

Body Image Project Report



OxfordAgainstCutting
StopFemaleGenitalMutilation



Natalie Brook, March 2019

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1. Foreword: Dr Brenda Kelly

No other part of the human body garners such shame, embarrassment and for some, fear, as the female genitalia. Put simply, we don't like to talk about our genitals. But what we don't talk about becomes secret and as we know secrets, shame, myths, fear are all ingredients for creating taboo.

Much work has been done in recent years to lift the taboo around female genital mutilation (FGM). I am proud to be Patron of Oxford Against Cutting (OAC) and of the work the OAC team, led by Kate Agha, do in raising awareness of this deeply entrenched cultural practice. FGM carries the risk of lasting harm for girls and women and is prevalent in many heteropatriarchal societies worldwide. Several narratives underpinning FGM have been described including conforming to specific gender role and aesthetic, control of female desire, prevention of promiscuity, and as a rite of passage into adulthood. There are also reports of social capital gained- to be "circumcised" is to conform to expected social norm, to be "circumcised" is to belong, to be celebrated. Successful campaigns to address FGM, such as those run by OAC, have sought to engage grassroots communities using a rights-based approach and to promote education around potential and actual harms towards abandonment of this practice.

What is often overlooked in the discussions around FGM is the rising prevalence of female genital cosmetic surgery (FGCS), where women, and alarmingly an increasing number of girls, undergo operations to alter their genital appearance to conform to a perceived notion of what is normal and more culturally acceptable. This is a burgeoning and largely unregulated industry.

Although there are anatomical parallels between certain types of FGM and FGCS e.g. labial excision, clitoral hood reduction, the industry and its supporters seek distance between the two practices. Women who choose to or are forced to undergo FGM are portrayed as victims of patriarchy and harmful gender norms whereas women seeking FGCS are seen as autonomous consumers. FGCS is presented as the means by which a woman can meet her own self-constructed notion of an ideal, of how she wants to look and her own expectation of sexual satisfaction.

She can choose, she is empowered. She is taking control of her own life. This is not genital mutilation. This is genital liberation. Or is it?

The reality is that there is a wide spectrum of normal variation in the size, shape, colour of female genitalia. We are a consumerism society and are being sold a socially-constructed normality. Medicalisation, creating a specialty selling "corrective surgeries" embeds the notion that the spectrum of size, shape, colour of the vulva and vagina reflects illness and dysfunction rather than normal variation. Of deep concern, the narrow construct of what is normal advertised by FGCS websites is the same construct frequently portrayed in pornography, and easily viewed by anyone with access to the internet.

Lifting the taboo around female genitalia and genital modification practices and opening up discussion around the spectrum of normality and autonomy is therefore as relevant to those

growing up in Western culture (men, women, boys and girls) as it is to those who come from cultures where FGM is prevalent.

The work described in this report is therefore not only timely but also an important much-needed first step on a journey to blow the lid of the taboo. Kate Agha and the team are to be congratulated on creating this foundation on which to build future work.

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2. Introduction

Oxford Against Cutting (OAC) is a charity tackling female genital mutilation (FGM) and other harmful cultural practices in Oxfordshire and the Thames Valley. OAC focus on ending FGM through education and supporting survivors of FGM.

The World Health Organization (WHO) defines FGM as all procedures involving partial or total removal of the female external genitalia or other injury to the female genital organs for non-medical reasons.

Oxford has been described as a “hot spot” of FGM (Source: Department of Health) and OAC estimates that there are more than 1000 survivors living in the city.

OAC works closely with our Patron, Dr Brenda Kelly, Consultant Obstetrician and Founder/Director of the Oxford Rose Clinic for FGM survivors. Dr Kelly observed that her colleagues at the John Radcliffe Hospital had seen a sharp rise in young girls requesting cosmetic genital surgery and has highlighted the strong correlation in the reasons and law relating to FGM and Female Cosmetic Genital Surgery (FCGS)¹. Dr Kelly brought together a group of medical experts (“the medics team”) and OAC to brainstorm the creation of schools’ resources to help address these issues in a broader context of body image.

OAC’ s work was funded by The National Lottery Awards for All Fund.

The project ran from June 2018 to March 2019.

3. Aims of the project

The Body Image Project aimed to create a secondary school toolkit that drew parallels between Female genital Mutilation (FGM) and Female Cosmetic Genital Surgery (FCGS) by talking about both issues and body image, as a way to reach everyone in the classroom.

The project’s specific outcomes were to:

1. Ensure understanding of the names/function of the female genitalia
2. Improve understanding of the cultural influences behind FGM and female cosmetic genital surgery (FCGS)
3. Improve understanding of genital alteration in the context of gender equality

¹ Kelly B, Foster C. Should female genital cosmetic surgery and genital piercing be regarded ethically and legally as female genital mutilation? BJOG 2012; 119: 389–392.

4. Increase confidence in talking to a friend or trusted adult about concerns
5. Increase knowledge of where to get help.

OAC consulted with a range of stakeholders including local young people, women from the Sudanese community, schools, sexual health doctors, gynaecologists and obstetricians. Doctors at John Radcliffe Hospital reported a sharp increase in girls requesting cosmetic genital surgery and schools talked about concerns regarding the influence of porn on perceptions of 'normal' genitalia and sexual agreement.

4. Methodology of this report

This evaluation reviewed materials and results from the project using a desk review of the following data and project documentation:

- Report from consultation with Cherwell School students
- Lesson plan and PowerPoint presentation for sixth form students
- Photos of workshop flipchart exercises
- Facilitator notes from each body image workshop
- Feedback forms from student participants at each workshop – 68 feedback forms were analysed in total. See Appendix 1 for a sample feedback form.

In addition, a desk-based research exercise was undertaken to identify existing resources for young people on the natural function and appearance of female genitalia.

5. Background research

Desk based background research was undertaken as part of the project, looking at available resources on the natural appearance and function of female genitals. The following related resources are organised by Government policy, resources on female genitalia, resources on FGM and resources on body image.

Government policy

In 2017, the UK Government committed under the Children and Social Work Act that sex and relationships education would be compulsory in all schools from September 2020. Following this announcement, research undertaken by the Sex Education Forum / National Education Union in 2018 found significant gaps in sex education learning, specifically about a number of topics. The research found that “considerable numbers (of young people) did not learn about other important subjects, including Female Genital Mutilation (FGM) (33%), pornography (27%) or sexual pleasure (30%).”² Government consultation

² Sex Education Forum / National Education Union (2018) *Poll of 1000 16 and 17-year olds in England*

incorporated these and other findings to guidance³ published in 2019, which outlines the expectations on schools and content that should be covered in RSE curriculum. The guidance includes information on FGM, forced marriage, domestic violence and sexual violence for secondary school teaching. However campaigning group End Violence Against Women noted that “the new document could go further in ensuring all primary school children are taught about FGM, forced marriage and LGBT equality”.⁴

The guidance itself states that:

- “Schools should address the physical and emotional damage caused by female genital mutilation (FGM). They should also be taught where to find support and that it is a criminal offence to perform or assist in the performance of FGM or fail to protect a person for whom you are responsible from FGM.”
- “Pupils should know the concepts of, and laws relating to, sexual consent, sexual exploitation, abuse, grooming, coercion, harassment, rape, domestic abuse, forced marriage, honour-based violence and FGM, and how these can affect current and future relationships.”

The guidance also discusses body image and states that:

- “Pupils should know the similarities and differences between the online world and the physical world, including: the impact of unhealthy or obsessive comparison with others online (including through setting unrealistic expectations for body image, how people may curate a specific image of their life online, over-reliance on online relationships including social media, the risks related to online gambling including the accumulation of debt, how advertising and information is targeted at them and how to be a discerning consumer of information online).”

