



THE  
GIRL  
GENERATION

TOGETHER TO END FGM



# End FGM and Promote Emotional Wellbeing

By

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And

The Girl Generation

Supported by Wallace Global Fund



# The Aim of The Project

## End FGM and Promote Emotional Wellbeing



- Provide **sustainable emotional support** for women and girls affected by FGM, to enhance prevention efforts and support survivors,
- **Ensure self-care** for campaigners, staff and volunteers working to end FGM, particularly in grassroots organisations, and
- **Break down the stigma** associated with FGM and associated emotional or mental health issues.





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# Setting The Scene

- Importance of a circle
- Check In
- Why are we here today
- What does Safeguarding mean to you and your environment.
- Do No Harm





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# Relaxation and breathing

- Introduction to relaxation and breathing exercises



# What Is FGM



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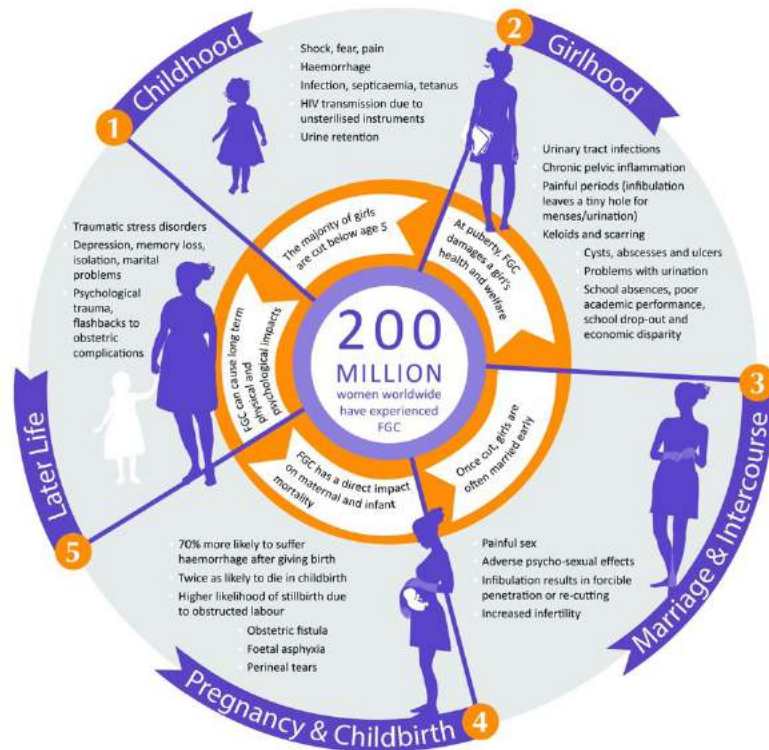
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# Hear our voices

- [https://www.youtube.com/watch?v= 6-w77RJ62Y](https://www.youtube.com/watch?v=6-w77RJ62Y)



# Importance of Breaking the cycle





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# All you need to know about FGM

- Short film explaining FGM
- <https://www.youtube.com/watch?v=HN1mulqww5bg>







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- Female Genital Mutilation comprises all procedures that involve partial or total removal of the external female genitalia, or injury to the female genital organs for non medical reasons.

World Health Organisation, Fact Sheet 241  
May 2008





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FGM is recognised internationally as a violation of human rights of girls and women. It reflects deep rooted inequality between sexes and constitutes as extreme form of discrimination against women.

The practice violates a person's rights to health, security and physical integrity, the right to be free from torture and cruel and inhuman or degrading treatment and the right to life when the procedure results in death

WHO 2008



# World Wide Statistics for FGM



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- Over **200** million girls and women world wide live with FGM
- In Africa c.**92** million girls over the age of 10 are estimated to have undergone FGM
- 3 million girls at risk each year on African Continent
- In Kenya 21% or c.**5 million** women admit that they have undergone FGM. In some areas FGM is rare but in others nearly all girls are cut
- In England and Wales over **137,000** women live with FGM and **66,000** girls under age of 15 are at risk every year
- Estimated **500,000** girls and women in **Europe** live with FGM
- Over **500,000** U.S. Women and girls are believed to be living with FGM

**Every 8 seconds one girl will undergo FGM**



# Facts On FGM



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- FGM is not a simple practice eg. different types and ages when cut
- Traditionally performed elderly women
- Increasingly a medicalised practice
- Serious immediate effects including death
- Long term physical and psychological effects
- It is not an Islamic practice and is practiced across most religions and amongst non believers
- FGM is illegal in most countries including many where it is commonly practised
- It is child abuse and a safeguarding issue



