Schools Training on FGM and Honour-based Abuse

for the Office of the Police and Crime Commissioner, Thames Valley

Evaluation report for Oxfordshire
July 2020

“I thought the training was excellent and invaluable. Thank you very much.”
Oxfordshire primary school teacher

“A really honest and practical informative INSET.
Thank you.”
Oxfordshire head teacher and safeguarding lead

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Our charity is delighted to have delivered workshops to schools across the Thames Valley over this two-year project. We passionately believe that education is the key to social change. Schools can both safeguard children and support them to make healthy decisions for the next generation. With mandatory lessons on FGM and forced marriage being introduced in September this year, this project has enabled us to further build our expertise and facilitator team to support schools.

Kate Agha, CEO, Oxford Against Cutting

Introduction

Oxford Against Cutting (OAC) is an Oxford-based charity working to end harmful cultural practices suffered by girls and women living in the Thames Valley. These include female genital mutilation (FGM), ‘honour’-based abuse (HBA) and early and forced marriage (EFM) and female cosmetic genital surgery. Our mission is to end cultural practices that harm girls and women by providing education, supporting survivors, raising awareness of support services and empowering young people to champion initiatives against harmful practices. People from affected communities and young people are at the forefront of our activities.

Between January 2018 and October 2019, OAC provided 60 FGM-awareness training sessions for schools and other educational institutions across the Thames Valley. These primarily covered FGM, with a small number being adapted (at the request of schools) to combine sessions on FGM and forced marriage. This involved in excess of 1800 school and teaching staff, over 840 students \(^2\) and 130 other stakeholders. These represented at least 97 primary schools, 22 secondary schools, \(^3\) and 13 other organisations/institutions across Berkshire, Buckinghamshire and Oxfordshire.

In addition, between December 2017 and October 2018, four ‘Train the Trainers’ sessions were run for new facilitators, incorporating representatives of local communities from Sierra Leone, Kenya, Sudan, Somalia and Gambia. These included training at the ACRE offices in Reading, West Oxford Community Centre, The Point in Milton Keynes and Restore in Oxford.

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\(^1\) Which included training on forced marriage/HBA for a cross-county ‘train the trainer’ event.

\(^2\) Across Thames Valley these included primary students KS1 (Year 2) and secondary students from Year 6, 7, 8, 10 and 12/13.

\(^3\) Sessions included a small number of nursery and infant school staff, as well as staff from other schools that spanned the age groups to include both primary and secondary-aged children.
This report covers the evaluation results for the training carried out in Oxfordshire. Training sessions within the county involved in excess of 590 school and teaching staff, over 380 students and 60 other stakeholders. These represented at least 29 primary schools, 7 secondary schools, and 4 other organisations/institutions.

This work was funded by the Office of the Thames Valley Police and Crimes Commissioner in 2018. Key aims of the training were to increase the confidence and knowledge of school teams in supporting girls at risk of FGM and survivors, recognise warning signs, and understand mandatory reporting duties and safeguarding, encouraging reporting through the appropriate referral pathways. We are very grateful to them for their ongoing support.

**The training**

Training for school teams is effective for several reasons. Firstly, school teams spend longer with children than any other professionals so they are most likely to identify and report concerns about FGM. Secondly, school teams work with children from families who may be hard to reach through other avenues. Thirdly, up-skilling teachers has significant reach across high numbers of students. During this project, OAC training across the Thames Valley was delivered to staff at primary, secondary and college levels, in addition to others who may encounter FGM and HBA as part of their occupation, eg, social workers or police officers. Both primary and secondary students were also included.

Most of the workshop sessions for staff were 90 minutes long, though could be adjusted for the audience’s time constraints where necessary. Longer sessions enabled greater interaction between the facilitators and the delegates whilst the shorter ones tend to be more of a presentation style (though questions are still encouraged). Lessons for students were usually 45 minutes to one hour long.

**Content**

Topics covered include the definition and types of FGM, countries of prevalence, the legal situation and extensive safeguarding advice - such as the signs that FGM may be planned or has been carried out - and reporting information. As stated above, some sessions contained additional material on forced marriage and/or honour based abuse at the request of the school/organisation involved. The content is adjusted to suit the audience.

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4 For some groups, where numbers were smaller, findings have been reported which include all three counties to ensure the results are meaningful – these are clearly indicated.
5 These were secondary students from Years 7, 10 and 12/13.
6 See Appendix 1 for a breakdown of institutions involved.
7 Sessions included a small number of nursery and infant school staff, as well as staff from other schools that spanned the age groups to include both primary and secondary-aged children.
Resources that teachers can use in lessons is covered throughout teacher training (for example films), along with other material such as the PANTS\(^8\) lessons for primary school teachers. Pre-school teams regularly change baby girls’ nappies and whilst they do not have a responsibility to check girls’ genitalia for evidence of harm, they do have a mandatory reporting duty if they spot FGM. In consultation with Dr Brenda Kelly at the Oxford Rose Clinic, we adapted the package to include images of “healed” FGM. These images were printed in hard copy and shown to the pre-school teams after the session (if they wished to see them) to ensure that this graphic material was shared on a strictly “need to know” basis. Film and, where possible, interactive elements are included to enhance learning.

Oxford Against Cutting recommends training even if there is one girl at risk of FGM in each school (staff also need to be skilled ready to work with new student intakes), given the severity of the harm that would be caused if she were to be cut. In order to maximise resources, we prioritise state schools with the highest numbers of girls from FGM-affected communities. In terms of focusing on the schools where need was greatest, the languages spoken by the appropriate nationalities were used as an indicator. See Appendix 2 for further detail around languages spoken.

Facilitation and coordination

The sessions were run by two or three members of a team which varied according to group size, location and expertise required. OAC training is co-facilitated by a member of an FGM-affected community and many delegates have commented that this makes our training very powerful, helping them to understand FGM and HBA as a reality rather than simply as an academic subject.

The OAC facilitation team for the project overall consisted of: Sobia Afridi (Facilitator), Kate Agha (CEO), Fatou Ceesay (Facilitator), Lena El-hindi (Community Outreach Director), MbaKaddy Touray Jarju (Community Outreach Director), Dot Pritchard (Senior Project Coordinator), Renee Rose (Volunteer and Observer), Hassan Sabrie (Men’s Champion), Mariama Sallah (Facilitator), Dr Nesreen Yanni (Facilitator). Assia Bibi and Naseem Hussain (Sunrise Multicultural Project) also took part in training.