However, there is no mention in the guidance about discussion of genitals (beyond FGM). The only reference to body parts states: “The national curriculum for science also includes subject content in related areas, such as the main external body parts, the human body as it grows from birth to old age (including puberty) and reproduction in some plants and animals. It will be for primary schools to determine whether they need to cover any additional content on sex education to meet the needs of their pupils. Many primary schools already choose to teach some aspects of sex education and will continue to do so, although it is not a requirement.”

³ Department for Education (2019) *Relationships Education, Relationships and Sex Education (RSE) and Health Education – Draft Statutory Guidance for Governing Bodies, Proprietors, Head Teachers, Principals, Senior Leadership Teams, Teachers*

⁴ End Violence Against Women Coalition website (2019)

<https://www.endviolenceagainstwomen.org.uk/relationships-sex-education-womens-groups-welcome-progress/>

Resources on female genitalia

In conversation with the **Sex Education Forum (SEF)**, OAC discovered that that majority of RSE uses anatomical drawings of genitals rather than real life representations. SEF also discourage the googling of images or using images of STI's, emphasising that it is important for children and young people to see healthy genitals rather than scare tactics. SEF also recommend using images of natural genitals rather than operated on genitals to avoid advertising the 'benefits' of surgery and missing discussion of what is 'normal'.

Body Sense produce anatomically correct 3D male and female cloth models. Originally developed for use with pupils with learning disabilities in educational settings, "they have been found invaluable as teaching aids for a wider range of children and young people in both formal and informal settings."⁵

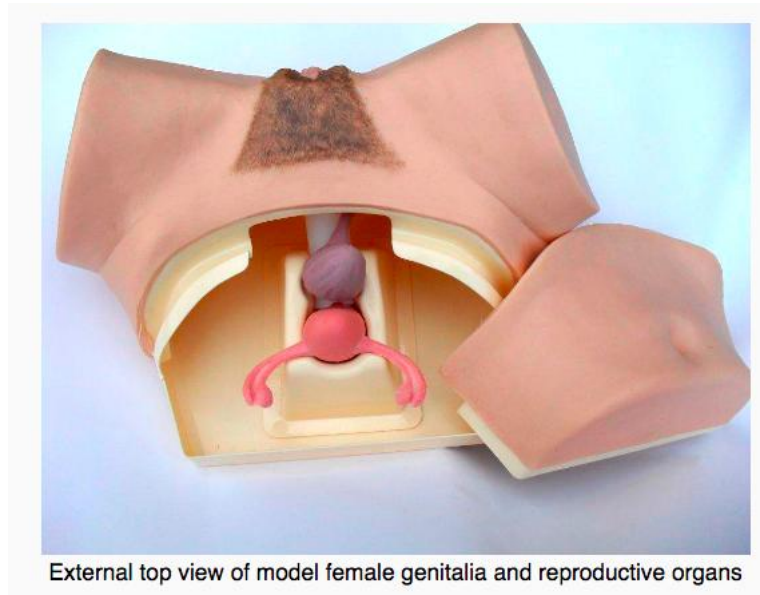
A male and female model, Desmond and Daisy, are pictured below.



The Wendy model includes the female genitals and reproductive organs, as pictured below. The Body Sense website describes one example of the use of the model: "The 'Wendy' model has been used within group and individual counselling sessions to help women with some form of sexual dysfunction. The therapist can use the model to describe different parts of the human anatomy - both the external genitalia and the 3D internal reproductive

⁵ <http://www.bodysense.org.uk/>

organs - and to de-mystify what for some may be not only a hidden but also an embarrassing part of their anatomy. Examining the model enables women to have a better understanding of the sexual response cycle and a clearer grasp of any therapeutic techniques they may be advised to try.”



Brook, the UK sexual health charity, published a booklet, ‘So What is a Vulva Anyway?’⁶ in collaboration with experts in adolescent gynaecology. The booklet includes information about the vulva, including anatomical drawings designed to help teenagers understand their vulva and how puberty can change it. The booklet also refers to the influence of porn, and information about labiaplasty.

Bish⁷ is a guide to sex, love and you for young people over 14. It is for people who are (or are thinking about) having sex and relationships. It is for all genders and sexualities, people with disabilities, backgrounds, beliefs and values. Bish was set up by a UK sex educator and youth worker and includes resources on love, sex, bodies, and porn. The section on bodies includes information and resources, including a video on the vagina, vulva and clitoris.

The British Society for Paediatric and Adolescent Gynaecology promotes the “profile and study of, and clinical approaches to, paediatric and adolescent gynaecology and provide a multidisciplinary forum for discussion, education and training.” The website includes a leaflet for patients ‘Female Genital Appearance: What is Normal?’⁸ with some basic information about female genitalia and labiaplasty.

⁶ https://www.brook.org.uk/data/So_what_is_a_vulva_anyway_final_booklet.pdf

⁷ <https://www.bishuk.com>

⁸ <https://britspag.org/wp-content/uploads/2018/10/Leaflet-Vulval-appearance-leaflet-final.pdf>

The Great Wall of Vagina is an art work created by artist Jamie McCartney. The piece consists of four hundred plaster casts of vulvas, arranged into ten large panels. The age range of women is from 18 to 76. Included are mothers and daughters, identical twins, transgendered men and women as well as women pre and post-natal and pre and post labiaplasty. The website includes further information on what it describes as the more “unusual” casts, in the hope to “educate and enlighten as well as address some of the stigmas, taboos and misconceptions that are commonplace.”⁹

This resource was used by OAC in the body image workshops, and they highlighted the fact that all participants of the artwork were waxed in order to participate.

The **Vulva Gallery**¹⁰ is a series of illustrations of all kinds of vulvas which aims to celebrate the vulva in all its diversity all over the world. The project is delivered via a website and social media. The project was recently turned into a book, which aims to “raise awareness around body diversity, to inspire and empower individuals by sharing personal stories, and to provide information on anatomy and sexual health.” The creator is concerned with the distorted images of the ‘perfect’ vulva being consumed by young women and girls, and references that this is leading to increases in girls under 18 undergoing labiaplasty.

Viva La Vulva is a three-minute video¹¹ produced by Bodyform, the feminine protection brand. It takes a light-hearted look at female genitalia in an attempt to get women to understand more about their bodies and celebrate their vulvas (alongside launching a new intimate care product range). The video includes various depictions of genitalia. Women’s magazine Marie Claire reported: “According to research carried out by Bodyform, 73% of women in the UK don’t know what a vulva is, 42% have felt embarrassed about theirs (it’s a shocking 63% in 18-24 year-olds) and 61% believe society puts a pressure on women to ensure their vulva looks a certain way.”¹²

The video was used by OAC in the pilot workshops.

The Labia Library¹³ is an Australian website created to show the natural diversity of women’s genitals. The founders state that “after seeing media reports about women seeking female genital cosmetic surgery, we became worried that this type of surgery was increasing because many people have no idea what healthy female genitals actually look

⁹ <http://www.greatwallofvagina.co.uk/education>

¹⁰ <https://www.thevulvagallery.com>

¹¹ https://www.youtube.com/watch?time_continue=2&v=5EW61f5mYg4

¹² <https://www.marieclaire.co.uk/news/beauty-news/new-bodyform-campaign-651118>

¹³ <http://www.labialibrary.org.au/>

like.” The website includes information and advice about anatomy and tens of photographs of female genitals (with pop up content warning).

