

What Impact has the Training and Conference had on Practice? Female Genital Mutilation (FGM) Training

The following report provides an analysis of responses by practitioners that attended the FGM training sessions in December 2015, March 2016 and April 2016 delivered by Barnardo's. The evaluations took place at least three months after they had attended the course.

1.0 Background

The full day, course for 25 practitioners, which is offered as part of NSCB training delivered by Barnardo's, is described as follows on their website.

Course Overview

Prior to attending this course it is recommended that delegates complete the 'Recognising and Preventing FGM' eLearning course available as part of the NSCB eLearning package or have attended internal cultural awareness training. You should also have read and have knowledge of the local FGM procedure and assessment tool for use by practitioners in Northamptonshire which can be accessed in the NSCB Procedures Manual.

Following the course you will have an understanding of the following:

- *What FGM is*
- *FGM & the law*
- *FGM & your safeguarding responsibilities*

Target Audience

This course is aimed at professional who may come into contact at children or young people at risk of FGM in there day to day practice.

2.0 Methodology

This analysis looked at the difference that the training made to individual's ability to safeguard and identify children and young people at risk of FGM.

The research was conducted by way of a questionnaire accessed via Survey Monkey by participants who attended the training in the specified timescales. The survey remained open for 2 months (July - October 2016) with a number of reminder requests to complete sent during that period by both the Business Office and through members of the NSCB Learning and Development Sub Group.

Participants were asked to respond to statements with the following options - strongly agree / agree / neither agree or disagree / disagree and strongly disagree. Participants were then asked to comment on why they had chosen that option and evidence what had been done / changed as a result. See Appendix 1 for the questionnaire.

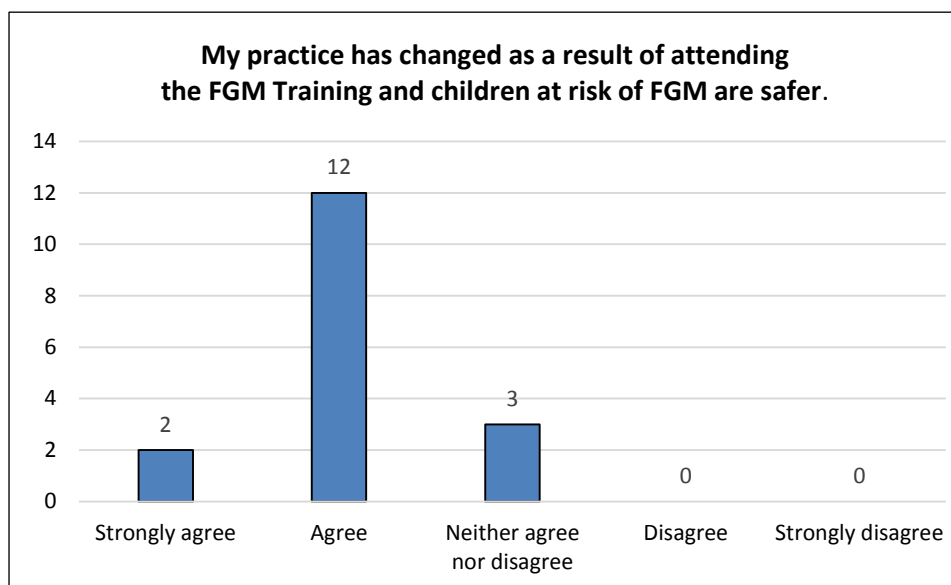
3.0 Response Rate

50 e-mails requesting delegates complete the questionnaire were sent out based on the following attendance (19 December attendees, 16 March attendees and 21 April attendees). Unfortunately 6 attendees did not provide an e-mail address when booking and as a result were unable to receive the questionnaire.

17 of the 50 practitioners contacted returned a response, (34%). This figure, although disappointing, is consistent with both previous returns in this county, and others, in order to draw detailed conclusions a response of nearer 25 (50%) would have been desirable. As detailed above, questionnaires were sent on several occasions from the Business Office and members of the Learning and Development Sub Group were also asked to follow up with practitioners within their organisation.

