

PARLIAMENTARY DEBATES

HOUSE OF COMMONS
OFFICIAL REPORT
GENERAL COMMITTEES

Second Reading Committee

CHILDREN ACT 1989 (AMENDMENT)
(FEMALE GENITAL MUTILATION) BILL [*LORDS*]

Monday 25 February 2019

No proofs can be supplied. Corrections that Members suggest for the final version of the report should be clearly marked in a copy of the report—not telephoned—and must be received in the Editor’s Room, House of Commons,

not later than

Friday 1 March 2019

© Parliamentary Copyright House of Commons 2019

This publication may be reproduced under the terms of the Open Parliament licence, which is published at www.parliament.uk/site-information/copyright/.

The Committee consisted of the following Members:*Chair:* STEVE McCABE

- | | |
|--|--|
| † Antoniazzi, Tonia (<i>Gower</i>) (Lab) | † Milling, Amanda (<i>Cannock Chase</i>) (Con) |
| † De Piero, Gloria (<i>Ashfield</i>) (Lab) | † Saville Roberts, Liz (<i>Dwyfor Meirionnydd</i>) (PC) |
| † Duffield, Rosie (<i>Canterbury</i>) (Lab) | † Throup, Maggie (<i>Erewash</i>) (Con) |
| † Foxcroft, Vicky (<i>Lewisham, Deptford</i>) (Lab) | † Tomlinson, Michael (<i>Mid Dorset and North Poole</i>) (Con) |
| † Frazer, Lucy (<i>Parliamentary Under-Secretary of State for Justice</i>) | † Tracey, Craig (<i>North Warwickshire</i>) (Con) |
| † Goldsmith, Zac (<i>Richmond Park</i>) (Con) | † Twist, Liz (<i>Blaydon</i>) (Lab) |
| † Hair, Kirstene (<i>Angus</i>) (Con) | † Whately, Helen (<i>Faversham and Mid Kent</i>) (Con) |
| † Harris, Carolyn (<i>Swansea East</i>) (Lab) | Anwen Rees, <i>Committee Clerk</i> |
| † Hobhouse, Wera (<i>Bath</i>) (LD) | |
| † Keegan, Gillian (<i>Chichester</i>) (Con) | † attended the Committee |

Second Reading Committee

Monday 25 February 2019

[STEVE McCABE *in the Chair*]

Children Act 1989 (Amendment) (Female Genital Mutilation) Bill [*Lords*]

4.30 pm

The Chair: The procedure this afternoon is slightly unusual, so I will outline it as best I can. A Second Reading Committee is a slightly different type of Committee. The Committee is charged with recommending to the House whether the Children Act 1989 (Amendment) (Female Genital Mutilation) Bill ought to be read a Second time. The debate in Committee replaces a Second Reading debate in the House. After the Committee has made its recommendation, the question on Second Reading in the House will be decided without further debate.

The rules governing a Second Reading debate in the House apply to Second Reading Committees, so Members may speak more than once only by leave of the Committee, or through interventions. Normally at this stage I would call the Minister to move the motion, but in view of the history of the matter I shall ask Zac Goldsmith to do so.

4.31 pm

Zac Goldsmith (Richmond Park) (Con): I beg to move,

That the Committee recommends that the Children Act 1989 (Amendment) (Female Genital Mutilation) Bill [*Lords*] ought to be read a Second time.

It is a pleasure to serve under your chairmanship, Mr McCabe. Hon. Members will have heard that the Bill is a private Member's Bill—a few moments ago, very briefly, it was not, but it is again, and I am grateful. I thank the Government, who have provided time for the debate, and my hon. and learned Friend the Minister for their collective efforts to protect girls who are at risk of FGM.

Much has been said about why we are in Committee now, and in particular about the role of the hon. Member for Christchurch (Sir Christopher Chope)—not much of it has been all that polite. I do not want to dwell on that aspect of the matter, other than to say that the Bill is exactly the sort of measure for which private Members' Bills are useful. It is a small, uncontroversial but important amendment to the law that would not sit easily in any Government Bill currently going through Parliament. I am delighted to have the Government's support, but I acknowledge that the Bill was introduced by the Cross-Bench peer Lord Berkeley, who became aware of an anomaly in the law and decided to act. He piloted the Bill through the other place with huge passion, clarity and decency.

Although, like everyone in the room, I have known about female genital mutilation for many years, it is only relatively recently that I have been actively engaged in campaigning on the issue. That is largely thanks to the powerful work of FGM survivor and campaigner Nimco Ali, who will be known to numerous members of

the Committee. She is an inspiration and I hope that the Bill will go a small way towards honouring her efforts, and those of the many women standing up to FGM in the UK and across the world.

The Committee will be familiar with the horrors of FGM, but they bear repeating, up to a point, to remind us why the Bill matters so much. According to the World Health Organisation, FGM includes

“all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons.”

It is almost always carried out on young children, and rarely by medical professionals. It has no basis in medicine or, despite what we are often told, particularly on social media, in religion. The practice is often wrongly blamed on Islam, both by extremists who want to excuse it and by others who want to use it as a stick to bash Islam as a religion. In reality, the practice predates Islam and the Koran neither advocates nor justifies it.

