**The FGM Conference: Zero tolerance for female genital mutilation**

**Location: University of Salford  
Date: Tuesday 24th April 2018**

|  |  |
| --- | --- |
| 09:00 | **Registration, refreshments and networking** |
| 09:30 | **Opening remarks from the chair**  *Gabi Hesk, Lecturer in Social Work, University of Salford (Confirmed)* |
| 09:40 | **Working to end new cases of FGM in England by 2030**  KEYNOTE - *Leethen Bartholomew, Head of the National FGM Centre (Confirmed)*  The National FGM Centre’s Vision is to keep children and young people safe from FGM and other Harmful Practices, including our aim to end new cases of FGM by 2030.   * Prevent new cases * Protect children and young people * Support those affected by FGM and other Harmful Practices |
| 10:00 | **Greater Manchester’s journey in addressing FGM**  *Jaria Hussain-Lala, Chair of the Greater Manchester FGM Forum (Confirmed)*  The Greater Manchester FGM forum is one of the first multiagency platforms established in the UK addressing FGM. Our 7 year journey has been an incredible one. In this session I will share some key highlights of this journey which includes our work plan going ahead.   * FGM Strategy * Community Engagement * Service Provision |
| 10:20 | **Overcoming the challenges and barriers of safeguarding FGM, by endorsing a multi-agency approach**  *Angie Marriott, Cross Cultural Diversity Consultant, Diversity Employment Solutions Ltd (Confirmed)*  This presentation highlights the challenges, barriers and problems associated with FGM safeguarding and risk assessment. It proposes solutions that are known to be effective in meeting those challenges.   * Overcoming cultural barriers * Effective strategies and solutions * Safeguarding and risk assessment * Promoting multi agency partnership working |
| 10:40 | **Questions and discussion** |
| 10:55 | **Refreshments and networking** |
| 11:25 | **FGM guidance for midwives**  *Florence Acquah, Adult Safeguarding Lead Nurse, London North West Healthcare NHS Trust (Confirmed)*   * Mandatory reporting * Available support when dealing with issues relating to FGM * Consultation and detection |
| 11:45 | **Common themes from attempts to eradicate FGM**  *Caroline Chappell, Solicitor, Senior Lecturer in Law, University of Chester (Confirmed)*   * Cultural Diversity * Female Genital Mutilation Act 2003 / Serious Crime Act 2015 * FGMPOs |
| 12:05 | **Voicing the unspoken**  *Peggy Mulongo, Co-founder, NESTAC (Confirmed)*   * Community engagement with FGM practicing communities * Psychotherapeutic support - The SOS Model |
| 12:25 | **Questions and discussion** |
| 12:40 | **Lunch and networking** |
| 13:40 | **The 4 Es of FGM Eradication - Engagement, Education, Enforcement and Economics**  *Hilary Burrage, Adjunct Professor, Buehler Center for Health Policy and Economics, Feinberg School of Medicine Northwestern University, Chicago, USA (Confirmed)*  Rather than asking how long till FGM eradication, is a fully informed economic approach the missing component in bringing FGM finally to an end?  We know already that community engagement, education programmes and legal enforcement are critical to FGM eradication. Now it’s important to ask, what about the economics?  The financial drivers of FGM usually acknowledged – bride price, ‘purity’, status and income for mutilators (‘cutters’) etc. But what of the socio-economic impacts on whole communities? What’s the real cost to, and of, women who have had FGM, whether in ‘traditional’ communities of in the diaspora? And what is the cost also to their national economies? |
| 14:00 | **Female Genital Mutilation – A survivor’s experience**  *Patricia Olukemi Ajayi, Registered Mental Health Nurse, Cheshire and Wirral Partnership NHS Foundation Trust (Confirmed)*  I will discuss my early years’ experience of FGM from a survivor’s point of view; the party, the misconception and cultural belief that the only way to become a woman is by having female circumcision and that those women who are not “circumcised” later become promiscuous.   * Whilst physical pain is commonly talked about, the psychological effect of FGM is longer lasting than physical pain. * I will urge everyone to continue to raise awareness about this wicked, ferocious, nasty and barbaric act in order to safeguard vulnerable girls. * I will also support the need for immediate referral for survivors through FGM pathway, assessment as well as therapy for survivors who have been psychologically affected by FGM. |
| 14:20 | **FORWARD’s Interventions in response to FGM**  *Yvette Robbin-Coker, Training and Development Coordinator, FORWARD (Confirmed)*   * Policy and partnerships * Community engagement * Training and raising awareness - schools, professionals * Work in Africa * Providing support to those affected by FGM |
| 14:40 | **Questions and discussion** |
| 14:55 | **Closing Remarks from Chair**  *Gabi Hesk, Lecturer in Social Work, University of Salford (Confirmed)* |
| 15:00 | **Conference Close** |