The Wonder Down Under is a book published in 2018 which “explains everything you ever wanted to know about the vagina but didn't dare ask. Learn the truth about the clitoris' inner life, the menstrual hormone dance and whether the vaginal orgasm really exists. The book helps you understand how different types of contraception work in the body, what a "normal" vulva looks like and how wearing socks can change your sex life.”¹⁴ Written by medical students and sex educators Nina Brochmann and Ellen Støkken Dahl. The authors also have a Ted talk, ‘The Virginitly Fraud’¹⁵.

Gendered Intelligence is a charity who specialise in supporting young trans people under the age of 21. Their ‘Trans Youth Sexual Health Booklet’¹⁶ includes information for young trans people on body positivity, getting to know your body and the impact of hormones on genitals and sexual functioning.

Resources on FGM

The **PHSE Association** have a FGM lesson plan¹⁷ which covers the female external organs (including diagrams) within the context of FGM.

Integrate UK is a charity fighting to end FGM and empower young people. Integrate produce educational resources which include a lesson starter resource aimed at opening discussion about FGM in secondary schools¹⁸ and a video about FGM types 1 and 4, ‘My Clitoris’.¹⁹

Oxford Against Cutting has produced a number of resources for teaching secondary school students about FGM, including videos created by young people, lesson plans and posters and leaflets. OAC has also created a toolkit for primary school children, Who Can You Tell? and delivers safeguarding training on FGM, honour-based abuse and forced marriage for school staff teams across the Thames Valley.²⁰

¹⁴ <https://www.amazon.co.uk/Wonder-Down-Under-Users-Vagina/dp/1473666902>

¹⁵ www.ted.com/talks/nina_dolvik_brochmann_and_ellen_stokken_dahl_the_virginity_fraud

¹⁶ <http://cdn0.genderedintelligence.co.uk/2012/11/17/17-14-04-GI-sexual-health-booklet.pdf>

¹⁷ <https://www.pshe-association.org.uk/system/files/KS3%20FGM%20Lesson%20Plan.pdf>

¹⁸ <https://integrateuk.org/iuk-resources/anitas-dilemma-fgm-lesson-starter/>

¹⁹ <https://integrateuk.org/iuk-projects/myclitoris/>

²⁰ <https://www.oxfordagainstcutting.org/resources/>

FORWARD (Foundation For Women’s Health, Research and Development) is an African women-led organisation working on female genital mutilation, child marriage and other forms of violence against women and girls in the UK and Africa.

Forward have produced an FGM programme, endorsed by the PHSE Association²¹ as well as a three-minute animated film, ‘Needlecraft’²², aimed at raising awareness of female genital mutilation (FGM) in the UK. The film has also been adapted for children under 16 and is used in the Forward primary schools programme, titled ‘My Body My Rules’²³.

The National FGM Centre is a partnership between Barnardo’s and the Local Government Association (LGA). It was established in 2015 to achieve a systems change in the provision of services for children and their families who are affected by Female Genital Mutilation (FGM). The FGM Direct Work Toolkit²⁴ was developed to support professional’s education and explore views with children aged 7+ and 10+ years old and parent(s)/carer(s) on FGM. It includes activities designed to increase understanding of what FGM is, and for the 10+ group it includes drawings of uncut genitalia and the different types of FGM.

Birmingham Against FGM seeks to lead and co-ordinate multi-agency activity to prevent the practice of FGM; to protect girls from FGM and to address the physical, psychological and emotional health and support needs of women and girls who have undergone FGM. Its website includes a range of resources aimed at supporting the teaching of FGM at both primary and secondary school levels.

Resources on body image

Public Health England have published a lesson plan and presentation of KS3 and KS4 on ‘body image in a digital world’. The lesson aims to increase understanding of how social media can influence and affect perceptions about body image and cause stress. Resources include the Body Image and You!²⁵ film and the Toni Shinobi talks body image film²⁶. However the content makes no reference to genitals or body parts.

The Sex Education Forum is a group of partners (including NSPCC, The Children’s Society and Barnardo’s) working together to achieve quality relationships and sex education (RSE) for all children and young people. They run a one-day CPD course ‘body image and mental

²¹ <https://forwarduk.org.uk/what-we-do/uk-programmes/schools-programme/>

²² https://www.youtube.com/watch?v=bgbvZzCZU_4

²³ https://www.youtube.com/watch?time_continue=86&v=W2IStB6Z3Vw

²⁴ <http://nationalfgmcentre.org.uk/fgm/fgm-direct-work-toolkit/>

²⁵ <https://riseabove.org.uk/article/helen-talks-body-image/>

²⁶ <https://riseabove.org.uk/article/tobi-shinobi-talks-body-image/>

wellbeing²⁷ which takes an in-depth look at the influences that shape children and young people's body image in the digital age, and the evidence of impact on mental wellbeing. It explores the role of social media and pornography and how effective teaching can help to combat the 'perfect' body ideal in an era of selfies and Instagram posts. Opportunities for cross curricular learning will also be identified, including how attitudes towards the body have changed over time and across cultures. The course outline suggests that as a result of the course, participants will "be aware of a range of resources for teaching about genital diversity."

The **PSHE Association** produced guidance on teaching about body image²⁸, suitable for key stages 1-5. The key issues covered include exploring what body image is and why it is an important part of the curriculum; creating a school environment that supports and promotes positive body image; building teaching about body image into a planned PSHE education programme; using visitors in the classroom to support the teaching of body image and addressing the needs of vulnerable groups. However there is limited reference to teaching about genitals, other than:

- At Key Stage 1, pupils should have the opportunity to learn about "the names for the main parts of the body (including external genitalia), the similarities and differences between boys and girls."²⁹
- The proliferation of pornography being accessed by young people "can pose particular challenges in relation to young people's body image, including a new aesthetic about how genitals 'should' look and greater objectification of one's own and others' bodies."

The guidance suggests a number of questions about pornography for us as discussion starters.

6. Activities and results

The planned project activities included:

- Consultation meeting with students at Cherwell School
- Eight anti-FGM and body image sessions for Oxfordshire Youth Club Network
- Workshop with Young Women's Music Project
- Report on research and project findings

Delivery of the project took place between June 2018 and March 2019. Below is a summary of each activity and the results.

²⁷ <https://www.sexeducationforum.org.uk/training/our-training-packages/body-image-and-mental-wellbeing-secondary>

²⁸ PSHE Association (2019) *Teacher guidance: Key standards in teaching about body image* <https://www.pshe-association.org.uk/curriculum-and-resources/resources/key-standards-teaching-about-body-image>

²⁹ PSHE Association (2019) *Teacher guidance: Key standards in teaching about body image*

Consultation meeting with students

A meeting took place between OAC staff, members of the medics team and nine sixth form students at Cherwell School (aged between 16 and 18, eight identifying as female, one as masculine. 33% of students identified as White British, 22% as Asian/Asian British, 22% as Black/African/Caribbean/ Black British, and 11% as mixed and 11% as other).

Students were asked to complete a survey about their experience of being taught about genitalia. A full report on the discussion can be found in Appendix Two.

Results:

44% of students said they had received teaching about the appearance of external female genitalia – either from a previous OAC workshop or at primary school. 33% had never been taught about it, and 22% were not sure.

None of the students said they had been taught about how the external female genitalia change during arousal and sex. Themes of the discussion around this included needing to know about normal variety in genital appearance; the negative information represented in pornography and social media; a general lack of understanding about genital function and vaginal size /relation of size to sex.

In comparison to learning about female genitalia, 67% of students said they had received teaching on the external appearance of male genitalia – all from school. 22% had never been taught about it and 11% were not sure. 33% had received teaching on how male external genitalia change during sex, 56% had not, and 11% were not sure. Although a small sample size, this represents a striking difference between students' experience of being taught about male and female external genitalia.