4.0 Results

4.1 Questionnaire (Full data tables, graphs and responses can be obtained from the Business Office upon request)



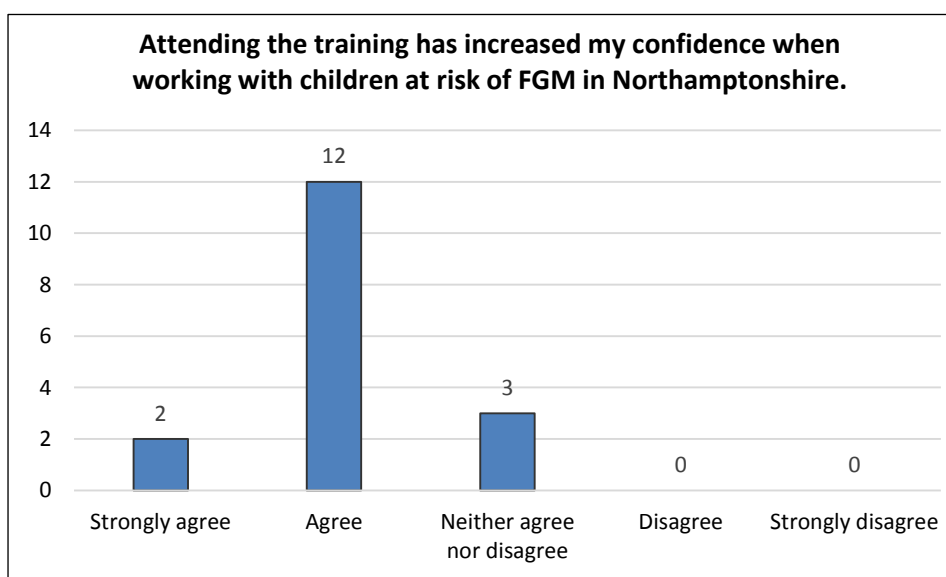
It has made me far more aware of the risk indicators and the student demographic who are most at risk.

I am now actively a part of the team reviewing current FGM guidelines in my trust

I am much more aware of the different countries and cultures that FGM is performed in. I am now not afraid to ask questions in case I offend others.

My pre conceived ideas of FGM were shown to be totally misconceived and I feel more understanding of the challenges that victims of FGM face. The training course totally changed my way of thinking.

This data and comments are very encouraging in showing that 14 (82%) of participants agreed that their practice has changed since attending the course and at that children and young people in the county are now safer from FGM as a result. The comment about not being afraid to ask difficult question and the comment noting a change in pre-conceived ideas re-enforce the findings of this question and show the course is changing practice in what can be a difficult subject to discuss.



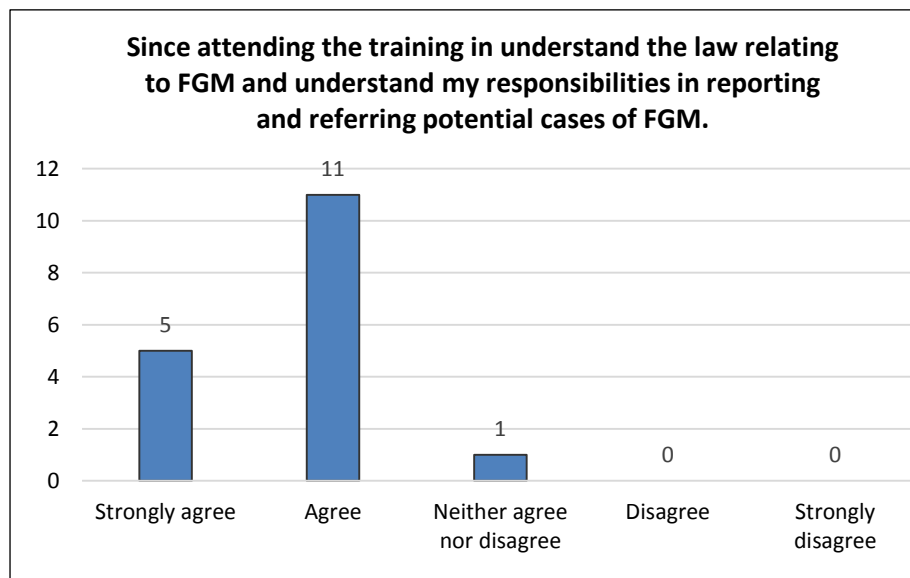
I am much aware and because of this and the knowledge of how FGM is performed. I am confident to ask questions to make others aware of this form of FGM and what it consist of.

Confident with the legal implications and local policy and procedures.