OAC provided ‘Train the Trainers’ sessions for facilitators, and provided opportunities for new/potential facilitators to observe sessions. All facilitators were asked to agree/sign a Service Level Agreement. In addition, the facilitators completed a Facilitator Record Sheet with personal data, and

\(^8\) NSPCC ‘PANTS resources for schools and teachers’ [https://learning.nspcc.org.uk/research-resources/schools/pants-teaching](https://learning.nspcc.org.uk/research-resources/schools/pants-teaching)
were asked to confirm agreement to our Child Protection and Vulnerable Adults Policies. Those with links to community groups other than OAC were encouraged to share leaflets and materials about their projects so these could be displayed and distributed at all training sessions in their county and to share photographs of their projects to include in the training slides. All facilitators’ project contact details were included at the end of the presentation slides. As a result of this work, OAC created a Lead Facilitator Checklist for OAC facilitators to ensure continued consistency of approach and maintain good practice.

Finally, during the life of the project freelance schools coordinators were recruited to contact schools and organise training sessions with this support including representation from the Somali and Sierra Leonean communities which helped us build links with anti-FGM communities.

The evaluation

The following report provides an evaluation of all the training within the stated period based on feedback from attendees. We hope this will help us understand how useful the training has been to them, as well as providing some thoughts on areas for improvement for our ongoing schools work.

Our approach

For the purposes of this project, feedback was collected in a number of ways. Where practicable, delegates were issued with a pre-training questionnaire (online), a post-training questionnaire (paper-based, on the day of the training) and a follow-up, online questionnaire approximately 6 weeks later. These asked them to report on levels of confidence in dealing with FGM/HBA-related issues, in addition to ascertaining their understanding of the background. Additionally, for teaching staff and other professionals where group size or time constraints meant it was not appropriate/possible to administer this 3-stage process a simpler, post-training questionnaire was used. All questionnaires provided free-text space to encourage participants to comment. Finally, if logistics permitted, feedback from student groups was obtained at the end of each session using more informal methods, for example, collecting one-word feedback and writing comments on Post-it notes.

The evaluation questions are available in Appendix 3. All feedback from participants has anonymised, and forms the ‘Results’ section below. Delegates’ free-text comments have

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been provided in Appendix 4, with some comments that reflect how the training was received generally highlighted throughout this report (*in italics*).

**Results**

Overall, the training proved to be extremely successful. Feedback analysis showed that respondents across the three counties who felt moderately/very/completely confident in their ability to respond to issues around FGM increased from 25% to 67.3%, and those who felt ‘not at all confident’ fell significantly from 20.3% to 0.5% and with those responding on a numeric scale reporting an average increase from 5 to 8.5 on a ten-point scale (n=65).

Across the entire set of staff participants for the Thames Valley, 1197 pre-training questionnaires were collected, 1468 post-training questionnaires (on the day). Within the training for Oxfordshire those figures were 341 and 439. Across all three counties, 110 follow-up questionnaires were completed.

Over half (53.2%) of Oxfordshire attendees who completed questionnaires were teachers (including head and assistant head teachers and a small number of trainee teachers). There was also a very wide range of attendees with different roles, including teaching assistants, early years practitioners, safeguarding leads, SENCOS, welfare support officers, pre-school assistants, play workers, nursery practitioners, learning mentors, counsellors, pastoral tutors, speech and language specialists, behaviour and attendance managers, finance officers, school nurses and medical staff, housekeepers, administrators and first-aiders. Those from outside the school environment included police officers and social workers.

Key findings from the evaluation feedback are discussed below, showing some notable results from the questionnaire analysis in graph form. A set of graphs showing the full results is provided in Appendix 5.

**Pre-training evaluation**

**Delegate learning**

Prior to training, many delegates reported lacking confidence in dealing with FGM, and the areas of concern shared high levels of similarity for both primary and secondary staff. The issue that caused greatest concern, for primary staff was talking about FGM in the classroom, with over 64% of primary school delegates feeling ‘not at all confident’ in this. This was less of an issue for secondary school delegates, 46% of whom did not feel confident, though still represents a significant concern. Recognising warning signs that FGM is being planned was also an area of concern with 48% of primary and 47% of secondary staff stating that they were not confident about this. These are the two areas which have

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10 See Appendix 5

11 In answer to a question about their confidence levels in “Responding to concerns that FGM/forced marriage is being planned or has happened”
also caused most concern in our findings from previous schools training evaluation work. Secondary school staff also indicated that recognising when FGM had happened was a concern, with 47% not being at all confident about this.

The highest levels of confidence were shown for referring a case of FGM to the relevant agency, and close to 70% of primary school respondents and 72% of secondary felt some confidence about this aspect.

Delegates generally felt they lacked understanding of the issues surrounding FGM. The different types of FGM were least understood, with almost 69% of primary school respondents and 62% of secondary respondents having ‘very limited’ or ‘quite limited’ knowledge. Even the area where delegates were most knowledgeable – the harm FGM can cause – showed 38% of primary school respondents having only a ‘fair’ knowledge, with 29% being ‘good’ or ‘very good’ (these figures being 34% and 28% for secondary respondents).

**Post-training evaluation**

**Staff workshops**

In keeping with the aims of the training, confidence levels in dealing with all the issues surrounding FGM increased significantly following the training sessions. Of particular note was the delegates having confidence in recognising the warning signs that FGM is being planned, identified as areas of low confidence in the pre-evaluation. For primary school respondents, these increased to 60% who felt ‘completely’ or ‘very’ confident, with a further 32% being ‘moderately’ so. This showed a notable increase, given that almost a half of delegates had no confidence at all in this prior to the training. Secondary staff, who had lacked confidence at similar levels, showed 46% as ‘completely’ or ‘very’ confident, with 47% being moderately confident.

Importantly, talking about FGM in the classroom, an area where a high proportion of delegates indicated as lacking confidence, improved hugely, with 78% of primary school respondents showing moderate to complete levels of confidence in this and over a third of all respondents either feeling ‘completely’ confident or ‘very confident’. This was similarly significant for secondary respondents, 77% of whom showed these high levels of confidence (see figures 1 and 2, below).

