK residents to perform FGM abroad or even assist a girl in having FGM abroad or assist a girl in having FGM done to her outside the UK. So as you can see laws are constantly being adjusted to clamp down on FGM practitioners.

Using characters and backgrounds pupils might decide that a police officer in the police station might say: "FGM is against the law in this country and in many countries around the world. Slavery was considered perfectly normal in this country until the nineteenth century. It is now recognised as an abuse of people's human rights. Some people are still treated very much like slaves unfortunately, for example if they have been trafficked, but as a country, and as a community, we work hard to stop this. We do the same with FGM. We know it happens but we work to stop it."

Meanwhile, a teenager in the park might respond to this by saying "What can you do? It's like smacking isn't it. People know it's wrong but it's all about how you are brought up. Look, that woman over there just whacked her kid. He doesn't seem to mind too much. It never did me any harm."

### **- Men and women can be circumcised.**

Teachers note: About one-fifth of men worldwide have been circumcised. Male circumcision is a religious practice with supporting evidence from Holy Scriptures. It is compulsory for male Jews and the practice is mentioned in the Torah as it was a command from God to Abraham that every male child shall be circumcised.

However, FGM, which is sometime called female circumcision is not encouraged by any religion nor is it mentioned in any Religious Scriptures. Contrary to popular belief it is not "Sunna". The practice is based on culture and tradition. Sunna is an Arabic word that means habit or usual practice.

8. Once the class is familiar with working in this way move on to select a range of questions from the list on the next two pages (p. 32-33). You **MUST** ask either question one or two or your class may be unsure what to if they have concerns about themselves or another being at risk of FGM.

**After pupils have each written something, or written something as a small group, it is the role of the teacher to pull out common themes, dispel any myths and challenge stereotypes. It is also up to the teacher to encourage the class to reflect upon why people may say different things depending on their location.**

### Questions for use with characters and backgrounds

**\* 1. What would your character do if they had concerns about a girl or woman being cut?**

Teachers note: You **MUST** ask this question or question 2. Ensure pupils can identify who they need to speak to if they have any concerns, for example, a teacher, a GP, a police officer, a hospital worker, a youth worker.

**\* 2. Where could your character go if they were worried that a girl or woman was at risk of being cut?**

Teachers note: You **MUST** ask this question or question 1. Each background has at least one source of medical support – be that a family practice, a pharmacy, an emergency vehicle, a walk-in centre or a hospital. One background has a police station and another a community police portacabin. Other places characters could go would be schools or social services (not marked on backgrounds).

**3. Has your character ever heard of FGM? Why is this?**

Teachers note: It is particularly important with this question that pupils do not engage in racist stereotyping. It is important to allow pupils to speak openly however and if they argue that a white girl is unlikely to have ever heard of FGM while saying that a brown girl has encourage them to think about why this might be the case while ensuring respectful discussion takes place.

**4. What does your character know about FGM?**

Teachers note: The characters of the Sheikh/Imam and his wife would know a considerable amount about FGM and know that it is not “*Sunna*” and is not a part of Islam. The white teachers should be aware of the procedure and would know what type of girls are more at risk.

**5. Where might your character find out about FGM?**

Teachers note: Highlight family practice, a school, library, hospital or even the police station. The internet is also a useful source when learning about FGM. People may also find out about FGM from their parents or other members of their community or youth club.

**6. Which, if any, characters are not affected by FGM?**

Teacher’s note: Ask pupils to explain their reasoning before explaining to the class that everyone is affected by FGM:

- FGM is a human rights abuse. It is child abuse, physical abuse and emotional abuse.
- Approximately 2000 girls are at risk in Bristol (relate this to the size of your school)
- Just because you might be unaware of FGM does not mean it is not happening.
- Women/girls who are at risk of being circumcised, or who have had it done, need support and help - everyone has a duty to look after one another.
- You may like to encourage your class to putting themselves in other’s shoes and use this poem:

“First they came for the Communists, and I did not speak out-  
Because I was not a Communist.  
Then they came for the Trade Unionists, and I did not speak out-

### Questions for use with characters and backgrounds (cont.)

Because I was not a Trade Unionist.  
Then they came for the Jews, and I did not speak out-  
Because I was not a Jew.  
Then they came for me--and there was no one left to speak for me.”

#### 7. What might be said about FGM in this location?

Teachers note: Answers may not be character-specific. Possible things pupils might say could include:

- “FGM does not affect us.”
- “FGM is only practised by Muslims”
- “FGM is only practised in Africa”
- “There are no girls in this community that are at risk of FGM, it is not practised in this country.”
- “Many girls in this town are at risk of FGM and it is up to us, as a community, to keep them safe.”

#### 8. Is FGM ever acceptable?

Teachers note: Allow the groups to have open discussions on this matter but ensure that pupils leave the class knowing that the answer is **No**.

No religion encourages the practice of FGM. This is a practice known to have begun 5,000 years ago, in many cultures, female genital mutilation or circumcision is culturally acceptable and forced if the young women wants to become marketable upon puberty. FGM is a practice that is beginning to attract a lot of attention.

FGM is performed on young women without their consent, leaving their bodies mutilated, sometimes before reaching puberty.