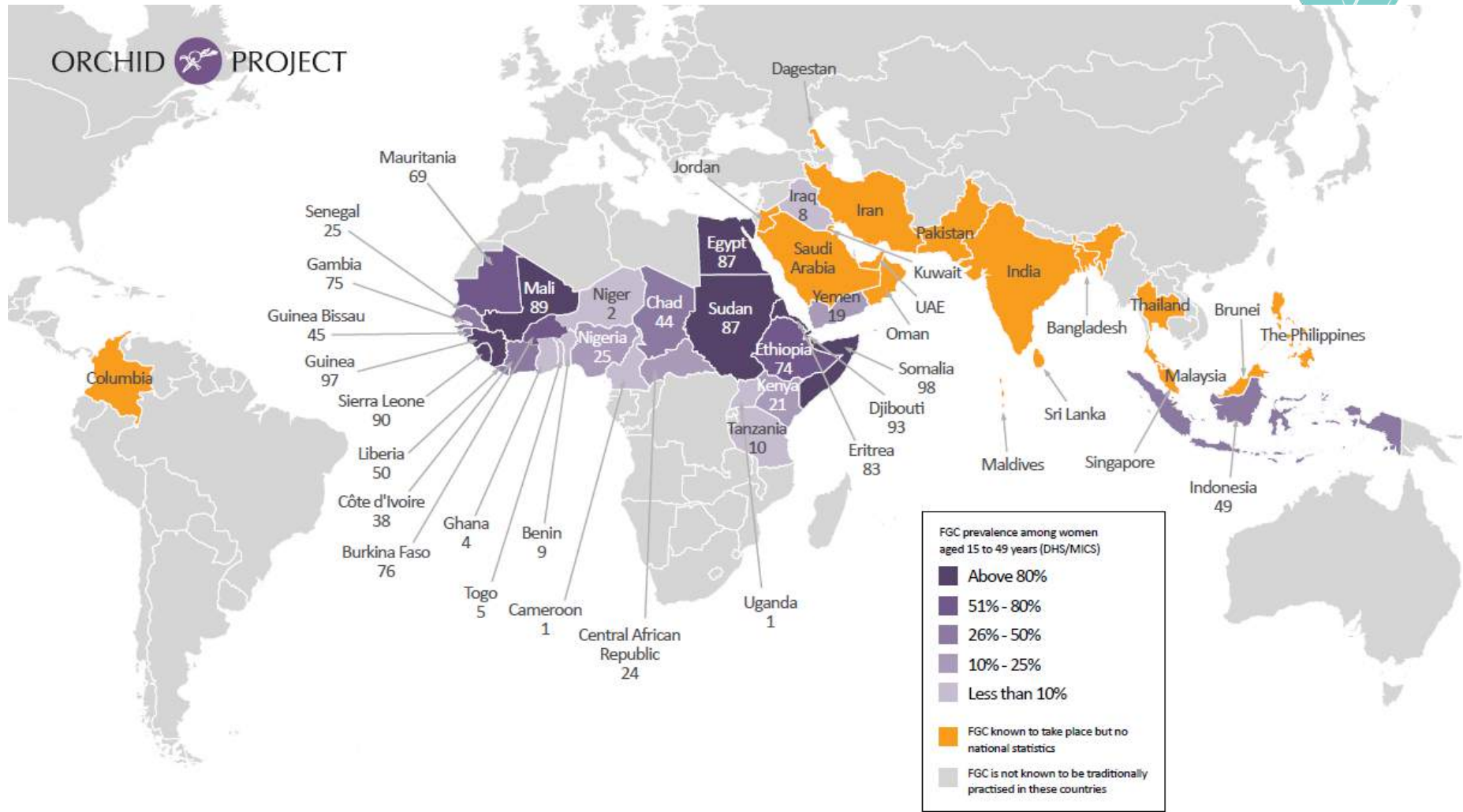
# Where does FGM happen?