“*I learned a lot - some of it was shocking - it made me realise how relevant this is to the age group I teach.*”

Primary school teacher, Oxfordshire primary school
Levels of understanding of the issues also increased to a significant extent. For example, after training 85% of primary, and 84% of secondary delegates reported their understanding
of the types of FGM (the least understood prior to training) as ‘good’ or ‘very good’. Understanding of the harm it can cause is also now very high, with both groups indicating that 95% of them had a good or very good understanding (see figures 3 and 4, below).

Lastly, those completing the shorter evaluation forms (N=65) all agreed that they would recommend the course to others. Furthermore they rated the training course overall, its content and the delivery by facilitators as 9.4 on a scale of 1-10.
The free-format text feedback for the Oxfordshire training sessions is shown in Appendix 4, below.

Feedback was very positive, particularly in relation to the facilitators. Across the three counties, some delegates made suggestions about things to be changed. Comments were primarily about the length of the session, with some finding it too long and some too short. Unfortunately, this is rarely within the control of the facilitation team as the time constraints are generally set by the school/institution. Some feedback related to the type of delivery, ie, the focus on PowerPoint presentations or talks with less room for discussion. Again, this is generally dictated by the forum, number of delegates and institutional time constraints. It will, however, be considered in our learning points from this evaluation.

Many comments were made specifically regarding the involvement of facilitators from affected communities and the use (where appropriate) of their personal stories and, this was an encouraging endorsement of the approach taken. In addition to the written positive feedback in the evaluations, our facilitators have sometimes been personally approached by delegates, with one, for example, saying “thank you for the training, you are so inspirational, I can’t believe how brave you are”. Some of the schools that organised the training gave additional feedback and this is shown in Appendix 6.

**Student Lessons**

In terms of schools work, in Oxfordshire 380+ students were involved in sessions. Because of the format (eg, large-scale open lessons) it is not always possible to obtain feedback. However we were able to obtain one-word feedback from Didcot Girls (Y7) lessons which were delivered to approximately 300 students and are shown below in word cloud format. These showed the impact of the training, through a number of empathetic responses, depth of feeling and emotion. Several students reported hearing about FGM for the first time expressing shock and concern. Some felt more comfortable at having more knowledge on the subject, knowing how to help (eg,
being able to go to a teacher) with some reporting feeling inspired to join a campaign to stop FGM.

Evaluation follow-up

Across the training for all three counties, 110 delegates took the opportunity to complete the follow-up questionnaire. Those who took part showed very high levels of confidence and understanding of the issues, with 83.2% reporting that they felt ‘completely’, ‘very’ or ‘somewhat’ confident and 85.7% that their understanding is ‘good’ or ‘very good’ across all of the questions. Respondents felt particularly confident in being able to access the tools they needed, and knowledgeable about the definitions of FGM and the at-risk groups.

Some respondents specifically mentioned that they would feel calmer and more confident if dealing with a disclosure. Many of those who responded were able to give examples of ways in which the training had been useful, with comments that included how important it had been “Understanding that the age range of children who are at risk is far younger than I originally thought”. Many felt much more confident “Knowing the signs and conversations to look for”, and being “more aware of the subtle signs that a victim may exhibit or indeed discussions about possible holidays to suspected countries”. A very small number would have liked to build on the learning from the session, suggesting it could be extended to allow more discussion, repeated periodically to refresh knowledge or, as one participant (a teaching assistant) stated:

“I feel I’m confident with the training and what I have read but until I deal with it would I truly know how to react and deal with the situation (but hope I don’t come across FGM).” All of this will be fed into our learning from this work.
Several also described activities which they had undertaken as a result of the training. One, for example, had felt comfortable in “Having an open discussion with female parents over a coffee and bringing FGM to their attention. Some of them knew adult females who had this.” Another said that they had: “Better awareness of talking about this to a family member or an individual and equipping myself with the tools and agencies available for further support.” One participant (a primary school deputy head teacher) fed back on a session they had run as a result of the OAC session:

“Although FGM was not directly mentioned, I taught a lesson about keeping safe in the holidays during the last week of term which included the pants rule and who to speak to when not at school. This was as a result of having the FGM training recently and having a heightened awareness of what may occur during school holidays.”

Another primary teacher described how they were:

“More aware of children in class, particularly quieter girls and what they may be going through or experiencing at home.”

Some described how the training had helped develop wider school policy, for example, in a review of PHSE lessons. Moreover, a head teacher described how:

“Due to the large number of children travelling to at risk countries, we have raised our awareness and vigilance when reviewing holidays and monitoring children's well-being.”

Additional feedback
The substantive questionnaires included some additional questions to inform thinking on the way we provide training. Interestingly, prior to the training websites were identified as the most popular source of information (with 68% of respondents choosing this option). However, following the training online videos jumped considerably in popularity and were identified as useful by highest number of respondents 76%. This possibly reflects the successful use of video on our training sessions, and reflects findings from other schools work we have carried out in the past. Furthermore, delegates suggested a range of other learning resources (in addition to specialist training) that they would consider useful, which included running face-to-face sessions internally, perhaps with an inclusion or safeguarding lead, in-class teaching and materials such as lesson plans and other media such as radio or television documentaries, news articles, leaflets and posters. Finally, prior to their training sessions, just 6.8% of primary school delegates reported covering FGM as an issue related to bodily integrity in the classroom, with 29% using the ‘NSPCC Pants’ materials. Secondary school delegates indicated that 13.7% address FGM in the classroom, 19.5% child exploitation and 38.4% issues of consent. A small number across all delegates indicated other ways the subject is introduced, with examples including that the school nurse mentions FGM in Y5 or Y6 puberty lesson, personal relationships and personal space, pornography. Following the training, over 63% across primary and secondary stated that, as a result of the session they intended to cover these issues in the classroom showing a significant increase following our training.

**Final summary and learning points**

This section covers learning from and ‘additional outcomes’ of the training delivered. All three counties from the project are addressed here, to ensure that this is shared widely and gives everyone involved an opportunity to develop from our schools work. Feedback on the training OAC provides was overwhelmingly positive, with comments regularly confirming it has been delivered to a high standard. One primary school teacher, for example, said that

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12 OAC makes extensive use of film in its training materials and has been involved in developing material for a range of audiences. Our latest films are available via [https://www.oxfordagainstcutting.org/resources/](https://www.oxfordagainstcutting.org/resources/).
she had been to about nine anti-FGM safeguarding training sessions on FGM and that the OAC session was “by far the best”, with others describing it as “exceptional”.

