



## Information Sheet 12: FEMALE GENITAL MUTILATION IS A CHILD PROTECTION ISSUE

Female genital mutilation (FGM) is a criminal offence in WA under section 306 of the Criminal Code when it is practised for cultural or non medical reasons. Under this section a person who performs FGM on another person, or arranges or takes a child from the state with the intention of subjecting them to FGM, is guilty of a crime.

The *Children and Community Services Act 2004* is silent on FGM. The Department for Child Protection (DCP) has defined FGM as physical abuse and a child protection referral is required. A mandatory report of child sexual abuse is not required.

A customised response is provided by DCP due to the risk and complex nature of FGM. Police, DCP and the Princess Margaret Hospital Child Protection Unit (CPU) liaise with each other regarding children who have had FGM, or are at risk of FGM.

### IDENTIFYING A CHILD AT RISK OF FGM

- Any female born to a woman, or who has sisters who have been subjected to FGM must be considered at risk, as must other female children within the extended family.
- Although FGM can be carried out at any age, the majority of FGM appears to take place between the ages of 5 to 8 years and girls within that age bracket would be at higher risk.
- When FGM has been carried out in a family, the specific age at the time of the procedure for each female member should be recorded as a guide to identifying the risk period for unaffected females within the family.
- Those families less integrated into the community or where children or mothers have limited contact outside the immediate family, and have limited access to information on FGM are more likely to carry out FGM.
- Signs that FGM is imminent: a female elder visiting from the country of origin; the child referring to a 'special procedure' she is to undergo; the child requesting help if she suspects she is at imminent risk; parents or the child identifying the child is going out of the country for a prolonged period; the child or family are considered to be a flight risk.

### WHEN A CHILD IS AT RISK OF FGM

- If there are concerns a child is at risk of being subjected to FGM contact should be made and a referral submitted as soon as possible to the local DCP district office or to Crisis Care (after hours). The family should be advised that a referral has been made unless it is assessed that this information will result in the family being an imminent flight risk.



- Information can also be provided directly to the joint DCP childFirst\* and WA Police Child Assessment Interview Team (9428 1666) or the WA Police Child Abuse Squad (9428 1500), if the immediate safety and well being of the child is at imminent risk.
- Consultation may occur with CPU who can provide preliminary assessment/information gathering and assist with a referral to DCP.
- Parents should be advised that FGM is illegal and that a person who takes a child or arranges for a child to be taken from WA with the intention of having them subjected to FGM is liable to imprisonment for 10 years. Information to parents on the health issues associated with FGM should be provided.
- The family should be advised that a report has been made to DCP and the DCP process discussed with them unless it is assessed that this information will result in the family being a serious flight risk.
- When a referral is made to DCP, they will initiate a strategy meeting with other agencies and coordinate the response and subsequent investigation, including possible referrals for support and counselling.
- DCP gives priority to FGM concerns due to the possible immediate risk of a child undergoing FGM, the child being removed from the state for that purpose, and the physical and emotional consequences of FGM including possible life-threatening medical complications.

### **WHEN A CHILD HAS HAD FGM**

- If a child is found to have already had FGM then referral to paediatric gynaecological services or uro-gynaecology for any ongoing medical treatment/management should be arranged.
- If there are acute injuries or signs of recent FGM, the child should be seen at PMH Emergency Department for up to 16 years of age, or the local Emergency Department with a request for referral to King Edward Memorial Hospital Sexual Assault Referral Centre (1800 199 888) if over 13 years of age.
- Contact should be made and a referral submitted to the local DCP district office or to Crisis Care after hours (9223 1111). If the child's safety and wellbeing is at imminent risk, a referral to childFirst / CAIT (9428 1666) or the WA Police Child Abuse Squad (9428 1500) should also be considered.
- Where concerns of ongoing parental protectiveness of a child and/or their siblings are present, DCP will undertake an assessment in collaboration with childFirst / CAIT. This assessment gives priority to responding to the potential risk of FGM for female siblings.
- When undertaking an assessment the Police/DCP investigation will consider the role of the person who has performed the FGM and that of the parents/extended family who may have facilitated the practice.

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\*The ChildFirst / CAIT (Child Assessment Interview) teams are a joint Police / Department for Child Protection specialist team that jointly investigates incidents of suspected child abuse