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- FGM is practiced in over 28 African countries
- Parts of the Middle East, including Yemen, Syria and Kurds in N. Iraq and other areas
- Reported among Bohra Muslims in Pakistan, India, Indonesia, Malaysia, Papua New Guinea and Columbia.
- FGM is increasingly encountered among migrant populations in the Europe, USA, Canada, Australia and New Zealand







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Tea break



# Why does FGM happen?



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Stated reasons include a mix of cultural religious and social factors within families and communities including: tradition, cultural identity, religion, cleanliness, to preserve virginity, initiation to womanhood, social pressure to conform and proper sexual behaviour for girls

Also lots of myths such as to prevent illness or increase fertility

Underlying reason:

- Control women and especially their sexuality
- Gender inequality and patriarchy





# How is it performed?



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- FGM is usually performed by an elderly woman, Traditional Birth Attendant or circumciser
- Anaesthetic is rarely used and child is held down by a number of women
- FGM is carried out using special knives, scissors, razors or pieces of glass. Even sharp stones are reported as being used
- Wound is often held together with thorns and girls legs are bound together until wound is healed
- FGM is increasingly performed by health professionals as that is deemed to be safer

**Medicalisation of FGM condemned by World Health Organisation since 1982**



# When Is FGM Performed?



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The age at which FGM is performed varies. It depends on the ethnic group and the geographical location.

- Infancy - from a few days old
- Childhood 4 -10 years
- Onset of puberty
- At marriage
- During first pregnancy



# The Cruel Cut



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- Young Men scene
- <https://vimeo.com/108707482>



# Facts On FGM



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- FGM Is violation of girls and women basic human rights
- FGM is a form of Child and sexual abuse
- FGM not an African issue, its universal
- Its not an Islamic practice, it is practiced across most religions and amongst non believers
- FGM practiced in all class systems
- FGM survivors do experience orgasm



# Did you know?



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- FGM is not a requirement in any religion and is not part of any holy book
- FGM happens to white western women too
- A form of FGM was practised in the UK during the 19<sup>th</sup> and early 20<sup>th</sup> centuries to “cure hysterical women”
- Survivors of FGM can still have orgasms and have fulfilling sexual relationships