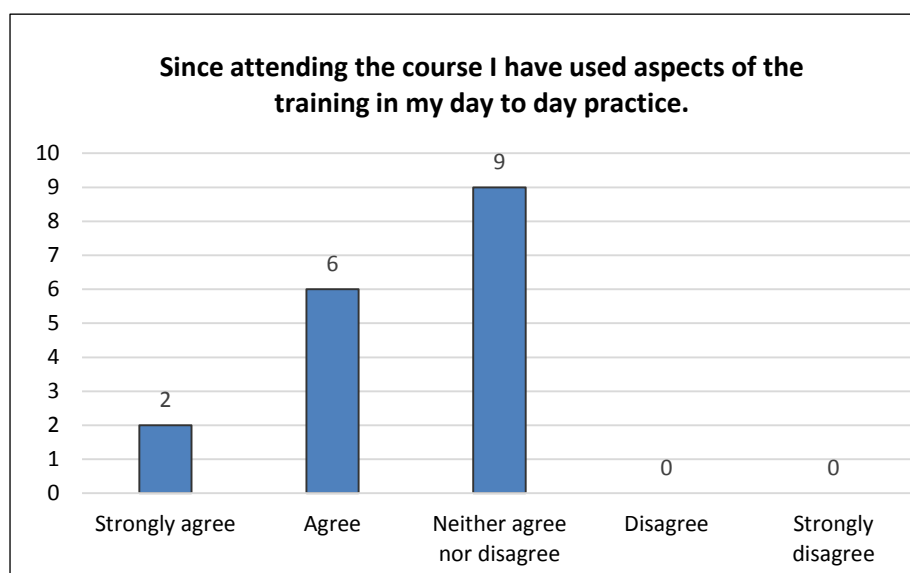
I have more knowledge of the subject matter and this has increased my confidence

I feel more confident as I have knowledge and information on ways to so support families, report concerns and to stop children leaving the country to be cut.

With the same statistics as the previous question it can be concluded that as a result of this training the confidence of delegates who attended this course has dramatically increased when working with children at risk. This is a fantastic achievement supported by the quotes above.



A key learning objective for this training course is that participants will understand the law relating to FGM including responsibilities under mandatory reporting. The fact that 16 out of 17 (94%) respondents agreed with this statement shows the course is fulfilling this objective. Positively even the 1 respondent who did not agree with the statement expressed no opinion either way.

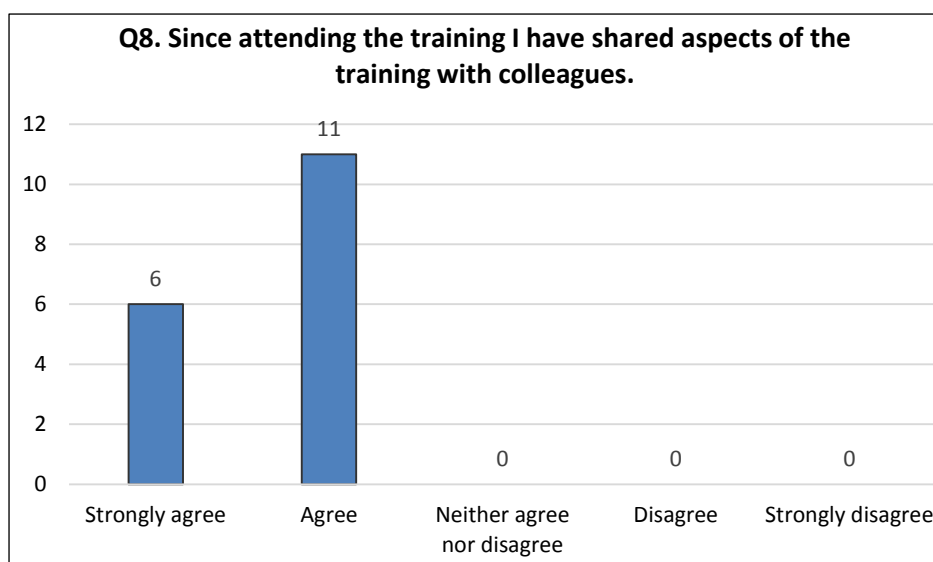


Ensuring all staff are aware of and understand their responsibilities in reporting and referring potential cases of FGM

Working with a young person I felt confident to ask about FGM. She informed me that she was all for it and set to have it done. Her mother convinced her that it was the right thing to do. She thought it was the best thing for her until she was told about it in school and shown pictures.