In discussion, students brought up the lack of teaching about variation in penis size and the unrealistic influence of pornography.

When asked if they understood what is meant by the terms female genital mutilation / female genital cutting / female circumcision, 55% said yes, 33% said no and 11% were not sure. 44% had received education on these topics, either at an OAC workshop, citizenship fair or PSHCE. Others had seen information about it on social media or a poster at school and one student had heard about it via work experience.

When asked who they would prefer to deliver teaching on the appearance and function of genitalia, 63% of students said they would like a combination of an external speaker and

either school nurse, doctor or PSHCE teacher. 13% said PSHCE teacher and 13% said biology teacher and PSHCE teacher. 67% of students said they would like teaching to be delivered in mixed gender groups, 33% didn't mind and 0% said separate groups.

Additional comments about who should deliver these sessions, the timing of teaching / age groups, and other related topics can be found in Appendix Two.

Anti-FGM and body image workshops

The delivery of this project activity was amended to take into account changes in the involvement of key stakeholders. The original plan – to work closely with the medics team and medical students in the development and delivery of the workshops – was postponed because the student medic team had to delay their involvement due to exams. Instead, the OAC team developed a lesson plan and workshop following planning discussions with a local PSHE teacher, the medics team and the consultation with sixth form students at Cherwell School. The initial need identified by Oxfordshire Youth Club Network did not result in requests for workshops from local youth clubs, so the OAC team approached Abingdon College and Witney College, with whom they had existing relationships, and delivered workshops for sixth form students of Social Care and Hair and Beauty. OAC was keen to work with Hair and Beauty students as these students are likely to work in salons where clients may feel comfortable to have informal conversations about body image and cultural practices. Another charity has also recognised the benefit of working with this group and previously ran workshops on domestic abuse.

Eight workshops were delivered with between seven and 15 students attending each session – 74 students participated in total. Demographic data was not collected, but facilitators' feedback from the eight workshops, together with College information, suggests that all participants were likely to have identified as female except one transgender student. In two workshops facilitators' notes made observations that participants were "predominantly White British."

The one-hour workshops were built into the college's existing timetables. Workshop content was delivered via a mixed methodology including PowerPoint of images and key facts, films, presentation from the facilitators, small group discussions and whole-workshop group discussions. Each workshop was facilitated by two OAC members of staff, and most were observed by a member of staff from the respective college. All workshops were delivered by Dot Pritchard, Project Coordinator, an experienced facilitator in her early 20s, together with Nesreen Yanni, Facilitator and Paediatrician from the Egyptian community or Lena El-hindi, Community Outreach Director and representative of the Oxford Sudanese community.

Facilitators took notes from each session (see Appendix Three for detailed notes), which enabled the OAC team to build learning from delivery into each subsequent session. For example, in the first workshop, sexting seemed to be a big issue for students, so OAC adapted the material to include some brief learning about sexting in the following workshops. In the third workshop, the facilitator addressed the “embarrassment level” at the beginning of the session, following feedback from workshop two.

The facilitator notes also provided “overall comments” at the end of the eight workshops, noting that “A longer session may work better - an hour and 30 minutes. Students seemed to have more knowledge about the topics covered in the first half of the session, for example, social media and body image. The second half of the session on FGM and FCGS could be longer. Most students across all 8 workshops had not heard of/fully aware of FGM or FCGS. Even if they had heard of them, they did not know much, if anything, about the reasons, harms, law etc.”

OAC facilitators preparing to deliver workshops:



Results:

Students were asked to complete a survey at the end of each workshop. 68 surveys were returned (see Appendix One for a sample survey). The College recommended that OAC collect simple feedback, for example, “what did you like?” and “what didn’t you like?” in line with their standard practice. OAC therefore created a short survey which asked four qualitative questions with space for students to write their comments. This means there

was no quantitative data to analyse, for example of students' perceptions of whether their knowledge or understanding had improved as a result of the workshop. A mix of quantitative and qualitative questions may be useful to include in future surveys. Qualitative answers were coded for analysis purposes.

The workshops clearly had a positive impact on the students who participated in them.

When asked "what did you learn?":

- 82% (56 students) gave an answer that referenced learning related to FGM. For example:
 - "I learnt about FGM, what it is, where it happens, why it happens"
 - "The amount of FGM that goes on in the UK"
 - "The effects of FGM, and the types"
- 19% (13 students) gave an answer that referenced learning around female genital surgery. For example:
 - "That people choose to have their vagina changed because of society's views"
 - "Female genital cosmetic surgery is just as bad as FGM"
 - "That having surgery isn't OK"
- 12% (8 students) gave an answer that referenced learning around body positivity or confidence. For example:
 - "How to be comfortable with our bodies"
 - "To be confident with my body"
 - "I learnt that you should be proud of your body and it does not matter what others think"
- 7% (5 students) gave an answer that referenced learning related to female genitalia. For example:
 - "More about female genitalia in general"
 - "Vaginas are very different"
- 1% (1 student) gave an answer that referenced learning related to relationships.

When asked "what did you like?", answers related to the group discussions and learning about the information and facts were most common:

- 41% gave an answer related to the group discussions, for example:
 - "Learning other people's opinions"
 - "It opened some taboo topics among girls"
 - "Discussing topics like sex and the female body"
- 41% gave an answer related to information and facts learnt, for example:
 - "The facts as I thought they were interesting"
 - "It was very informative, will help me in my profession"
 - "Details and facts on the topics"

- 24% specifically mentioned the videos and/or the PowerPoint
 - “Interesting videos and PowerPoints”
 - “The videos helped”
- 18% gave an answer that referenced the way the information was presented, for example:
 - “The ice breaker was good”
 - “The ladies talked about it really well they were casual but serious”
 - “How relaxed it was and the atmosphere”
- 10% gave an answer that referenced body positivity. For example:
 - “Knowing that everyone is different, body confidence”
 - “The positive messages about women and their bodies”
- 3% mentioned the songs
- 1% mentioned healthy relationships.

When asked “what should we change?” there appears to have been a misinterpretation by a small proportion of the students (13%), who understood the question to mean what should we, as society, change? The answers are nonetheless insightful:

- 29% did not answer the question
- 40% said nothing or were unsure
- 15% gave a specific suggestion, which included:
 - Longer or more videos
 - Less talking, less reading from the board
 - Using case studies and real-life stories
 - More discussion
 - Games to help remember information
 - More about social media and relationships
 - More information about males
- 13% made more generic points about what needs to change more broadly in relation to these topics, which included:
 - “Should be spoken about with more people to eventually get it more known”
 - “Find a way to get people to talk more”
 - “Shaming people”
 - “Speak up a bit and be confident and proud on what you're saying and talk more about the media and pornography”
 - “Be open and speak up”
 - “Spread the campaign around the world”
 - “Make it more known”
 - “Don’t peer pressure”
 - The stereotypes and stop FGM being a taboo”.

Finally, students were given an opportunity to add other comments, which 16% chose to. These included:

- “It was interesting”
- “Very informative and interesting”
- “I never knew there was something called FGM and I really learnt something”
- “Very confident in talking about this, makes me feel more confident talking about it 😊”
- “Very informative”
- “Good at teaching us about this. Love group discussions and gave us freedom of speech”
- “Was really helpful at getting a better understanding of FGM”
- “Both lovely and learnt a lot”
- “Was a very useful and new topic to learn about, could be very beneficial”
- “Really good. Learnt a lot. Thanks 😊”

Below the findings are broken down by intended outcome to demonstrate the specific impact of the workshops.