We are, though always keen to learn from feedback, and use it in ways to help the training package evolve, and have detailed some learning points below.

**Learning points for future projects**

The following arose which we would learn from when running similar projects.

- There was a fairly low number of follow-up surveys, which is a typical pattern based on our previous evaluation work even though we now send the follow-up after six weeks (rather than three months) so the training will still be relatively recent for our delegates. Those who completed them, however, gave a really rich set of comments and indication of ongoing work after the training. It is therefore a worthwhile exercise to continue this as part of online evaluation exercises.

- The main areas of concern which come out from the pre-evaluation work (eg, speaking in the classroom and recognising when FGM is planned) have been similar across this and previous schools work evaluation exercises.

- On a small number of occasions, it was helpful to challenge some of the decisions schools took in terms of how the training was delivered, for example, to highlight the limitations of delivering the training in an assembly format. When this has occurred, the feedback from schools has been positive.

- The opportunity to work with a range of community groups, in this case as facilitators, as part of projects such as this is a very positive aspect of this work.

- Delivery to students was well-received, with some of them expressing a wish to be active in anti-FGM campaigning. This offers potential to expand OAC’s youth work, with some of the students invited to join the OAC Youth Wing. As well as taking part in lessons (as indicated in previous feedback sessions), there was also engagement with a small number of sixth-formers who produced their own material on FGM and joined a training session.¹³ A learning point for future projects is that there is scope to give young people some specific actions (in addition to joining the Youth Wing) at the end of lessons.

- Suggestions for improvement in our delivery or course content have been taken on board and will also feed into our learning processes for future projects.

- Some participants indicated that they would like to revisit the subject to refresh and build on their knowledge, or simply have a space to reflect and discuss the

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¹³ These are featured on the OAC Schools Champions pages: [https://www.oxfordagainstcutting.org/schools-champions/](https://www.oxfordagainstcutting.org/schools-champions/)
implications for their work of FGM and HBA. OAC has been developing a series of webinars to address the constraints placed on our work by COVID-19, and this is a format which lends itself well to creating a discursive space.

Additional outcomes

Finally, we identified a set of additional actions and outcomes that resulted from the training. Firstly, this work enabled us to spread our ‘reach’ and message, for example:

- Over 420 delegates, and all of the non-OAC facilitators signed up to receive our email newsletter, increasing the reach of our work and core messages. Some participants expressed an interest in joining OAC and supporting our work.
- BBC Look East filmed an interview with OAC facilitator Kaddy Touray, the training session and an interview with a teacher (following a press release by the PCC) and created a piece about FGM.
- OAC were invited to speak at a police conference in October 2018.
- The project also gave us the opportunity to both widen the number of groups we work with across the Thames Valley, in Slough, Reading and Milton Keynes and engage with others expressing an interest in our work. We will continue to build on joint work to tackle FGM.
- Staff took part in the UN’s International FGM Zero Tolerance Day (6 February) wearing the blue ribbons designed for this Day by the charity 28 Too Many.
- To amplify the message and increase awareness of the sessions, these were shared on social media after each of the events, with a selection of these images shared throughout this report.
- Pilot the primary school toolkit with groups of Y2 students, which a teacher was able to observe and then deliver internally. Other schools expressed an interest in using the toolkit.
- On one occasion, where two faith leaders joined the training, OAC facilitators and a young film-maker created a short film in the school hall, interviewing the faith leaders and introducing a further way to share the anti-FGM message.
- Several institutions expressed an interest in OAC delivering further training. This included workshops on body image for their students, with the training for the current project offering an opportunity for OAC facilitators to build relationships to develop this further; running a children’s workshop for year 6 students, running an assembly for year 8 students and additional primary school lessons.

We supported organisations in their anti-FGM work, for example:
• OAC provided feedback for Thames Valley Police on their internal presentation material and added some further resources (map, data charts etc). These slides are now available to officers on their intranet, in the police “Knowzone” intranet.

• We created local versions of our grandmother helplines posters in consultation with local groups, councils and the Oxford Rose Clinic. We now therefore have versions of the poster adapted for Oxfordshire, West Berkshire, East Berkshire and Buckinghamshire.

• Provided 100 hard copies of the poster to ACRE to circulate in West Berkshire; 100 hard copies to Slough Integration to circulate in East Berkshire and 100 to the Somali Outreach Project and Be Bold to circulate in Buckinghamshire.

• This also supported sharing of the work of other groups, for example through encouraging facilitators from community groups to distribute photographs and leaflets relating to their own projects, and introducing schools to these groups so that they could explain their work.

• Contributing to teaching staff professional development, providing certificates of attendance when requested. In addition, the sessions prompted some staff who could not attend on the day to organise subsequent online training.

• Some schools recognised the importance of raising awareness amongst parents, in recognition that this is an area where they can play a positive role. They were able to discuss this with OAC facilitators, including, for example, how to establish a coffee morning and ways to involve local community groups in planning this.

• It was suggested that schools exchange their experiences through lessons plans and discuss ways they have been able to discuss FGM in schools. OAC have been supportive of these ideas, and able to make helpful suggestions.

Finally, we were able to provide focused support on individual cases, including:

• OAC staff were able to provide research on the practices in a specific country of origin of a family of concern for the police and send these to an officer. The police requested a link directly for future advice.

• When approached by staff with safeguarding concerns related to specific individual students or situations, OAC were able to signpost to sources of support. This included directing to/obtaining Home Office material; providing the suggested questions drafted for Health Visitors; linking them with the PCC and appropriate MASH; and advising on contacting Social Care, on a ‘no names’ basis if preferred.

On a final note, we would like to thank all of the delegates who took the time to complete our questionnaires, which allowed us to develop this

“The training was excellent and was made more sobering by engaging with a real victim. The discussion and training was thorough and very suitable for primary school teachers.”

