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Project Report

THE FEMALE GENITAL MUTILATION SERVICE DEVELOPMENT AND DELIVERY IN HARINGEY

REPORT ON THE FEMALE GENITAL MUTILATION SERVICE DEVELOPMENT AND DELIVERY IN HARINGEY

April 2008 – March 2009

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Funded By



Training must be provided for health, education, social, child care and community



Introduction

African Women’s Welfare Group (AWWG) co-ordinates and delivers a range of health initiatives for African/refugee women in the district. These include Reproductive & Sexual Health, Mental Health, Care and Support and Female Genital Mutilation (FGM).

The need for the project was identified initially from

the day-to-day work of AWWG supporting African/refugee women to access health improvement services. However, the project design, development and implementation was informed by community consultation and needs assessment exercise carried out within the African/refugee

communities in Haringey last year. Although, the project was funded by Haringey Council (Health Development), it received support from a range of professional including the Haringey Social Services and Education.

Project Background

Haringey and Enfield have a significant African/refugee population, with the majority of the population originating from geographical areas in Africa where the practice of FGM is commonplace. (Somalia, Ethiopia, Nigeria, Senegal, Tanzania, Eritrea, Sudan and Ghana). It is difficult to estimate the exact number of residents in the district who have undergone FGM, but estimates using data from various reports show that 5000 women may have undergone this procedure . AWWG’s research indicates that most of the women have had the most severe type of FGM known as Pharonic infibulation. The implication of this is most women within the ages 24-60 will present with chronic

gynaecological, reproductive and sexual health problems, and are unable to access cervical screening services. At the beginning of 2008, AWWG’s service data showed that there was a demonstrable increase in the number of African/refugee clients requiring support around FGM related problems and access to FGM related services. AWWG approached Haringey Council to discuss the possibility of setting up a project to meet the needs of the local African/refugee communities. At the initial meeting it was agreed that the best way to proceed was to set up a multi sectoral agency with a remit to develop and manage the local FGM project. The first meeting of

the Steering Group was held in 2008 and a local Action Plan and a draft Terms of Reference were drawn up (Appendix 1, 2 & 3). To date three subgroups have been formed:

- Service development and fundraising
- Development of local strategy and policy
- Cervical screening

AWWG’s research indicates that most of the women have had the most severe type of FGM known as Pharonic infibulation.



Forced FGM

Aim Of The Project

- To develop and implement a range of culturally appropriate FGM awareness, prevention education and outreach initiatives and training sessions with African women, young adults and recent refugees and asylum seekers communities in Haringey and Enfield.
- To organise and deliver education and awareness training sessions with a range of local professionals within Haringey, including teachers, nurses and representatives from voluntary sector organisations and officers from social services.



Education and
Awareness

Objectives

- Undertake a variety of FGM outreach initiatives in order to facilitate access of African/refugee women to relevant health promotion education sessions
- Organise and run a series of FGM outreach prevention and awareness sessions with groups of recent arrivals within different refugee and asylum seeker communities, particularly African communities.
- Optimise opportunities for promoting awareness of FGM, access to screening and sexual health issues within a variety of settings including discussion groups, workshops, drop-in appointment sessions and social activities for African women.
- Develop a volunteer programme including recruitment, training and support.
- Liaise with other Pan London and local African Organisations to ensure that all work is consistent with models of good practice.
- Produce promotional and publicity material for distribution.
- Provide a referral service and support for women seeking referrals.
- Coordinate and support the Steering Group to develop the project

There must be supportive education for children and families



Training of key community leaders



Optimise opportunities for promoting awareness of FGM

Methodology

The project focused on a community outreach and field work model based on preliminary identification of women’s groups and networks, as well as community organisations and sites.

The project also focused on the following activities:

- Publicity/promotional material. Posters and leaflets advertising the service were distributed at GP surgeries, community centres, social sites,

health clinics, sports centres, religious settings and local businesses.

- Community outreach and fieldwork with women’s health and educational networks and gathering places, including Saturday schools, Mosques, and Churches.
- Direct contact with people at their own social setting to raise awareness about FGM and the legal framework within the UK.
- Training of key

community leaders to do some community outreach and education work.

- Organised a series of workshops on education and prevention.
 - Sent out regular briefing papers to key professionals in health and FGM related services.
- Set up a social support group. (The groups met monthly)

Project Detail

The project was built on the results of the needs assessment carried out the previous year and contacts developed during this previous preparatory work. The project implemented a set of community development, outreach and prevention activities specifically targeting

relevant African/refugee communities using existing social sites, local businesses and community events.