Project outcome	Evidence of success
Ensure understanding of the names/function of the female genitalia	Content related to this is evident in the lesson plan and PowerPoint and 7% (5 students) said they had learnt something about female genitalia. Students were not asked specifically if their knowledge of names and function of female genitalia was increased as a result of the workshop, so there may have been a higher proportion of students who benefitted from this aspect of the content.
Improve understanding of the cultural influences behind FGM and female cosmetic genital surgery (FCGS)	Some of the students’ feedback suggests that understanding of the cultural influences behind FGM and FGCS was improved. A high number of students (86%) reported that they had learnt about FGM, while just 19% reported that they had learnt about FCGS. This may reflect the baseline levels of knowledge, as some students commented that they had not heard of FGM or knew very little about it prior to the workshop. This is backed up by ‘overall feedback’ from the facilitators, which notes “Most students across all 8 workshops had not heard of/fully aware of FGM or FCGS. Even if they had heard of them, they did not know much, if anything, about the reasons, harms, law etc.”

<p>Improve understanding of genital alteration in the context of gender equality</p>	<p>There is only one comment in the feedback which suggests understanding around this was improved: “that people choose to have their vagina changed because of society’s views”. However the positioning of both FGM and FGCS within a body image framework seems to have resulted in positive and free-flowing discussion about a number of related issues, which may help ‘normalise’ discussion of FGM among young people from all communities</p>
<p>Increase confidence in talking to a friend or trusted adult about concerns</p>	<p>A number (41%) of students said they enjoyed the discussions and hearing others’ opinions around these topics. This in itself could contribute to increased confidence in talking about concerns, however there is little directly relevant data to demonstrate this.</p>
<p>Increase knowledge of where to get help.</p>	<p>Although no feedback suggested this was a helpful part of the workshop, the PowerPoint presentation includes a slide on ‘your support’, listing the names, photos and job titles of support staff at each college. Example posters on another slide give contact details of Childline, NSPCC, Oxfordshire Multi-agency Safeguarding Hub, Oxfordshire Domestic Abuse Helpline and Oxford Rose Clinic though perhaps these could be more prominently displayed in larger print. The OAC team also took leaflets about services to every workshop for the students to take away.</p>

Additional feedback from two observing teachers/support staff was provided in the facilitator’s notes:

A Salon Technician from the Hair, Beauty and Makeup Department who observed a session commented that "I thought the workshop was brilliant. I really enjoyed it and it is really valuable for students to learn about this, especially social media. The FGM section was really interesting".

“A teacher who observed the workshop said that she was really impressed, finding the session extremely informative. She mentioned that they may be interested in booking some extra sessions.”

Workshop to create song

OAC organised an event with the OAC Youth Wing on FGM which resulted in young people writing a song called 'For Every Girl' to highlight harmful cultural practices³⁰. The lyrics can be found in Appendix Four and the song was performed live at Womanity, an Oxford music festival organised by Young Women's Music Project. The group have also made a professional recording of the song and plan to create a music video.

OAC's Director reports that this activity increased the confidence of the young people involved in communicating about FGM.

7. Summary of key findings

- There are **very limited formal teaching resources available on the natural function and appearance of female genitalia**. While there are resources available (mainly online) that focus on celebrating and understanding female genitals, this does not appear to have translated into classroom resources outside a focus on FGM.
- OAC's positioning of FGM and FCGS within a framework of body image has helped to **improve knowledge of both issues and understanding of the gendered pressure women and girls from all communities experience**.
- The project consultation with professionals and young people at Cherwell School was clearly used to inform the development and content of the body image workshops, meaning that it was **relevant to young people and the context**.
- The workshops were well attended, with a **total of 74 young people reached**.
- Workshops were designed in a way that maximised the opportunities for young people to feel **more confident discussing these topics** and start normalising 'taboo' subjects. Group discussions were a key benefit identified by the participants (41% commented that this was what they enjoyed).
- A primary outcome of the workshops was **increased knowledge of FGM**, with 86% of students saying they had learnt about FGM. The fact that far fewer students (19%) said they had learnt about FCGS suggests that the knowledge gap between the two issues was large to start with, with baseline knowledge of FGM being much lower than FCGS, or that the workshop content on FGM simply had greater impact.
- Measuring other planned outcomes was a challenge due to the lack of data or evidence gathered directly relevant to the outcomes. However, there is evidence to suggest **some progress was made in relation to all planned outcomes**.
- **Some students referenced the content on body image and positivity as being beneficial** (12% said they felt they had learnt something about body positivity and 10% said they liked the body positivity aspects of the workshops). However, it is difficult to assess the impact of integrating content on FGM and FCGS on how young

³⁰ The music project initially identified as a possible song-writer was unable to participate in the project for capacity reasons.

people view body image, or whether using a lens of body image made it easier, or more impactful, to discuss FGM and FCGS. Certainly, there was no feedback that suggests discussing the two together was confusing or challenging in any way.

- **Time restrictions may have meant there was limited opportunity to explore the content in any great detail.** As the facilitator comments noted: “A longer session may work better - an hour and 30 minutes... The second half of the session on FGM and FCGS could be longer.”

8. Recommendations

Content

- Continue to pilot the delivery of ‘body image’ themed workshops to improve understanding and knowledge of FGM and FCGS and develop monitoring tools to assess the impact of addressing both topics together
- Build on young people’s enthusiasm for change around these topics by offering follow up opportunities to engage in awareness-raising and campaigning work
- Ensure support options are clearly signposted and information provided in accessible formats
- Consider the addition of content relevant to trans and non-binary young people.

Delivery

- Consider the development of a series of workshops that provide more time and opportunity to learn about FGM within the body image framework and to benefit from the unique opportunity for peer discussion the workshops offer
- Consider what ongoing support is required by schools to ensure young people can access appropriate support and advice, and that the workshop programme is delivered within a ‘whole school’ approach which ensures school culture, staff and policy is prepared to maximise the results of the workshop discussions
- Continue to deliver workshops as ‘external experts’, with the support of / participation by a school staff member.

Target audience

- The original target audience for the project was Year 8 students (ages 12 and 13) to take into account the age when many young people start to be exposed to pornography and the youngest age girls request cosmetic genital surgery.³¹ While the sixth form age participants clearly benefitted from the workshops, the project may want to develop adapted content for different age groups. The facilitators and College believe that all the students in the workshops identified as female (except

³¹ These observations came from OAC’s discussions with the medics team and the PSHE Teacher. The PSHE Teacher commented that most students in her classes of year 8 students had seen exploitative porn.

one transgender student) and the College confirmed that there are very few male students who take up these courses. It will be helpful to trial the programme for boys and young men, or in mixed groups.

Evaluation

- Include more outcome-specific questions using a combination of closed / multiple choice and open questions to aid future programme evaluation
- Include a question on the usefulness of discussing FGM and FGCS together to continue to evaluate the impact of this approach.

9. Acknowledgements

OAC would like to thank the following colleagues for their early input into this project:

Doctors from Oxford University Hospitals NHS Foundation Trust:

- Dr Brenda Kelly, Director and Founder of the Oxford Rose Clinic, Consultant Obstetrician and Subspecialist in Fetal Medicine, John Radcliffe Hospital
- Neda Taghinejadi , Trainee Doctor, North Middlesex University Hospital NHS Trust
- Eleanor Holloway, Specialty Doctor in Sexual Health, Psychosexual Therapist (COSRT Accredited), Clinical Assistant in Gynaecology (Pelvic Pain)
- Annabel Forsythe, Consultant Community Sexual and Reproductive Health Doctor

With thanks also to Rae Hancock at Cherwell School, Leader for Social Wellbeing (PSHE) and KS3 Religious Studies, Inclusion and LGBT Champion, Chartered Teacher of PSHE.