Whilst FGM is often seen as an act of love (enabling a girl to fit in to her community, ‘protecting’ her from rape where she is sewn shut), rather than cruelty, it causes significant harm and constitutes physical and emotional abuse. FGM is considered to be child abuse in the UK and is a violation of the child’s right to life, their bodily integrity as well as of their right to health.

### Activity 3 – Closing activity

Timing	Resources
10-15 mins. approx.	Leaflets

To round off the lesson and see what the students have learnt you could ask them to imagine how they would respond to the following letter sent to a problem page:

“I am a 14 year old girl. I have two sisters (age 4 and 9, and one brother, age 7). My parents have recently started talking about taking me and my brothers and sisters back ‘home’ for the summer holidays and have said that there will be a special party for the girls. My sisters are really excited about this and my brother is annoyed that he is being left out. I am really worried and I am not excited. I have heard that sometimes these parties are where you get FGM done to you. I don’t want to have this done to me (or my sisters) but I don’t want to go against my parents. But I am also worried that if I don’t have FGM then I will never be able to get married or that people will think I just want sex all the time. What should I do?”

*Name and address withheld.*

Leave 5 minutes at the end of the session to hand out the leaflets (these are also enclosed in the pack).

The leaflets contain answers to many questions that may not have been covered in class and include contacts and details of where they could go for help.

## Leaflets on FGM for use with this resource

### BSCB leaflet: Female Genital Mutilation: Factsheet for professionals



Hard copies are available for order from:

Alexandra Geen, Public Health, NHS Bristol, South Plaza, Marlborough Street, Bristol, BS1 3NX.

Tel: 0117 9002230

e-mail: [Alexandra.geen@bristolpct.nhs.uk](mailto:Alexandra.geen@bristolpct.nhs.uk)

This leaflet is also available to download from:

[http://www.bristol.gov.uk/sites/default/files/documents/children\\_and\\_young\\_people/child\\_health\\_and\\_welfare/FGM%20Leaflet%20for%20Professionals%20printable%20version%5B1%5D.pdf](http://www.bristol.gov.uk/sites/default/files/documents/children_and_young_people/child_health_and_welfare/FGM%20Leaflet%20for%20Professionals%20printable%20version%5B1%5D.pdf)

### BSCB leaflet: Female Genital Mutilation/cutting: Information and help (Easy read version using Photosymbols)



Hard copies are available to order (if you have a role in promoting health in Bristol or South Gloucestershire) from KRIS: <http://www.avon.nhs.uk/kris/resources/order/default.htm>

### Home Office leaflet: Female Genital Mutilation – the Facts



Hard copies are available to order (if you have a role in promoting health in Bristol or South Gloucestershire) from KRIS: <http://www.avon.nhs.uk/kris/resources/order/default.htm>

This leaflet is also available to download from:

<http://www.homeoffice.gov.uk/publications/crime/leaflet-for-fgm?view=Binary>

# Teacher's Evaluation

Name:

Name of School:

Year Group lesson was run with:

1. What do you think went best and why

.....  
.....  
.....  
.....  
.....

2. What do you think went least well and why?

.....  
.....  
.....  
.....

3. What would you do differently?

.....  
.....

4. Do you feel the students were comfortable using the characters to express their thoughts and opinions? (Tick the appropriate box)

- YES
- PARTIALLY
- NO

If they were not comfortable, explain.

.....

5. **How interested were the students?** Circle the appropriate number (1 being 'not at all' and 10 being 'very interested')

1   2   3   4   5   6   7   8   9   10

➤ **The Teacher's Pack**

1. What lesson(s) did you run?

The Single session

The Double session

2. Was the lesson plan easy to follow? Any Comments?

.....  
.....

3. Did you feel you had been provided with enough background information to run the lesson(s)?

Yes

No

If no, explain what you would like to be included in the pack.

.....

4. **How was timing?** Circle the appropriate number (1 being too rushed, 5 being perfect and 10 being too much spare time )

1   2   3   4   5   6   7   8   9   10

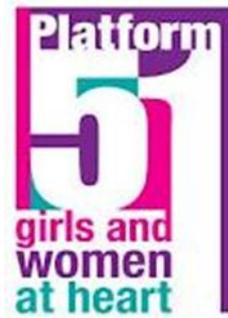
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### General Feedback

- Any other comments?

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**Please leave your completed evaluation form with the pack**



## Acknowledgements

The idea first came to light when we, the Easton Girl's Youth Group, attended the FORWARD Peer-lead Youth Event in London in December 2011, while discussing different ways to raise awareness of FGM it occurred to us that we needed an engaging idea to capture the attention of young people.

We would like to take the opportunity to thank the people who helped bring this idea to life; the funding provided by FORWARD and Platform 51 alongside the generous funding provided by NHS Bristol and Avon and Somerset Constabulary. A special mention to Julie Coulthard from Bristol Education services and Jackie Mathers, designated safeguarding nurse from NHS Bristol. But most importantly the time and effort put into The FGM Game by Em Williams from Platform 51 and Habon and Kaltun Duale from the Easton Girl's Youth Group, with additional input from Rahma Duale.