

Written evidence from Professor Jeannette Littlemore and Dr Susan Waigwa at the University of Birmingham [HBA0017]

Executive summary

We have conducted in-depth interviews with (a) those responsible for delivering education around FGM in the West Midlands; (b) those responsible for developing the materials (The National FGM Centre and FORWARD); (c) representatives from some of the communities in the West Midlands that are affected by FGM. Through our research, in particular our conversations with **educators and education providers**, we have identified a number of issues relating to the way FGM is presented in educational settings in the West Midlands and beyond

Introduction

Female genital mutilation (FGM) is a harmful practice that involves the partial or total removal of external female genitalia or other injury to female genital organs for non-medical reasons. It is estimated that more than 200 million girls and women alive today have undergone female genital mutilation in the countries where the practice is concentrated. In addition, every year, an estimated 3 million girls are at risk of undergoing FGM, the majority of whom are cut before they turn 15 years old (World Health Organisation).

In the UK it was estimated that 137,000 women and girls with FGM were permanent residents in England and Wales in 2011, including an estimate of 60,000 girls aged 0-14 who were at risk as they were born to mothers with FGM. Between April 2015 and March 2022, 30,335 new cases of FGM were recorded in the NHS-England digital database (Health and Social Care information centre, 2022). FGM is particularly prominent in the West Midlands, with rates ranging from 12 to 16 per 1000, partly due the region's diverse population. For this reason, a large multi-agency task force, Birmingham Against FGM (one of our key partners in this project) has been working for a number of years to steer prevention across the region.

In order prevent FGM from taking place, early intervention is important. For this reason, the UK Department for International Development's (DfID) is engaging in a campaign to end the practice of Female Genital Mutilation (FGM). To reduce the prevalence of FGM, a series of public information campaigns has been rolled out nationally with accompanying educational programmes that are offered to school children (Key Stages 3 and 4), their parents, and their community leaders. Indeed, it is a requirement in the UK for FGM to be included in all educational settings at key stage 3 according to Personal, Social, Health and Economic Education Association (PSHE) guidelines.

However, concerns have been raised over the ways in which FGM and its associated cultural practices are framed in some of these programmes, and it has been shown that the discourses within the programmes tend not to be shaped by grass-roots experiences of FGM, and specifically by local change agents. Furthermore, the language used in the educational and campaign materials may not land well with the communities at whom they are targeted, which may limit their effectiveness. There are currently no toolkits available that have been designed for materials producers to assess the potential effectiveness of language used in FGM educational and campaign materials. There have been no extensive investigations into the language that is used in relation to FGM and its associated cultural practices in the UK, although there has been some work on this in the US. References to language tend to occur in the context of studies that are focused on other more general issues, such as when and how the subject of FGM is broached during general practice consultations and where the FGM takes place.

Choosing the right language is important. The importance of using appropriate language in sensitive messaging has been shown in studies of linguistic framing. Linguistic framing

studies have shown that the linguistic choices that are made when presenting sensitive issues can profoundly affect: people's attitudes towards those issues, the importance that is attributed to them; the emotions that the issues evoke, and the actions taken to resolve them. Ill-chosen language can alienate recipients and make them antagonistic towards the content. It can serve as a discounting cue that reduces participants' motivation affecting their attitudes to the phenomenon being discussed (REF). One of the professionals who we interviewed in our scoping study reported on how one of the women who she was supporting challenged her with the following words: 'I'd prefer it if you didn't say "FGM" because I'm not mutilated'. In contrast, well-chosen language, which lands well with the recipients has the potential to promote agency and empowerment, which will ultimately lead to change (REF).

We have conducted an initial evaluation of (a) the language that is currently being used in FGM programmes that are employed in educational settings for Key Stage 3 and Key Stage 4 students across the West Midlands, and (b) material that is being used in anti-FGM campaigns that is likely to be seen by these students and their families.

To begin to address this issue, we have conducted a scoping study which was funded by UKRI Enhancing Research and Knowledge Exchange Funding Programme and the ESRC User Engagement Fund. In this study, we worked with our partners: Birmingham Against FGM, Services for Education, University Hospitals Birmingham, Soroptomists International, West Midlands Police, Birmingham Safeguarding Children Partnership, grassroots organisations working within FGM-affected communities (Birmingham and Solihull Women's Aid, Care for Women and Girls), to identify potential areas that need to be addressed. The scoping study consisted of the following:

1. A mapping exercise of (a) material relating to FGM and its associated cultural practices that is currently being used in FGM programmes that are employed in educational settings for Key Stage 3 and Key Stage 4 students across the West Midlands, and (b) material that is being used in anti-FGM campaigns that is likely to be seen by these students and their families.
2. An in-depth review of current literature on language and FGM
3. In-depth interviews with (a) those responsible for delivering education around FGM in the West Midlands; (b) those responsible for developing the materials (The National FGM Centre and FORWARD); (c) representatives from some of the communities in the West Midlands that are affected by FGM

Committee question 7

In response to committee question 7, issues facing educational providers have the potential to limit the support to potential victims/those at risk of having FGM. Our findings with respect to this are as follows:

Through our research, in particular our conversations with **educators and education providers**, we have identified a number of issues relating to the way FGM is presented in educational settings in the West Midlands and beyond:

- Teachers find FGM a particularly difficult topic to address in PSHE classes and are sometimes afraid of being 'culturally insensitive' when talking about FGM they are therefore sometimes afraid of teaching it
- Little is known about whether or how children discuss the topic of FGM with their parents after they have learned about it at school
- Teachers receive very little (or no) training about FGM itself or how to discuss it with their students

- Teachers have found it difficult to find education materials and some have had to create/design their own materials and PowerPoint presentations: 'I find that lessons take me longer to prepare with all the resources, especially to make sure the language is correct'
- Teachers sometimes find it difficult to discuss FGM with their students without being too graphic
- Teachers find it challenging to teach about FGM in schools where children have a particular religious background
- Teachers sometimes perceive the language to be too clinical when it comes to FGM procedure and its consequences. Students struggle to understand this language
- There is a need for resources tailored towards teaching young men about FGM as often its wrongly judged that their role is limited.
- Discussing FGM education with parents leads to mixed reactions with some educators preferring not to engage while others prioritise communication with parents
- Images may inadvertently convey messages that are unintended, but teachers would not know as these are not communicated in teacher training materials.
- Teachers need more guidance on when and how to teach about FGM, inform young people about the abuse without stigmatising certain communities whilst condemning the abuse
- Teachers often have limited knowledge of FGM or delivery and support. Some are subject teachers (IT, geography) required to teach about FGM. They therefore lack confidence when delivering the lessons: 'I don't know how to talk about this stuff'

December 2022