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- Lunch Break



# Safeguarding Against FGM

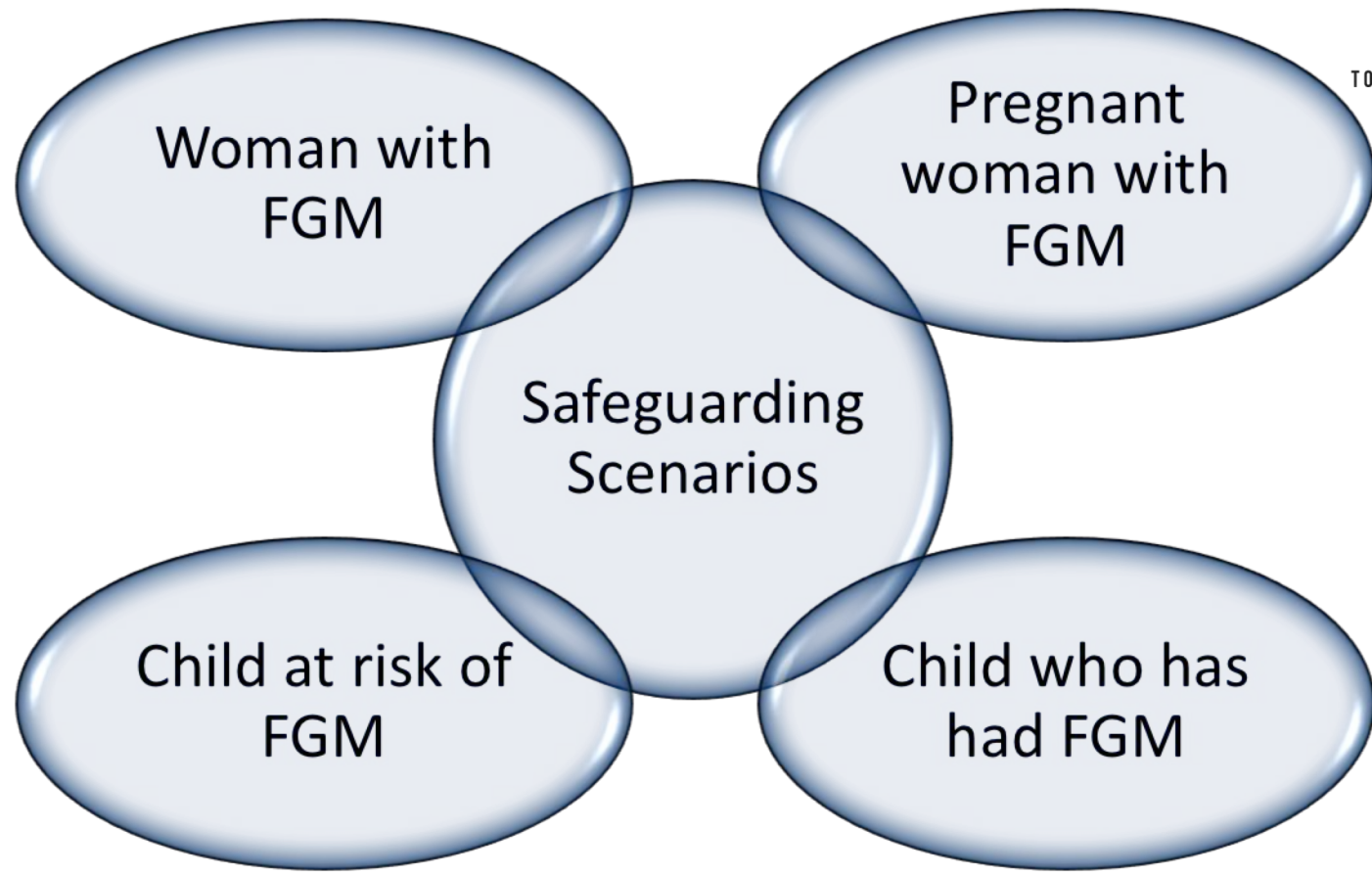


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**FGM can happen at any age and the risks to the girl are likely to change over time**

- A family history of FGM is potentially high risk
- Ask directly and with confidence
- Always carry out risk assessment to help decide what steps to take - using local Safeguarding/Do No Harm Guidance
- Talk to your local Safeguarding Lead
- Record what you've done







# How to identify girls/women who at risk of FGM



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- They may mention going away for a very long family holiday
- Female members of the family may have undergone FGM
- Recognising and identifying the country of origin





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# Indicators that a girl has had FGM

- She appears to have difficulty walking, sitting or standing
- Girls background/ethnicity may indicate potential FGM
- Girl appears withdrawn, depressed, or has had significant change in behaviour.
- She is reluctant to undergo any medical exam
- Girl avoids P.E./spends long time in bathroom/toilet away from classroom
- Child talks about pain or discomfort between her legs



# Examples of risk assessment questions for women who have had FGM



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- Does husband or other family member support practice
- Do family have knowledge of the law and health consequences of FGM
- Have any girls in the family had FGM
- Is woman attending appointments / engaging with professionals
- Is she requesting re-infibulation after birth
- Is she a vulnerable adult



# End of Day 1



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- Reflections on the day
- Explain and open the car park
- Breathing exercise
- Check out



# Creating Safe Spaces



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- Start Day 2
- Check in
- Breathing exercise
- Visit car park



# Support For FGM Survivors



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# The aim of the project



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- Dahlia's Project is a support group for women who have undergone FGM
- The project provides a safe space for women and girls to unpack the effects of FGM
- Tailor made support e.g. One-2-one counselling service for those who wish seek further support or do not want to join a group



# FGM Animation 1



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- <https://www.youtube.com/watch?v=M5E936tbv4g&t=1s>





# Why is this service needed?



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Evidence that has been collected through the several clinics in the UK shows that FGM has:

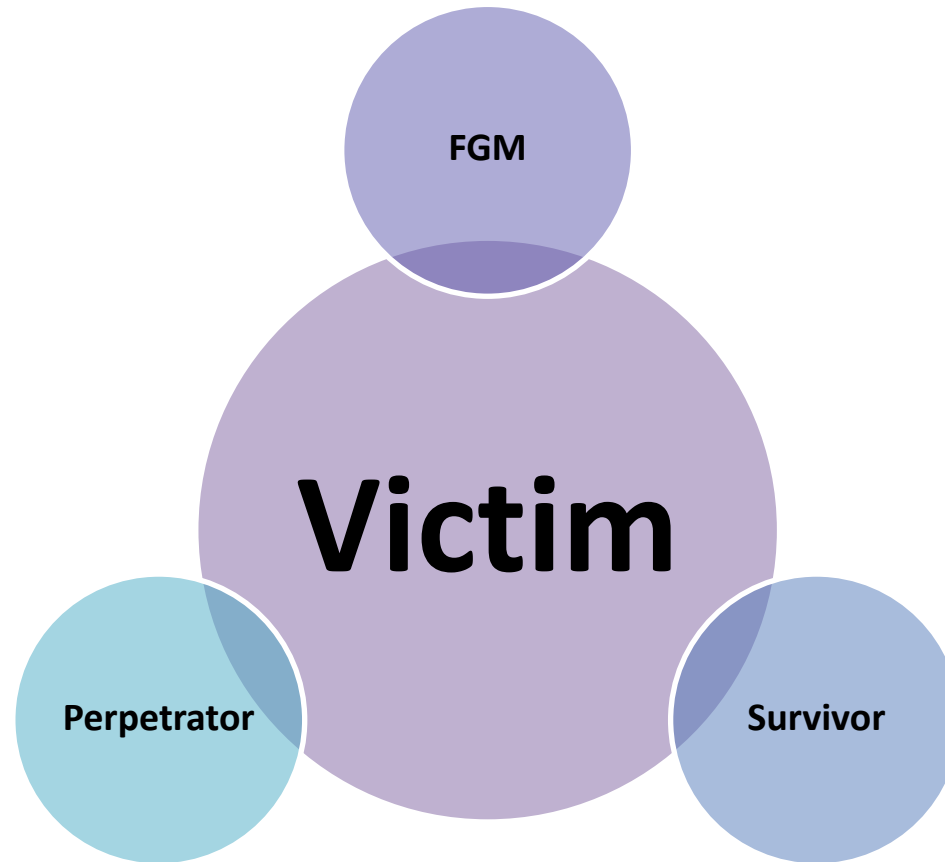
- Physical
- Emotional
- Psychological

These effects impact negatively on the well-being of the women/girls.





# The Child Undergoes FGM



# Girls may not understand or remember that they have been cut or mutilated



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- It is the norm within their community and all the other, girls are the same. Girls do not want to be different from their peers.
- Secrecy around FGM and not wanting their parents, to go to prison
- Suppression of trauma. It is common for people who have undergone abuse or trauma to suppress the memories



# Psychological reactions to FGM



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- Shock
- Anger
- Anxiety
- Sadness
- Depression
- Fear
- Grief
- Shame



# Longer term psychological affects of FGM



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- Flashbacks
- Sexual dysfunction
- Severe depression
- Post-natal Depression
- Post Traumatic Stress



# FGM Animation 2



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- <https://www.youtube.com/watch?v=rm0Wy-DIID8&t=65s>



# Themes



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- Anger
- Resentment
- Fear of sex
- Mother and Daughter relationship
- Not making the connection between FGM and the physical and emotional affects they endure on daily basis





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- Tea break







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# Learnings from the first groups

- 6 weekly sessions is not sufficient enough
- Many of the women presented with complex case history:
  - Sexual violence
  - Early/Forced Marriage
  - Domestic Violence
  - Economical Abuse
  - Child trafficking
  - Breast Ironing
- Essential all therapist receive regular supervision
- Attendance of the group was high





# The Dahlia Project now

- Each group has 12 weekly sessions
- Established as an outreach counselling service
- Special groups run for Somali and Eritrean women
- Plans to run a support group for men
- Provide training to counsellors, psychotherapists and other mental health workers to share best practice on understanding FGM and how to work with survivors by providing safe spaces.
- Developed guidelines for counsellors and psychotherapist with following agencies.
  - Solace Aid Women
  - Ashiana Project



# Steps for Pre- assessment care

- Admin or Counsellor phones to let the client know you have received their referral and ask if you can go ahead to continue with the process of being under the care of this service.
- During the phone call briefly explain to the client how the therapy process works to ease their anxiety on what it means to be in therapy.
- Before making any appointments ensure that your client can get to your service as some may not be able to read or write English.
- If they have children try to provide childcare as many are isolated from their families, for those with children who attend full time school try to arrange assessments or counselling session while the children are in school.
- Check if they have any needs due to disability.
- Check whether they will need interpreters.





# Process of the service

- It's a London wide service.
- Self referral or referred by other agencies e.g. teachers, nurses, social workers.
- The project lead will conduct initial assessments of participants to ensure the different emotional needs are recorded in order to support counsellors to deliver the sessions.
- History of FGM is part of the assessment e.g. when FGM took place, where, with who, what age and which type FGM?
- Create an attendance contract.
- Ask preferred terminology.





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# Support Groups





# Why have a support group?

A support group can help you:

- Observe how you react to people.
- Self evaluate your behaviours.
- Explore how you react to difficult situations.
- Examine how your actions affect others.
- Take responsibility for your actions.