Targeting relevant African/refugee communities

Project Output (Hadija' statistical report)

Fieldwork and outreach

Seminars and workshops

One to one support

Community education and training

Training for professionals



FGM Community Event

Governance of The Project

The project was managed by the FGM steering group with representatives from the local communities. At the start of the project, training was given to key community leaders and volunteers who were

involved in the community outreach and education work. The group also served as an advisory group to the project. The main delivery of the project was by a part-time Project Co-ordinator. The Co-ordinator carried out the fieldwork and outreach, organised local events and prevention activities, and the development of specific materials tailored to the needs of the community. Regular report was given at the string group and or sub group meeting.

involved in the community outreach and education work. The group also served as an advisory group to the project. The main delivery of the project was by a part-time Project Co-ordinator. The Co-ordinator carried out the fieldwork

Issues Arising

Health need of women who have been infibulated

Cultural sensitivities around FGM

Issues to consider when setting up initiative for African/refugee communities

Project Evaluation



The project was evaluated against the set aims and objectives and other contractual obligations set within AWWG's Service Level Agreement. In addition the following measures were put in place to continuously get client feedback and monitor the standard of service being delivered. They include:

- All participants at

workshops, events and seminars are asked to fill in evaluation forms .

- A Client feedback system for all fieldwork and outreach activities.
- An assessment of all clients for one to one support.
- Recording of data on all enquiries, outreach and care and support activities.
- Regular reports at steering group meetings.

- Six monthly report to the funding agency.
- Set up a social support group. (The groups met monthly)

The 'cultural' and 'regions' labelling has to be challenged to encourage early intervention on behalf of the child.



Advice on the development of a reversal clinic in the

Achievements to date

- ∂ The setting up of a multi-sectoral steering group
- ∂ Conducting a local research and needs assessment which has identified the size of the problem in the district.
- ∂ The development of a local Action Plan by the Steering Group
- ∂ The delivery of a successful local FGM project. (The first of its kind in the district).
- ∂ Training fifteen community health/peer educators. (CHE).

- ∂ Training of health professionals about the practice of FGM and its health implications for local African/refugee communities.
- ∂ Setting up a project to educate and increase the take up rate of cervical screening for women who have been infibulated.
- ∂ Developed a local resource and briefing papers for the African/refugee community and health professionals.
- ∂ Setting up a sub group within the steering group

to advice on the development of a reversal clinic in the district.

CONCLUSION

Before this project was commissioned, there had been no Haringey research on the issue of FGM and how it affects the health needs of local African/refugee communities. This report therefore discusses the health implications for local African/refugee communities who have been infibulated and by implication the type of service (s) needed locally. It explores sensitivities around the subject for the target population and advises on the factors that will lead to the establishment of a sustainable local initiative. This report is therefore essential reading for all those involved in delivering health, social care and educational services for African/refugee women and young adults. For those trying to set up new projects it highlights what needs to be addressed so that the initiative has the best possible chance of meeting the health and social needs of these communities.

Finally, the experiences and lessons learnt about working with these local communities extend beyond FGM issues. It is hoped that this report will enlighten policy makers and professionals with responsibilities for local initiatives, particularly those that seek to address the needs of African/refugee women and children to provide both funding, social care and support to all agencies providing FGM services.

Creating Opportunities,



Future Development

To set up a local reversal clinic for women who wish to have their infibulation severed.



We're on the net;
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The African Women's Welfare Group (AWWG) is a Pan-African, London-wide grassroots women's organisation established to work with all African communities and stakeholders with particular remit for women and families. Our primary role encompasses developing policies and establishing strategic/operational structures, and procedures within our own communities' work practice and that of corporate, local and national service providers.

Our programme development is contiguous with agreed local, regional and national priorities thus ensuring the formation of real partnerships. These relationships enable AWWG to influence policy development and shape programme implementation at every level. Consequently, we are able to offer a complementary service, which through our affiliations ensures pan African involvement across geographical and cultural boundaries.

Creating Opportunities,
Fulfilling Potentials



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Appendices

Membership of the Steering Group article

Local Action Plan report

Terms of Reference for the Steering Group

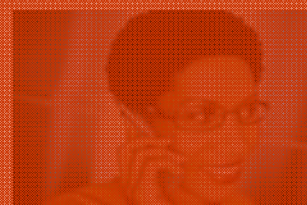
Sexual Health Questionnaire

AWWG Work Plan

Demographic Map of Africa

Prohibition of FGM Act 1985

Female Pupil Population report



Pan-African, London-wide
grassroots women's
organisation