10. Appendices

Appendix 1: Sample Survey

Feedback on Training:

1. What did you learn?
2. What did you like?
3. What should we change?
4. Please add any other comments you would like to make:

Like what we do?

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@OAgainstCutting



Appendix 2: Cherwell School Consultation Report

Cherwell Meeting 21/9/18

Students present: 9

Demographics

What is your age?

16	3
17	5
18	1

i.e. all 16-18

How would you describe your gender?

Female	8
Male (technically written 'masculine')	1

How would you describe your ethnic origin?

White British	III
Mixed/multiple ethnic groups	I 'Very mixed'
Asian/Asian British	II 'British Asian' + 'White Asian'
Black/African/Caribbean/Black British	II 'White-Black Caribbean' + 'Sudanese'
Other ethnic group	I 'British, Solomon Islander'

Female genitals – appearance and function

Have you ever received any teaching on the appearance of external female genitals ('what is between a girl's legs')?

Yes	4 (44%)	Where? OAC meeting x 2 / Primary school x2
No	3 (33%)	Who? Project manager/primary school teacher/school nurse/external teacher
Not sure	2 (22%)	When? Year 5 x 2/ Year 8 x 2 Useful/Not useful? Useful x 3 Not sure if useful x 1
<p>'It made me more comfortable but not memorable'</p> <p>'They spoke about puberty etc – first education I had about it'</p>		

Have you ever received any teaching on how the external female genitals change during arousal and sex?

Yes	0 (0%)
No	8 (89%)
Not sure	1 (11%)

Students brought up the need to know about normal variety in genital appearance:

- *'people should know that it's not always pretty or something, they should know that it can be normal to look different'*
- *'even now talking about the appearance I'm self-conscious about razor blade bumps and stuff. If they showed or discussed that more I would be like, ok maybe it's not so bad, I wouldn't think I was the only one'*
- *'I've only ever seen white vaginas growing up. But I feel like 'what about mine''*

Students brought up some of the negative information represented in pornography and social media:

- *'porn gives such a bad representation of women. I thought I was so weird because my labia didn't look like a porn stars because it wasn't all plain and I was like maybe I'm the weirdest women in the world. They need to know there's different things out there not just porn. Same for the boys. Social media can be positive to tell us about what's normal too'*
- *'in school there's a lot of emphasis on the biological side and it's all diagrams of labels and all this stuff so you become intrigued as a young person but then you go to the wrong place for answer. There's not a place in school that you can find out, so you go to another place to find out (pornography)'*

Students brought up lack of understanding about genital function

- *'we should talk about things like periods and discharge'*
- *'people assume that body positive is just about what you look like, but its other stuff too like using it'*
- *'I feel like maybe not also talking about what to do with genitals (not just appearance) like masturbating, because for women it's just so taboo'*

And in particular about vaginal size/relation of size to sex

- *'people talk about girls like she's so loose'*
- *'I've read about anatomy and muscles and how things change and can get bigger and smaller. But lots of

boys talk about 'oh it wouldn't fit inside' and I think were you doing something wrong then?'*

Male genitals – appearance and function

Have you ever received any teaching on the appearance of male genitals ('what is between a boy's legs')?

Yes	6 (67%)	Where? School x 2/Form time in school x 1/Primary school x 1/PSHCE X 1/Oxford City College x 1 Who? Teacher/biology teacher x 2/social science teacher/form tutor/ year 5 primary school teacher When? Year 5, year 7/8 (x2), year 8, year 5, year 11 Useful/Not useful? Useful x 2 Not useful x 4
No	2 (22%)	
Not sure	1 (11%)	
'useful but not complete' 'kinda useful don't remember much' 'not very useful – again too young' 'not useful/vague'		

Have you ever received any teaching on how the male external genitals change during sex?

Yes	3 (33%)	Where? School x 2/primary school x1
No	5 (56%)	
Not sure	1 (11%)	Who? Biology teacher/science

		teacher/year 5 primary school teacher When? Year 5, year 7/8, year 8 Useful/Not useful? Useful x 1 Not useful x 2
'not really [useful] – only on a biological level'		

Students brought up lack of teaching about variation in penis size

- *'I feel like we maybe did it in year 8, briefly. It made me more curious about things so I did search it up, but I feel like he could have explained things better. He said things like penises come in different shapes and sizes etc, but he didn't give us any advice when people were asking does it matter how big it is'*
- *[regarding penis size] 'I think telling you to search it up is the worst thing ever because of what's on the internet and social media'*
- *'a lot of guys first find things with porn, and porn is such an unrealistic idea of what sex is.'*

Female genital mutilation Do you understand what is meant by the terms female genital mutilation/ female genital cutting/ female circumcision?

Yes	5 (55%)
No	3 (33%)
Not sure	1 (11%)

Have you ever received any teaching on female genital cutting?

Yes	4 (44%)	Where? OAC meeting x2/citizenship fair/PSHCE
No	5 (55%)	Who? Project manager (OAC)/external speaker (OAC)/PSHCE teacher/other peers (Citizenship fair)
Not sure	0 (0%)	?/year 8 (x2)/year 8/9 Useful/Not useful? Useful x 3 Unsure if useful x 1

Regarding how students came across the practice of FGM:

- *'we have received teaching from Oxford against cutting'*
- *'there's a poster about it in the school'*
- *'I've heard about it on social media like twitter'*
- *'I've seen the poster too but I don't know the ins and outs'*
- *'I was doing work experience in Oxfam and I knew that FGM was something that affected women from that. That was my own personal interest but other people wouldn't find out'*
- *'I learnt about it from a citizenship fair too, when some other students did topics about it. I was like wow these year 9s are teaching me so much. but it should be in a lesson not from other students'*

Delivery of teaching

Who would you prefer to deliver teaching on appearance and function of genitals?

(for example a biology teacher, PSHCE teacher, external speaker, school nurse, doctor...)

- Mixture of all
- PSHCE teacher

- All of the above in order to gain an all-round knowledge both biologically and emotionally
- External speaker, school nurse (PSHCE teacher)
- External speaker/school nurse
- PSHCE teacher or school nurse
- External speaker/doctor
- Biology teacher + PSHCE teacher

The students qualified their different views on who would be good to teach on this subject in the focus group

- *'they [science teachers] teach you for exams and not for life'*
- *'I think it just biology teachers taught it would be too formal. So I think it would be good to have a school nurse or something'*
- *'PSHCE teachers would be the best at it because they wanna teach you about life not exams'*
- *'My answer would be all of the above because that would be good for all round knowledge. Not just like infections, but also the emotional side. We shouldn't minimize this to just body parts – it has to have more layers than that'*
- *'I would never have asked any question to my teachers about this'*
- *'I think we should have teachers in school who can do it so we can feel comfortable asking them instead of waiting for someone to come back and teach us or answer our questions'*
- *'there should be someone that you know you can talk to after the session'*
- *'Someone more experience like external, but there needs to be someone internal too'*
- *'it should be everyone who teaches us, I don't think it should have to be young people, everyone should be comfortable'*
- *'I think it shouldn't be girls only, we should have boys and girls teaching us'*
- *if a biology teacher was to speak/teach about genitals I feel like it would make it too 'biological', formal, an external speaker/nurse helps it more neutral + relaxed'*

Regarding timing of teaching/year groups...