Primary school teacher, attendees of FGM training sessions (follow-up questionnaire)
evaluation and feeds into our continuous improvement. Going forward, OAC’s aim is to raise further funds to extend the programme to other schools and design refresher training for school teams who took part in our training 3 years ago, though this may be subject to restrictions in place because of COVID-19. Our training pack and toolkit will also ensure the sustainability of this work. We are delighted that our charity was able to deliver such a comprehensive programme of training, for all levels of state school with significant numbers of children from FGM-affected communities across the Thames Valley. As a result, many teachers have confirmed that they feel much more confident in identifying the warning signs of FGM, safeguarding girls and making appropriate referrals to Social Care. Teachers also feel much more confident talking about FGM or body rights in the classroom. Our thanks to the Thames Valley Police and Crime Commissioner for their support with this two-year programme.
Appendix 1 – List of participating schools and other institutions for Oxfordshire

Abingdon & Witney College
Burford Primary School
Burford School Boarding House
Cheney School
Cholsey Primary School
Church Cowley St James CofE Primary School
Dalton Pre-school Nursery
Didcot Girls’ School
Dr Radcliffes
Edward Feild Primary School
Grove Primary
Hanwell fields Community school
John Henry Newman Academy
Kidlington Playschool
Ladygrove Park Primary School
Magpies Preschool
New Marston Primary
NOA’s Ark Nursery
North Hinksey CE Primary
North Kidlington Primary
Orchard Meadow Primary
OSCB Training (multi-agency)
Oxford Brookes University (Children’s Nursing students)
Oxford Spires Academy
Pegasus Primary School
Robin Preschool, Kidlington
Rose Hill Primary School
Social workers (newly qualified)
South Moreton School
St Christopher’s Primary School
St Nicholas Primary, Marston
St Swithun’s CE Primary School, Kennington
Thames Valley Police (child abuse officers)
The Blake CE Primary
The Close Day Nursery School
The Oxford Academy
The Warriner School
West Kidlington Primary School
Willowcroft Community School
Windale Community Primary School
Windmill Primary School
Appendix 2 – Languages spoken in schools

The languages identified included:

Afar – Saho
Akan Fante
Akan Twi – Fante
Akan Twi Asante
Amharic
Arabic (Iraq)
Arabic (Sudan)
Arabic (Yemen)
Ebira
Edo / Bini
Efik – Ibibio
Hausa
Krio
Kurdish
Oromo
Pashto / Pahkto
Somali
Swahili
Urdu
Wolof
Yoruba

Note that Urdu and Pashto have not been included for Reading and Slough due to the high numbers of Asian families who live there and this might skew the data.
Appendix 3 – All evaluation questions

Primary Schools – training pre-evaluation (FGM) (SurveyMonkey)

How would you rate your levels of confidence in dealing with the following? (Completely, Very, Moderately, Somewhat, Not at all confident, Not applicable to me)

- Recognising warning signs that FGM is being planned?
- Identifying signs that FGM may have happened?
- Responding to concerns that FGM is being planned or has happened?
- Accessing tools for support and guidance?
- Talking about FGM in the classroom?
- Referring a case of FGM to the relevant agency?

Do you have any comments to add to this?

How would you describe your current understanding of the following... (Very limited, Quite limited, Fair, Good, Very good)

- How FGM is defined
- The different types of FGM
- The harm FGM can cause
- Why FGM is performed
- Who is most at risk

What type(s) of resources are most useful to you in learning more about FGM? (Please tick all that apply) (Websites, Printed leaflets or booklets, Online videos, Other (please specify))

Do you cover any of the following issues related to bodily integrity in the classroom? (FGM, NSPCC Pants, Other?)

Do you have any further comments or questions?

What is your role (tick all that apply)? (Teacher, Teaching assistant, School counsellor, School nurse, Safeguarding lead, Deputy head, Prefer not to say, Other (please specify))

Please confirm which school you work in:
Primary Schools – training post-evaluation (FGM) (SurveyMonkey)

How would you rate your levels of confidence in dealing with the following? (Completely, Very, Moderately, Somewhat, Not at all confident, Not applicable to me)

- Recognising warning signs that FGM is being planned?
- Identifying signs that FGM may have happened?
- Responding to concerns that FGM is being planned or has happened?
- Accessing tools for support and guidance?
- Talking about FGM in the classroom?
- Referring a case of FGM to the relevant agency?

How would you describe your current understanding of the following... (Very limited, Quite limited, Fair, Good, Very good)

- How FGM is defined
- The different types of FGM
- The harm FGM can cause
- Why FGM is performed
- Who is most at risk

What type(s) of resources would be most useful for bringing FGM into the classroom? (Please tick all that apply) (Websites, Printed leaflets or booklets, Online videos, Other (please specify))

As a result of this training, do you intend to cover related issues in the classroom, eg, NSPCC PANTS campaign, human rights, bodily integrity? Yes/no

Do you have any thoughts/comments on this?

What is your role (tick all that apply)? (Teacher, Teaching assistant, School counsellor, School nurse, Safeguarding lead, Deputy head, Prefer not to say, Other (please specify))

Please confirm which school you work in:
Secondary Schools – training pre-evaluation (FGM) (SurveyMonkey)

How would you rate your levels of confidence in dealing with the following? (Completely, Very, Moderately, Somewhat, Not at all confident, Not applicable to me)

- Recognising warning signs that FGM is being planned?
- Identifying signs that FGM may have happened?
- Responding to concerns that FGM is being planned or has happened?
- Accessing tools for support and guidance?
- Talking about FGM in the classroom?
- Referring a case of FGM to the relevant agency?

Do you have any comments to add to this?

How would you describe your current understanding of the following... (Very limited, Quite limited, Fair, Good, Very good)

- How FGM is defined
- The different types of FGM
- The harm FGM can cause
- Why FGM is performed
- Who is most at risk

What type(s) of resources would be most useful for bringing FGM into the classroom? (Please tick all that apply) (Websites, Printed leaflets or booklets, Online videos, Other (please specify))

Do you cover any of the following issues related to bodily integrity in the classroom? (FGM, Child sexual exploitation, Consent, Other?)

Do you have any questions/comments on this?

What is your role (tick all that apply)? (Teacher, Teaching assistant, School counsellor, School nurse, Safeguarding lead, Deputy head, Prefer not to say, Other (please specify))

Please confirm which school you work in:
Secondary Schools – training post-evaluation (FGM) (SurveyMonkey)

How would you rate your levels of confidence in dealing with the following? (Completely, Very, Moderately, Somewhat, Not at all confident, Not applicable to me)

- Recognising warning signs that FGM is being planned?
- Identifying signs that FGM may have happened?
- Responding to concerns that FGM is being planned or has happened?
- Accessing tools for support and guidance?
- Talking about FGM in the classroom?
- Referring a case of FGM to the relevant agency?