# Setting up a support group

- Set up a plan for your group.
- Test your ideas with a trusted person.
- Invite 8 – 10 people to join the group.
- Prepare and hold a first meeting.
- Set a group contract.
- Have an ending date.



# How to have a positive discussion

- Shared responsibility based on respecting each other.
- Equally allowing everyone to contribute.
- Attendance and punctuality.
- Being mindful when someone is upset in the group.
- Own what you say - use “I” or “we”





# Key Boundaries

- Establish what boundaries are important for each group member.
- Think about confidentiality, respectful behaviour and commitment.
- Agree shared group boundaries, write them down and give a copy to everyone who attends.
- Review as necessary.



# How to safely end the group

- Remind group that end is approaching 2 weeks ahead
- Agree a symbolic ending eg. special ceremony
- Reflect together and share your experience
- After care plans for participants as required
- Encourage ongoing support networking





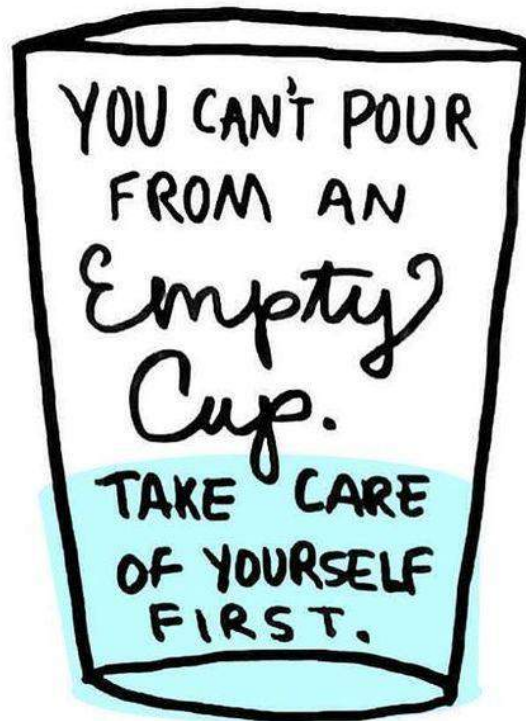
- Lunch break



# Self Care



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# What is Self Care?

- The ability to engage in human rights work without sacrificing other important parts of one's life.
- The ability to maintain a positive attitude towards the work despite challenges.
- Self-care can also be understood as a practitioner's right to be well, safe, and fulfilled.





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# Threats to self care for campaigners

- Tiredness
- Isolation
- Compassion fatigue or burn out
- Vicarious trauma
- Feeling inadequate or ill-equipped
- Mental health issues – anxiety, stress
- Physical safety
- Finance





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## Developing a self care plan

- Financial support
- Emotional support and regular supervision
- Eat and sleep well
- Regular relaxation and exercise
- Regular breaks
- Support system – family and friends
- Allies in the campaign
- Own and control your story





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## End of Day 2

- Reflections on the day
- Visit the car park
- Breathing exercise
- Check out







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# Programme Review

- Start Day 3
- Check in
- Breathing exercise
- Visit car park





# Developing the emotional wellbeing programme for End FGM campaigners

- We need your help to review the workshop
- Your chance to contribute to the future of this project
- How can we all be better together?





# Group review – part 1

Break into 3 groups and consider the following:

- What does emotional wellbeing mean for you?
- How do you embody emotional wellbeing for you?
- What was the moment you realized you needed emotional wellbeing (list examples)
- How will you put into practice what you have learnt in work and personal life?
- What obstacles have you faced as a campaigner which have affected your emotional wellbeing? (Personal or work)
- What can organisations do to support the emotional wellbeing of campaigners?

Feedback from groups





## Group review – part 2

- Everyone to write answers to the following questions on post-it notes and put on the flip chart with the question written at the top. (20 mins)
- What has been the most helpful part of this workshop for you?
- What will you start doing or do differently after this workshop?
- What could be added to the programme to make it better for you?





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- Lunch break



# Find calm in the eye of the storm



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## Prepare a self care plan

- In small groups discuss what is important for you for your self care
- Use template provided to write your personal self care plan





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## Looking forward – FGM Animation 3

- <https://www.youtube.com/watch?v=FZ6CCfWjPo&t=110s>







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## End Day 3

- Reflection End of Day 3
- Visit the car park
- Breathing exercise
- Check out
  
- Evening ceremony