- *'I think It's better to have it over a period of time rather than one off'*
- *'I agree, I think it would make it more normal rather than a random thing'*
- *'It's such a big topic I think it's too hard to do in an hour. If was taught again or people were coming back it would be better'*
- *'I think you need to keep it going. Cause the difference in what genitals are in year 8 is different to year 12. It changes so much, I know it's different for everyone but the lessons need to follow how we grow up'*
- *'I think it should be all over the years and start early'*

- *'I think year 8 is a good time to start it but because everyone develops differently you would want to do it later too when people have matured a bit'*

Other recommendations for delivery of the session

- *'If you let them sit with their friends (lie they have by year 8) you might get more silly questions but at least they are talking not sat in silence (As opposed to planed seating)'*
- *'I think if its more relaxed or sociable it would be better'*
- *'What we should bare in mind as well is there are issues around safeguarding and ensuring that it is definitely a safe place for those discussions to happen. It needs to be enforced that its normal and I'm a safe person to talk to. Children can be quite vulnerable in that aspect and be taken advantage of'*
- *'they should also say that different levels of understanding are normal, like there are loads of virgins in our year and that's ok'*
- *'I feel like whoever is teaching they should be kinda 'silly' about it, not too serious'*

Many felt that having older students present or even involved in the teaching would be helpful...

- *'I think it would make a big difference and make it more comfortable'*
- *'It's nice to have us there so they know who we are and they can talk to us'*

Would you prefer to have teaching on these topics in a mixed class or separate boys and girls' classes?

Separate	0 (0%)
Mixed	6 (67%)
Don't mind	3 (33%)

Additional Comments

Regarding the importance of providing teaching on these subjects in general

- *'I think it's important because we're not really taught it'*
- *'Sometimes people say it should be something you learn at home, but sometimes people don't get that, so getting it in both environments is quite important'*
- *'My friend is in year 8 and I couldn't imagine him talking to his mum, so I think people like him need helping'*
- *'I think it's a problem lower down in the year. I was told in front of the whole group that I was meant to go here when I went to social wellbeing teaching accidentally, and everyone laughed. Why did they all laugh? It shouldn't be embarrassing. It's not a good example for the younger students'*
- *'I was taught at home and was uncomfortable to discuss. I think it should be home and school together'*
- *'I think teachers are not comfortable talking about it'*
- *'We should be taught in schools what genitals look like so that we don't have to search ourselves'*

Regarding pornography

- *'I think boys go to it and don't get an accurate representation of what things look like. You can do whatever you want but if it's your only view of what sex is it's more damaging'*
- *'I think more boys watch it, or more boys are more open about watching it. And I think boys do use it as a guideline for how to have sex, like boys in our year who say I watched porn before I had sex to see what I was going to do'*
- *'the younger don't know the real from fake in porn'*

Regarding social media

- *'but people shouldn't have to go to social media, we should have lessons'* Regarding pubic hair
- *'It [porn] is unrealistic like we all have pubic hair. Remember in younger years of school we all started to get hair and people would be like OMG they have hair'*
- *'I was so scared when I got my first hair on my armpit I screamed to my mum.'* Regarding consent
- *'kids might get the wrong idea and that can go down a bad road and uncomfortable one. I remember being on south site and boys would touch your bum in science lessons but I wasn't taught like don't do that, when really I was like what the hell.'*
- *'we don't want to get to a point where we forget about consent'*
- *'we never learnt about consent when we were younger'*
- *'when I was in year 8 there was so much pressure about being sexual, but we weren't learning it from teachers or good sources where they said what was ok or about*

consent. It would have been so much better to learn it from someone properly instead.'

- *'If there was someone who taught us about that stuff [consent] or we regularly had lessons I think girls would change the way they behave or what they think is normal'*
- *'I think for consent there needs to be an emphasis on just because they didn't say no didn't mean they said yes. I watched a video and this woman was like not only is it like normal to say are you sure you wanna do this but its only kind of sexy. It's not just like I have to ask, but keep asking them during whatever you are doing cause it's not just good it's also sexy.'*
- *'When we are told about consent it's just about sex but they should emphasise its for everything too, like if you don't want to touch you. And I think that's more relevant to year 8'*
- *'in a party environment it's hard to say like you haven't asked my consent, and it's a weird power dynamic' Regarding sex*
- *'I think boys need to be taught that if a girl wants to have sex it doesn't mean she's a slut. There are all so many judgments and they all contradict each other and t doesn't make sense'*
- *'there's always been a double standard, the girl can never really win I suppose. You're either this or you're this and both of them are bad.'*
- *'I think there's a big social construct on body counts in this society. Like if your body count is too high you're a slag. But with men if they have 50 body counts they're like yeahhh. But for a girl if its high then it's a really bad thing'*
- *'it's such a crazy thing to me, 'oh I had sex with her' and it's like mate, she had sex with you too'*
- *'when they're like oh I had sex with her, its like no you finished and she didn't, she had sex with you, you didn't have sex with her. Maybe if you teach about this stuff these stigmas will go away'*
- *'I feel like no one ever talks about different types of sex. Like its always penis vagina'*
- *'I started dating a girl a few months ago and everyone kept asking me like how do you have sex. And I was like there are so many different types of sex'*

Regarding parental permission

- *'I think it would depend on your culture and religions cause people have different perspectives'*
- *'if I told my mum oh I learn how to use this position at school she would be like what, but I feel like this age, you would have found out anyway'*
- *'families are in denial, cause its either that or on porn'*
- *'would they [parents] rather you found out in a lesson or online though...'*
- *'it's a generational thing for sure'*

- *'it's better than being taught the right thing than learning at home or being isolated. At least they get taught about it so they know what to do or how to do it or I'm gonna cover my eyes until I'm married or something.'*
- *'There's an age thing as well because when you're 16 it's legal to have sex so people think you have to go and do it'*
- *'in primary school when we got taught stuff we had to take a letter and parents could say no'*
- *'it's ridiculous it should be on the curriculum'*
- *'I don't know what will happen if I tell mum that I learnt in school'*

Appendix 3: Facilitator workshop notes

Workshop 1 - Witney

There were 11 students, predominantly white British (from observation) and they were Social Care students in their second year of studies, aged 17-18, based at Witney campus.

During the small group discussions, one group commented that it is a social expectation that intimate partners swap "nudes" i.e. photographs of their genitalia and if a girl doesn't do this, the boy will tell everyone that she's "frigid". When the partners break up, boys often shame the girls saying their genitals are "too loose/too tight/not shaved etc" and the girls feel that basically they will be shamed however their genitals appear.

As sexting seemed to be a key issue in this group, OAC adapted the material to include some brief learning about sexting in the following workshops - that young people need to consider that pressure to send nudes is not the behaviour of a caring partner/ that this is a pressure from society and they need to consider whether they agree with everything that some social groups think they should do/ that they have no control over what happens to the image once they share it and if an image is posted on the internet, it is likely to be there forever or extremely difficult to delete.

The team also requested feedback from the facilitator about facilitation style and what works best with dynamics in the various student groups. She also gave us information about the likely existing knowledge and best starting points for each group. The facilitator also commented that it was really helpful to have external facilitators deliver this sensitive material and felt the students engaged well with us as "experts".

After the session the facilitators met to discuss changes to the material, for example, including an additional group exercise.

Workshop 2 - Abingdon

There were 9 students. They were hair and beauty students, level 1 aged 17, based at Abingdon campus.

The group was quite timid and did not offer answers to questions/contribution to discussions without lots of encouragement.

This session was made more interactive than the last, with lots of group discussion. Facilitators gave students flip chart paper with questions written on - this worked well as

students were able to refer to the points they had written down when feeding back to the whole group.

At the beginning of the session, one of the girls mentioned that she wanted a 'butt enlargement'. It was apparent that she had never considered the harms that this surgery could have on her body, nor had she thought about the social pressures that may be influencing her decision. Throughout the session facilitators discussed some of these potential factors, such as social pressure to look the same as the photos on Instagram. Having first insisted that it was not important to talk about our bodies and our genitalia, after further discussion/facilitation the girl soon decided that "women should have started talking about this a long time ago!".