How would you describe your current understanding of the following... (Very limited, Quite limited, Fair, Good, Very good)

- How FGM is defined
- The different types of FGM
- The harm FGM can cause
- Why FGM is performed
- Who is most at risk

What type(s) of resources would be most useful for bringing FGM into the classroom? (Please tick all that apply) (Websites, Printed leaflets or booklets, Online videos, Other (please specify))

As a result of this training, do you intend to cover related issues in the classroom, eg, consent, human rights, bodily integrity? Yes/no

Do you have any thoughts/comments on this?

What is your role (tick all that apply)? (Teacher, Teaching assistant, School counsellor, School nurse, Safeguarding lead, Deputy head, Prefer not to say, Other (please specify))

Please confirm which school you work in:
Primary Schools – training pre-evaluation (FGM + FM) (SurveyMonkey)

How would you rate your levels of confidence in dealing with the following? (Completely, Very, Moderately, Somewhat, Not at all confident, Not applicable to me)

- Recognising warning signs that FGM is being planned?
- Recognising warning signs that forced marriage is being planned?
- Responding to concerns that forced marriage is being planned or has happened?
- Responding to concerns that FGM is being planned or has happened?
- Accessing tools for support and guidance on FGM?
- Accessing tools for support and guidance on forced marriage?
- Talking about FGM in the classroom?
- Talking about forced marriage in the classroom?
- Referring a case of FGM to the relevant agency?
- Referring a case of forced marriage to the relevant agency?

Do you have any comments to add to this?

How would you describe your current understanding of the following... (Very limited, Quite limited, Fair, Good, Very good)

- How FGM is defined
- The different types of FGM
- The harm FGM can cause
- Why FGM is performed
- Who is most at risk
- What forced marriage is
- Why forced marriage happens
- Who is most at risk

What type(s) of resources would be most useful for bringing FGM into the classroom? (Please tick all that apply) (Websites, Printed leaflets or booklets, Online videos, Other (please specify))

Do you cover any of the following issues in the classroom? (FGM, NSPCC PANTS campaign, Forced marriage, Other issues relating to honour-based abuse and/or bodily integrity (please specify)?)
Do you have any thoughts/comments on this?

What is your role (tick all that apply)? (Teacher, Teaching assistant, School counsellor, School nurse, Safeguarding lead, Deputy head, Prefer not to say, Other (please specify)

Please confirm which school you work in:

Primary Schools – training post-evaluation (FGM + FM) (SurveyMonkey)

How would you rate your levels of confidence in dealing with the following? (Completely, Very, Moderately, Somewhat, Not at all confident, Not applicable to me)

- Recognising warning signs that FGM is being planned?
- Recognising warning signs that forced marriage is being planned?
- Responding to concerns that forced marriage is being planned or has happened?
- Responding to concerns that FGM is being planned or has happened?
- Accessing tools for support and guidance on FGM?
- Accessing tools for support and guidance on forced marriage?
- Talking about FGM in the classroom?
- Talking about forced marriage in the classroom?
- Referring a case of FGM to the relevant agency?
- Referring a case of forced marriage to the relevant agency?

Do you have any comments to add to this?

How would you describe your current understanding of the following... (Very limited, Quite limited, Fair, Good, Very good)

- How FGM is defined
- The different types of FGM
- The harm FGM can cause
- Why FGM is performed
- Who is most at risk
- What forced marriage is
- Why forced marriage happens
- Who is most at risk
What type(s) of resources would be most useful for bringing FGM into the classroom? (Please tick all that apply) (Websites, Printed leaflets or booklets, Online videos, Other (please specify))

As a result of this training do you intend to cover any of the following issues in the classroom? (FGM, NSPCC PANTS campaign, Forced marriage, Other issues relating to honour-based abuse and/or bodily integrity (please specify)?)

Do you have any thoughts/comments on this?

What is your role (tick all that apply)? (Teacher, Teaching assistant, School counsellor, School nurse, Safeguarding lead, Deputy head, Prefer not to say, Other (please specify)

Please confirm which school you work in:

Secondary Schools – training pre-evaluation (FGM + FM) (SurveyMonkey)

How would you rate your levels of confidence in dealing with the following? (Completely, Very, Moderately, Somewhat, Not at all confident, Not applicable to me)

- Recognising warning signs that FGM is being planned?
- Recognising warning signs that forced marriage is being planned?
- Responding to concerns that forced marriage is being planned or has happened?
- Responding to concerns that FGM is being planned or has happened?
- Accessing tools for support and guidance on FGM?
- Accessing tools for support and guidance on forced marriage?
- Talking about FGM in the classroom?
- Talking about forced marriage in the classroom?
- Referring a case of FGM to the relevant agency?
- Referring a case of forced marriage to the relevant agency?

Do you have any comments to add to this?

How would you describe your current understanding of the following... (Very limited, Quite limited, Fair, Good, Very good)

- How FGM is defined
The different types of FGM
The harm FGM can cause
Why FGM is performed
Who is most at risk
What forced marriage is
Why forced marriage happens
Who is most at risk

What type(s) of resources would be most useful for bringing FGM into the classroom? (Please tick all that apply) (Websites, Printed leaflets or booklets, Online videos, Other (please specify))

Do you cover any of the following issues in the classroom? (FGM, Child sexual exploitation, Forced marriage, Other issues relating to honour-based abuse and/or bodily integrity (please specify)?)

Do you have any thoughts/comments on this?

What is your role (tick all that apply)? (Teacher, Teaching assistant, School counsellor, School nurse, Safeguarding lead, Deputy head, Prefer not to say, Other (please specify))

Please confirm which school you work in:

Secondary Schools – training post-evaluation (FGM + FM) (SurveyMonkey)

How would you rate your levels of confidence in dealing with the following? (Completely, Very, Moderately, Somewhat, Not at all confident, Not applicable to me)

- Recognising warning signs that FGM is being planned?
- Recognising warning signs that forced marriage is being planned?
- Responding to concerns that forced marriage is being planned or has happened?
- Responding to concerns that FGM is being planned or has happened?
- Accessing tools for support and guidance on FGM?
- Accessing tools for support and guidance on forced marriage?
- Talking about FGM in the classroom?
- Talking about forced marriage in the classroom?
- Referring a case of FGM to the relevant agency?
- Referring a case of forced marriage to the relevant agency?
Do you have any comments to add to this?

