

**LEARNING VISIT REPORT**  
**Africa Advocacy Foundation (AAF) 13075**

<b>1.1 Date of visit:</b> August 3 <sup>rd</sup> 2017	<b>1.2 Name of visiting Grants Officer:</b> Kate Moralee	<b>1.3 People met with:</b>
<b>1.4 Programme Area &amp; Outcomes:</b> Improving Londoners' Mental Health More refugees and asylum seekers experiencing trauma, grief and loss accessing mental health services resulting in improved mental health		
<b>1.5 Purpose of the award:</b> £106,500 over three years towards a project supporting young women in addressing the psychological impact of female genital mutilation.		
<b>MONITORING INFORMATION</b>		
<b>2.1 Project Outcome 1:</b> 200 confident young women experiencing improved mental health and able to deal with the terrible physical, emotional and psychological effects of FGM <b>Progress made:</b> To date over 75 young women have accessed the service and all have either reported or been assessed as having improved confidence. With your funding 34 young women accessed 1:1 counselling and displayed complexity of need and trauma disorder, measurement of improved confidence was stronger for this cohort. 3 women who were previously involved in the mental health care system have been supported to live independently and are positively transitioning into adulthood. With your funding therapeutic creative and arts activities (drama, poetry, art and music sessions) have been delivered and these have helped the young women to overcome emotional barriers whilst bringing a sense of fun and relaxation.		
<b>2.2 Project Outcome 2:</b> At least 90% of the beneficiaries experiencing less isolation; openly sharing their experiences and actively involved in peer support networks and community life <b>Progress made:</b> When accessing the services supported with your funding most of the young women who knew they had undergone FGM confided they felt shame to discuss their experience openly and self-medicated in cases of infection. Having participated in activities and counselling many of these women have become more assertive, requesting to speak to a female doctor and actively challenging FGM practices in public. At least 80% of the beneficiaries have reported feeling safe and have improved social interactions and reduced isolation due to peer mentoring, group therapy activities and friendships developed on the programme. Despite the challenges and stigma within families and communities some young women have deliberately raised the topic with their families, Imams, pastors and community leaders. This has resulted in better relationships, family members attending family events and some parents supporting the programme.		

### **2.3 Project Outcome 3:**

Over 90% of beneficiaries exhibiting increased resilience and confidence levels on rights, needs, choices and actively advocating for self and others in similar situations

#### **Progress made:**

With your funding many of the young women have trained as champions giving presentations at school, talking to other young women and even reporting any risks they perceive. Many of the young women have confirmed that they would report their parents if they knew they were planning for their siblings to undergo FGM and feel able to stand up for themselves or report cases of coercion. Your funding provided support for young women to be more knowledgeable about the law their rights and available support. This has enabled over 90% of programme participants to feel comfortable discussing FGM related issues within their families and communities.

### **2.4 Project Outcome 4:**

Increased awareness and understanding of the mental health effects of FGM as well as beneficiaries faith, cultural, language needs among frontline professionals and the existence of coordinated and appropriate services for victims of FGM

#### **Progress made:**

AAF works with a number of agencies, networks and forums to raise awareness of the mental health effects and impact of FGM and advocate for the improvement of services to women who have experienced FGM. The organisation is Vice Chair of Violence Against Women and Girls Lewisham and on the steering of the FGM working group in Southwark, which is hosted by the CCG. AAF has been key in terms of supporting the development guidance framework for professionals in Adult and Children's services. AAF also works with Children and Adult Mental Health services as they do not appear to have specialist FGM support in place. Those referrals made by AAF to CAMHs are actually redirected back to AAF. This is an important area of work moving forward. AAF is working with Local Authorities to strengthen referrals, increase the risk of detection prevention and support. It also provides over-arching training on inter-cultural competencies to frontline professionals in education, health, police and social care. Your funding has enabled AAF to collect strong evidence and data on the number of FGM cases which contributes to National data collected through the National Initiative on FGM.

### **2.5 Project Outcome 5:**

Over 40% beneficiaries accessing training, work experience and employment opportunities leading to better life chances, economic status and health outcomes.

#### **Progress made:**

Your grant has enabled 14 of the young women to access skills training and 3 to gain retail employment. The project recruited and trained 27 Community Champions who shadowed and learned from experienced volunteers already involved in AAF community programmes. This has enabled an expansion of work by engaging people from diverse FGM affected communities.

## GRANT OFFICER COMMENTS

The visit was informative and interesting, where your grant officer met staff, volunteers and young women who have benefited from your funding and heard about the challenges, successes and learning to date.

At the beginning of the visit African Advocacy Foundation reported that they did not fully understand the entire complexity of the programme before starting and reported that the programme could have benefitted from a full time worker. Whilst the staff members provide consistency, excellent knowledge and expertise the support from volunteers could vary in terms of consistency. A full time member of staff could have provided this consistency as well as more support to.

The staff involved in the project discussed gaps in service and provision and your grant officer discussed securing other funding to fill those gaps and strengthen the service offered to women experiencing or at risk of FGM by utilising the quantitative and qualitative data collected through this programme.

One of the unexpected outcomes of your funding has been the involvement and support of parents. Initially the programme was met with anxiety and fears however parents now drop their children off to attend the various activities and themselves attend community and social activities. This has increased the impact of the programme as parents are gaining increased awareness and information and then challenging the practice of FGM. The impact of the programme is a community which openly discusses FGM practice, challenges this and provides support for those who have experienced FGM and reduces the risk of second generation experiencing the practice.

Your grant officer discussed measurement tools and frameworks to demonstrate progress against targets. Although AAF collect data through quarterly questionnaires and review processes it does lack a standard framework for collection of data. This means that the data is not necessarily consistent or coordinated. This is a key area for development and your grant officer discussed the importance of consistent robust data and advised on tools which may be useful for evidencing distance travelled by individual beneficiaries. AAF identified that they could benefit from support in this area and your grants officer referred them to the STRIVE programme delivered through Cranfield Trust.

Your grant officer discussed understanding and responses of frontline services to experience and risk of FGM. AAF reported that working with frontline services was challenging as many did not fully understood or comprehended the mental and emotional impact of FGM. AAF reported that services have responded to physical health needs but not the emotional and psychological needs. AAF reported that specifications for commissioning CAMHs do not even mention FGM and the impact

on emotional needs and mental health. Whilst AAF reports these challenges into the networks and forums they attend this remains a key priority for AAF.

Your officer met with a group of young women who are active participants of activities provided by AAF, They all reported how attending the various activities had helped them to learn about and understand FGM and to begin to have discussions within their families. Up until their involvement with AAF they did not have any idea what FGM was and involved. Some reported how being able to talk about FGM had greatly improved relationships with their mothers. This was very important to the young women. Many of the young women had trained to become Champions and delivered presentations and had stalls at their schools to raise awareness. They all felt this was important work and helped to break down the stigma of FGM. The willingness of these young women to share with confidence their experiences is testament to the power of the work being delivered.

AAF reported that they have positive relationships with the Trust. The grant officer who initially assessed the application was very knowledgeable and supportive.