Using the risk indicators to eliminate/confirm whether I feel a student is at risk of FGM

This question is a difficult one to analyse as we would like to be able to report that no professional has had the need to use the learning from this course in day to day practice as no children are at risk of FGM in the county we know however that this is not the case and children will possibly always be at risk. What the above results and quotes do show us is that the content of this course is being used in day to day practice and we have direct evidence of it being used to safeguard at least 1 person and educate them on FGM.



Every member of the staff body attended training in April - including site staff and admin staff.

I discussed the course with colleagues and have used my knowledge when someone in the office asked questions about it.

Yes I have shared a lot of information and pictures with colleagues. I was impressed with the training and wanted to highlight those that had not been on the training the serious impact this can have on our young people and what signs to look for and things to listen out for.

Colleagues were of the same thought process as me but after speaking to staff their understanding of FGM and how some/most perpetrators of FGM are themselves victims of FGM has changed their pre conceived ideas

An important aspect of the NSCB approach to training is that practitioners are encouraged and expected to share learning with colleagues back in the workplace, in team meetings and that managers and supervisors should ensure that learning is embedded in practice. The response to this question shows an extremely positive response as all respondents' state they have shared learning with colleagues. This is backed up by the comments which show that learning from this course has been extensively shared beyond just the participants who have taken the course.

Q10. The aspect of the training I remember most is...

- *The statistics of the victims of FGM. That there were several different types and extremity of FGM.*
- *All of it. One part complement the other and help me to understand*
- *The trainer that took my course was engaging and seemed to understand that, as a group, we would have a certain mind set about FGM. The fact that she managed to help not just me but others to understand the thoughts and processes behind FGM without me realising was amazing*
- *Detailed presentation of the subject and the interactive conversations giving different agency perspectives.*

Q11. I feel the training could have been improved in the following way(s).

- *None - I felt it was a very effective training session and time was used well.*
- *It's the best training I have been on for a long time*
- *The training met all my needs and expectations*
- *The training was excellent.*

5.0 Conclusion

As a result of the above we are able to conclude that the 'Female Genital Mutilation (FGM)' training course being delivered by Barnardo's for the NSCB is fulfilling the aims and objectives set out by the Learning and Development Sub Group. When drawing conclusions about this course it is important to remember that this face to face course is directed at frontline practitioners who are likely to come across people who have had FGM done to them, or be at

risk of having the procedure performed in the future. Practitioners requiring an awareness raising of what FGM is and the signs to spot should be taking the e-Learning course provided by the Virtual College for the NSCB.

This analysis clearly demonstrates that as a result of taking this course practitioners are making significant changes to practice and their own beliefs on the subject, which are, in turn, having a real impact on the safeguarding of children and young people in Northamptonshire at risk of FGM. This is evidenced through a number of the comments above which provide some rich evidence to the impact this course is having and on how its learning is being shared wider than just the participants who have taken the course directly.

It is important to remember that while the above provides a very positive picture that this is only based upon a return rate of 34% (17) which although enough to be able to draw positive conclusions still leaves 66% (33) of the attendees of this course who have not detailed how they have put the learning from this course into practice.

We also need consider that this training is not delivered in isolation and the NSCB have a number of initiatives to not only train but make practitioners and members of the public aware of the signs to spot and their responsibilities when it comes to protecting young people from FGM. This includes the e-Learning module on FGM also available, the countywide campaign to raise awareness of the subject and the formation of the FGM Sub Group and Community Association to co-ordinate the response in Northamptonshire.

Moving forward with the likely reduction in funding for the NSCB training contract it will be important to discuss the level of need for this training. While the results above show that this is a valuable course, consideration may need to be given as to whether it can still be provided free of charge to practitioners and agencies or whether a supplementary charge will need to be made for attending this course.

6.0 Recommendations

1. That this report is made available via the NSCB website, and is made available for dissemination within agency newsletters.
2. That the findings of this report are shared with the FGM Sub Group, Executive Support Group and NSCB Board for information.
3. That the report is shared with Barnardo's to aid their future course development and evidence the positive impact this course is having.
4. A further impact evaluation is now undertaken into the e-Learning course provided through the Virtual College on FGM to ensure this is also having an impact on practice.

Kevin Johnson

NSCB Project Officer – October 2016