How would you describe your current understanding of the following... (Very limited, Quite limited, Fair, Good, Very good)

- How FGM is defined
- The different types of FGM
- The harm FGM can cause
- Why FGM is performed
- Who is most at risk
- What forced marriage is
- Why forced marriage happens
- Who is most at risk

What type(s) of resources would be most useful for bringing FGM into the classroom? (Please tick all that apply) (Websites, Printed leaflets or booklets, Online videos, Other (please specify))

As a result of this training, do you cover any of the following issues in the classroom? (FGM, Child sexual exploitation, Forced marriage, Other issues relating to honour-based abuse and/or bodily integrity (please specify)?)

Do you have any thoughts/comments on this?

What is your role (tick all that apply)? (Teacher, Teaching assistant, School counsellor, School nurse, Safeguarding lead, Deputy head, Prefer not to say, Other (please specify))

Please confirm which school you work in:

**Follow-up evaluation (FGM) (SurveyMonkey)**

How would you rate your levels of confidence in dealing with the following? (Completely, Very, Moderately, Somewhat, Not at all confident, Not applicable to me)

- Recognising warning signs that FGM is being planned?
- Identifying signs that FGM may have happened?
- Responding to concerns that FGM is being planned or has happened?
• Accessing tools for support and guidance?
• Talking about FGM in the classroom?
• Referring a case of FGM to the relevant agency?

Do you have any comments to add to this?

How would you describe your current understanding of the following... (Very limited, Quite limited, Fair, Good, Very good)

• How FGM is defined
• The different types of FGM
• The harm FGM can cause
• Why FGM is performed
• Who is most at risk

Can you give an example of how the anti-FGM training has been useful in your day-to-day role, eg, in better supporting a family or individual?

As a result of this training, have you covered related issues in the classroom, eg, NSPCC PANTS campaign (primary only), human rights, bodily integrity? Yes/no

Do you have any thoughts/comments on this?

What is your role (tick all that apply)? (Teacher, Teaching assistant, School counsellor, School nurse, Safeguarding lead, Deputy head, Prefer not to say, Other (please specify)

Please confirm which school you work in:

**Follow-up evaluation (FGM + FM) (SurveyMonkey)**

How would you rate your levels of confidence in dealing with the following? (Completely, Very, Moderately, Somewhat, Not at all confident, Not applicable to me)

• Recognising warning signs that FGM is being planned?
• Recognising warning signs that forced marriage is being planned?
• Responding to concerns that forced marriage is being planned or has happened?
• Responding to concerns that FGM is being planned or has happened?
• Accessing tools for support and guidance on FGM?
• Accessing tools for support and guidance on forced marriage?
• Talking about FGM in the classroom?
• Talking about forced marriage in the classroom?
• Referring a case of FGM to the relevant agency?
• Referring a case of forced marriage to the relevant agency?

Do you have any comments to add to this?

How would you describe your current understanding of the following... (Very limited, Quite limited, Fair, Good, Very good)

• How FGM is defined
• The different types of FGM
• The harm FGM can cause
• Why FGM is performed
• Who is most at risk
• What forced marriage is
• Why forced marriage happens
• Who is most at risk

As a result of this training, have you covered related issues in the classroom? FGM, NSPCC PANTS campaign (primary only), Forced marriage, Other issues relating to honour-based abuse and/or bodily integrity (please specify)

Can you give an example of how the anti-FGM/forced marriage training has been useful in your day-to-day role, eg, in better supporting a family or individual?

Do you have any further comments or questions?

What is your role (tick all that apply)? (Teacher, Teaching assistant, School counsellor, School nurse, Safeguarding lead, Deputy head, Prefer not to say, Other (please specify)

Please confirm which school you work in:
Abbreviated, post-evaluation questionnaire for teachers and other professionals (paper-based)

Would you recommend this course to others? Y/N

How would you rate this training course overall? (Likert scale 1-10)

How would you rate the content overall (Likert scale 1-10)

How would you rate the delivery by the facilitators? (Likert scale 1-10)

Please comment on your experience of this course and why you have awarded the above ratings accordingly (Free text)

How confident were you in the subject matter before you attended this course? (Likert scale 1-10)

How confident were you in the subject matter now you have attended this course? (Likert scale 1-10)

Would you change anything about this course? (Free text)

Please add any other comments you would like to make (Free text)

Which school/organisation do you belong to? (Free text)
Appendix 4 – Delegate comments (collated from post-training questionnaire feedback)

Primary sessions

A sensitive subject, delivered with great sensitivity. Thank you
As the average age is between 5-8, I believe that leaflets would not be beneficial.
Excellent
Excellent course and very informative. I feel more educated in the ways of FGM.
Good training, well prepared but please improve the sound of 'videos' and 'speakers'. It was very difficult to understand what was said because of the volume
Having a survivor talk about her experiences was very powerful.
How to know some parents has plan for FGM
I am shocked that girls are experiencing FGM so young. There seems to be no 'quick fix' as it is so complex.
I learned a lot - some of it was shocking - it made me realise how relevant this is to the age group I teach
I will ensure that parents are aware we have completed training - give advice to any that require it
I will pass on information to other Early Years staff to make sure all are aware.
It made me think and reflect on families in school.
It made us think of vulnerable families in school.
She is inspirational for sharing her life with us. It was incredibly powerful!
Thank you for coming to do the training, it has been very
Thank you for educating me on this issue and building my confidence in this area to support and protect children
Thank you so much for delivering such a powerful session giving both practical and emotional understanding.
Thank you.
There are lots of biological terms used in the presentation which I am not sure everyone would follow. And there is no satisfactory strategy to prevent it from happening. How do you know mum is cut if it’s a taboo question?
There are some different names for FGM. It would be good to know some of them.
This training was so great and informative. Thank you
Training was full of very good information to help my understanding far more. Thank you
Very educational as I knew nothing about it, only heard briefly. Let’s stop this!
Very good training
Very helpful. Thank you.
Very useful information. Well presented
Very useful information; very tactfully presented
Very useful. Thank you!
A really honest and practical informative INSET. Thank you
As an administrator I rarely come across students but if I did have concerns I would immediately refer these to our Safeguarding Lead.
Excellent course about a difficult subject.
Excellent training
I am more aware of fgm after having the training
I thought the training was excellent and invaluable. Thank you very much.
I thought the training was informative and well presented.
I’m not sure this training is given to Primary schools but I was fortunate enough to get it in London as I worked in an Inner London Borough. I think it is important training especially for those teaching pre-high school girls as this is when it is most likely to happen before they enter high school where we don’t know their character in the first place.
Thank you for excellent training!
The lady who spoke from personal experience was fantastic and gave the training a hard-hitting, realistic, personal edge.
The training was excellent and was made more sobering by engaging with a real victim. The discussion and training was thorough and very suitable for primary school teachers.
The training was fantastic, and having an FGM survivor in school really hit home.
The training was very well presented and humbling.
Useful training that’s given me some more confidence.
We need regular revisits to this training. It is new to most of us and, as we don’t deal with this on a daily basis, it is easy to lack confidence. Though not the same as First Aid training, there is a similarity - if you aren’t using some or all of it all the time, you don’t feel confident or practised.
Secondary sessions
A very useful session - thank you very much indeed.
How to support a child to speak when they know their parents will go to jail and they would be separated from their family and community.
I have already had some training on this but really appreciate the update. Very well delivered. Thank you.
I like the video at the end.
I really admire you for the work that you do.
I wanted to know how the 3 presenters got involved in this topic.
Made a difficult topic easy to discuss.
Many thanks for coming in to speak to us about this very important subject.
Please can we be provided with booklets/posters when updated. Legal as well as support for students/adults.
Should children leaving the country during the term time be picked up at border control? They would in other countries.
Superb INSET thank you!
Thank you for being so honest and brave when talking to us about this difficult issue.
Thank you for the information, very upsetting, I dread learning more about this, but it is necessary.
Very informative! Thank you for coming.
Very interesting, useful and in depth. Approachable team - very knowledgeable.
We already teach this but the new resources are useful.
Appendix 5 – Full results of feedback questionnaires for Oxfordshire