The same girl refused to feedback to the whole group on a small group discussion (despite having been quite vocal during the discussion) but then decided she did want to feedback once Dot started to do so.

During one of the group discussions students discussed the 'do's and don'ts' of sexual relations. This was a response to the complaint by young people that there is not enough material on the web showing realistic sex and that sex is increasingly influenced by pornography. Groups discussed the importance of communication, trust, safety and not doing anything that you don't want to do.

Dot gave a brief overview of FGM, then Nesreen gave a medical overview of FCGM, explaining what it is and some of the harms that it can cause, such as reduction in sexual pleasure (despite trying to achieve the opposite). This section highlighted that the reasons and harms are similar for the two practices. Due to the timid nature of the group, it was difficult to get a good idea of how much the students already knew about either topic prior to the session.

Workshop 3 - Abingdon

There were 7 hair and beauty students for the third session.

The discussion on 'do's and don'ts' of healthy sexual relations was particularly thought provoking for the girls. We discussed the importance of communication within relationships and it was noted that men tend to speak more openly and confidently about what they do and don't like. One girl noted that if she ever text her boyfriend to tell him what she did/didn't like, he would be 'confused as to why she was telling him', as if her feelings did not matter.

The girls also noted that if they decided to have multiple sexual partners at one time then they would be called sluts, slags and whores. However, if the boys had multiple sexual partners then they would often be praised for their actions and called 'lads'. The girls recognised that these attitudes are deeply embedded in society. This discussion also touched on topics of control and abuse within relationships. Had we not been under time constraints, I think it would have been beneficial to have spent longer on this section of the workshop.

Following feedback from workshop 2, Dot addressed the 'embarrassment level' at the beginning of the session, noting that it is completely normal to feel embarrassed when discussing topics such as female genitalia. One girl was particularly giggly throughout the session, and often made comments such as, 'oh my god this is so awkward' - the other girls seemed a little less affected by the topics discussed.

Kate spoke to Ellie Dorward, Salon Technician: Hair, Beauty and Makeup Department who observed this session (delivered by Dot and Lena) and she commented that "I thought the workshop was brilliant. I really enjoyed it and it is really valuable for students to learn about this, especially social media. The FGM section was really interesting".

Workshop 4 - Abingdon

There were 7 Health and Social care students in this session - predominantly white British (from observation). They were in their first year of studies (17 years old) based at the Abingdon campus.

Today's session incorporated photos showing how makeup, airbrushing and certain angles can make a big difference to how someone looks in a photo. Facilitators explained to students that these 'techniques' are very often used in different forms of media - social media, TV, magazines, etc. This section of the workshop aimed to highlight that media is often an unrealistic representation of real life and therefore it is unrealistic to expect us to look that 'curvy, skinny, flawless, etc' in real life.

This group was extremely quiet at the beginning - when asked to do an icebreaker everyone stayed silent. The students warmed up during the group discussions and by the end were more confident in participating and feeding ideas back to the whole group.

Workshop 5 - Abingdon

There were 7 students in this session, studying hair and beauty.

Most of the group were keen to engage in conversation and discussion throughout the workshop. For one of the group discussions students were in small groups of 2 or 3 (due to the low numbers) - the students came up with some well thought out answers and fed back that they 'enjoyed discussing topics as a group'. One table of 5 students (2 groups) said that they felt body hair was natural and normal, noting that it is 'there for a reason' - they felt that we should not be pressured to remove it.

During the second part of the workshop facilitators discussed female genital surgery and female genital mutilation. Only one girl in the class had heard of female cosmetic genital surgery, and some had not heard of female genital mutilation.

Workshop 6 - Witney

Witney - 15 students. Year 1 level 3.

A really engaged, lively group. The icebreaker was popular and really helpful for getting the group warmed up. During the group discussions the students were keen to get involved and contribute their ideas, coming up with well thought out points.

Emma, the teacher who observed the workshop said that she was really impressed, finding the session extremely informative. She mentioned that they may be interested in booking some extra sessions.

Most of the group had heard of FGM before, but they were shocked to hear that the prevalence was so high in the UK.

This was the largest session that had been run for the body image workshops, and facilitators felt that having a slightly larger group was beneficial for the session, as there were more people to contribute to group discussions (5 per group, compared to 2 per group in some previous sessions), but still small enough that facilitators were able to walk around and talk to all groups.

Workshop 7 - Abingdon

11 health and social care students. 17 - 18 years old.

The group started off quite timid with only one student contributing to the icebreaker, however, the first group discussion allowed them to shift some embarrassment as they started talking about bodies and genitalia. One group had the question 'what do you think female genitalia should look like?' The students approached this question by thinking about what they think genitalia should look like, and comparing this to what men and society think

they should look like. This gave an indication that the girls were aware of the pressures put on them by society.

The teacher who sat in on the session contributed to the session by sharing that some of her married friends will not go out without makeup on when they are with their husbands, because they feel self-conscious/ fear 'not looking attractive/good enough'. Facilitators discussed with the group how it can be easy to feel pressured to look or act a certain way, especially when platforms such as social media promote a specific type of image. Facilitators explained that we are all beautiful and unique in our own ways and do not need to conform to these pressures.

Only one of the students in the session had heard of FGM before.

Workshop 8 – Witney

7 students, all hair and beauty.

Brainstorming questions like 'why is it important to talk about our bodies and genitalia' provoked the girls' thinking. They noted that boys tend to talk about their genitalia a bit more than girls – it's less of a 'taboo' subject to men. They then noted that by talking more about the female body and genitalia, we can 'normalise' the conversation.

Another group brainstormed the question, 'what do you think female genitals should look like? Where have these ideas come from?' The girls noted that boys usually say that they want female genitals to be 'neat', 'tidy' and 'tight'. One of the girls noted that 'boys think the vulva/vagina is there purely for them' – they forget that it is also designed for other functions like menstruation and having a baby. One girl exclaimed 'it's not supposed to be pretty, it's for delivering babies!'

The girls also spoke about how girls are sometimes called either 'tight' or 'loose', depending on how many sexual partners they have had. The girls noted that this was a myth and that intercourse does not make a vagina bigger or 'looser'.

None of the girls had ever heard of FGM or female cosmetic genital surgery before. Facilitators explained what each were to the group and spoke about some of the reasons why they happen and the harms caused – highlighting the similarities. As they were all so new to the subject, longer could have been spent introducing the topic at a slower pace, with time to give the group a deeper understanding of the practice.

Overall comments:

A longer session may work better - an hour and 30 minutes. Students seemed to have more knowledge about the topics covered in the first half of the session, for example, social media and body image. The second half of the session on FGM and FCGS could be longer. Most students across all 8 workshops had not heard of/fully aware of FGM or FCGS. Even if they had heard of them, they did not know much, if anything, about the reasons, harms, law etc.

Appendix 4: FGM Song Lyrics

Chorus:

*Don't punish us for being free
Don't force on us what others see
Don't steal our childhood in a day
For your views we shouldn't have to pay*

Verse 1:

*200 million girls, 200 million souls
200 million stories to be told
Broken glass and razor blades
Cold water, the pain will never fade*

*Lure me in with prayers and gifts
Then bless me with a lovely kiss
You've trapped me in a life of pain
Disguised in trips and aeroplanes*

*And your burning stones strapped to my chest
Are for your men and not for my best
So speak out loud for your rights and pride
And for ever girl who's hurt and cried*

Verse 2:

*Waking up and seeing red
You're never safe, not your home your bed
And on the nights you cannot sleep
It feels there's nothing left to keep*

*Women shouldn't have to live
As those who take but never give
Dictate their bodies should be used
For practice meaningless unproved*