Primary schools – pre- (column 1) and post- (column 2) evaluation results

How would you rate your levels of confidence in dealing with the following? Recognising warning signs that FGM is being planned? (n=203)

- COMpletely: 2%
- Very: 22%
- Moderately: 48%
- Somewhat: 28%
- Not at all confident: 2%

How would you rate your levels of confidence in dealing with the following? Recognising warning signs that FGM is being planned? (N=229)

- COMpletely: 7%
- Very: 1%
- Moderately: 9%
- Somewhat: 32%
- Not at all confident: 51%

How would you rate your levels of confidence in dealing with the following? Identifying signs that FGM may have happened? (n=203)

- COMpletely: 3%
- Very: 28%
- Moderately: 30%
- Somewhat: 30%

How would you rate your levels of confidence in dealing with the following? Identifying signs that FGM may have happened? (N=229)

- COMpletely: 7%
- Very: 0%
- Moderately: 9%
- Somewhat: 26%
- Not at all confident: 58%

How would you rate your levels of confidence in dealing with the following? Responding to concerns that FGM is being planned or has happened? (n=203)

- COMpletely: 2%
- Very: 11%
- Moderately: 29%
- Somewhat: 30%
- Not at all confident: 28%

How would you rate your levels of confidence in dealing with the following? Responding to concerns that FGM is being planned or has happened? (N=229)

- COMpletely: 8%
- Very: 1%
- Moderately: 17%
- Somewhat: 20%
- Not at all confident: 54%
Secondary schools – pre- (column 1) and post- (column 2) evaluation results

How would you rate your levels of confidence in dealing with the following? Recognising warning signs that FGM is being planned? (n=138)

- COMPLETELY: 31%
- VERY: 1%
- MODERATELY: 47%
- SOMEWHAT: 1%
- NOT AT ALL CONFIDENT: 20%

How would you rate your levels of confidence in dealing with the following? Recognising warning signs that FGM is being planned? (n=210)

- COMPLETELY: 36%
- VERY: 6%
- MODERATELY: 47%
- SOMEWHAT: 1%
- NOT AT ALL CONFIDENT: 10%

How would you rate your levels of confidence in dealing with the following? Identifying signs that FGM may have happened? (n=138)

- COMPLETELY: 30%
- VERY: 47%
- MODERATELY: 4%
- SOMEWHAT: 19%
- NOT AT ALL CONFIDENT: 4%

How would you rate your levels of confidence in dealing with the following? Identifying signs that FGM may have happened? (n=210)

- COMPLETELY: 38%
- VERY: 10%
- MODERATELY: 44%
- SOMEWHAT: 8%
- NOT AT ALL CONFIDENT: 4%

How would you rate your levels of confidence in dealing with the following? Responding to concerns that FGM is being planned or has happened? (n=138)

- COMPLETELY: 16%
- VERY: 26%
- MODERATELY: 8%
- SOMEWHAT: 8%
- NOT AT ALL CONFIDENT: 30%

How would you rate your levels of confidence in dealing with the following? Responding to concerns that FGM is being planned or has happened? (n=210)

- COMPLETELY: 18%
- VERY: 19%
- MODERATELY: 54%
- SOMEWHAT: 9%
- NOT AT ALL CONFIDENT: 12%
All counties: FGM-related training: confidence in responding to concerns about FGM

Pre-training: How would you rate your levels of confidence in responding to concerns that FGM is being planned or has happened? (n=1188)

Post-training: How would you rate your levels of confidence in responding to concerns that FGM is being planned or has happened? (n=1394)
Appendix 6 – Additional feedback from schools

Oxford Brookes University 4 March 2019 – third year children’s nursing students (Feedback from course leader):

Hi Kate,
Thank you to you and the lovely trainers that spoke to our students last week. I have had some great feedback from the students who all enjoyed the session and felt they learnt a lot. The girls said that they would forward me the resources from the session- is that still possible?
Many Thanks

Jo Peto
Senior Lecturer Children’s Nursing

I gave a form out for students to feed back with and I wanted to let you know that loads of them have written that they felt the FGM workshop was the most interesting and useful one, and that they thought it was really important to know about!

Tamara Ingamells, Cheney School

From: Simon Jackson Headteacher [mailto:head.2590@ef.s.oxon.sch.uk]
Sent: 26 January 2018 12:11
To: Kate Agha
Subject: Re: Training on 25 January

Many thanks Kate,
It was an excellent session.
Regards
Simon
Acknowledgements: Many thanks to the Office of the Police and Crime Commissioner, Thames Valley for supporting this work. Thanks also to: all of the facilitators; those who took part in the training and took time to feed back; and Laura Cottle for her support as Research Assistant.

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