The consequences of FGM, of course, can be extreme, and include severe pain, excessive bleeding, infection, menstrual problems, pain during sex and childbirth, and deep psychological trauma. The consequences can last for the rest of the person's life. It is estimated that around the world at least 200 million women and girls alive today have undergone FGM. In England and Wales, the figure is believed to be approximately 137,000, so it is also a UK issue.

When an urgent question was asked about the Bill on 11 February, several colleagues raised concerns about male circumcision. Whatever one's views may be on that issue, it is self-evidently not comparable. The medical equivalent of FGM for a man would not be circumcision; it would be removal of the entire head of the penis and much more besides. Had that ever been a cultural practice, I suspect that it would not have lasted more than a generation at most.

FGM has been specifically illegal in the UK since the Prohibition of Female Circumcision Act 1985, which was replaced by the Female Genital Mutilation Act 2003. The 2003 Act, which made it illegal to assist someone performing FGM or to commit FGM abroad, was amended by the Serious Crime Act 2015, which introduced mandatory reporting of FGM and created FGM protection orders. Such orders, which courts can issue to protect girls who have undergone FGM or are at risk of becoming victims, can include any appropriate “prohibitions, restrictions or requirements”, such as forcing the surrender of passports to prevent travel abroad.

The UK was the first country in the world to create a dedicated anti-FGM aid programme. An initial £35 million was pledged in 2013 and an additional £50 million was announced last November. I was delighted to see the Department for Education's announcement today that FGM will be a compulsory part of all sex and relationships education for secondary school pupils.

The legal and financial apparatus to protect girls against FGM is not insubstantial, but as yet there is no hard evidence of a meaningful decline. In 2016-17, the NHS reported 9,179 cases of FGM, of which 5,391 were newly recorded. It is a source of huge concern that the first successful prosecution for FGM occurred only in January this year, after numerous failed attempts. There is a lot more still to be done, which is why this small but

important Bill needs the Committee's support. I do not pretend that by itself it will stop FGM, but it will provide another legal tool—potentially a crucial one—in the fight against it. Let me briefly explain why.

At present, the Children Act 1989 allows courts to make an interim care order: an instruction to a local authority to share parental responsibility for a child, such as when making decisions on where the child should live or how its welfare should be maintained. To make such an order, which can last up to eight weeks and can be renewed, the court needs to be “satisfied...that the child concerned is suffering, or is likely to suffer, significant harm”.

I am sure that we all agree that a girl who has undergone or is likely to undergo FGM is suffering or is likely to suffer significant harm. At present, however, the 1989 Act does not allow interim care orders to be issued for FGM. Under section 37, a court may direct such an order to be made only in “family proceedings”, which are defined for the purposes of the Act in section 8. The definition covers the Family Law Act 1996, which deals with non-molestation orders, the Matrimonial Causes Act 1973, which concerns divorce, and various statutes relating to domestic violence and forced marriage, but not proceedings under the Female Genital Mutilation Act. As a result, it is not open to a judge to issue an interim care order for FGM. That is clearly an omission in the law, and it means that our courts do not have the full suite of powers necessary to protect girls who are at risk.

As Lord Berkeley pointed out when introducing the Bill in the other place, a family court has more powers to protect a girl at risk of forced marriage than to protect a girl at risk of FGM. That needs to be evened out. As David Maddison—the family lawyer who raised with Lord Berkeley that omission in the law—has pointed out, it is a genuine practical concern, not just a theoretical one. There have been occasions when the police have sought an FGM protection order in the family court and the judge has wanted to employ the powers of the local authority in an order. Under the present law, however, judges cannot compel the local authority to act, so they have had to rely on encouragement. The Bill will grant the power that has been missing by inserting proceedings for FGM protection orders made under the Female Genital Mutilation Act into the section of the Children Act that defines which family proceedings constitute grounds for making an interim care order. What it proposes is pretty simple and uncontentious.

I do not imagine that the Bill will lead to a vast number of new care orders being issued—I understand that they are rarely used—but it is vital that judges have all the power we can give them to protect girls who are at risk. At present that is simply not the case. I acknowledge that the Bill alone will not stop FGM from happening, and to anyone who argues that it is not enough, I would simply say that I agree. We need to see much more done to supplement the existing legal powers. That means better mental health support for survivors; better education, so that young girls and boys grow up knowing that FGM is wrong; identifying girls who are at risk; and ensuring that aid money is spent as effectively as it can be, to support heroes campaigning at the grassroots in countries in Africa and Asia where FGM is still prevalent, such as Jaha Dukureh from Gambia, who managed almost single-handedly to force the Government there to change the law to ban FGM.

I look to the Minister to assure us that the Government will redouble their laudable efforts in all these areas. If the Bill protects just a handful of girls from undergoing the horror of FGM, then we will have done something worth while in passing it into law.

4.41 pm

Carolyn Harris (Swansea East) (Lab): I support the Bill, which frankly should have been brought in in Government time anyway. Although I have already shared my dismay at the actions of the hon. Member for Christchurch, I genuinely welcome the fact that the Government have acted so quickly in bringing the Bill to a Second Reading. Any Bill that streamlines and quickens the process of keeping a child safe is a positive one.

Correcting the gap in the Children Act means that applicants will no longer have to have separate proceedings for FGM protection orders. Bringing FGM protection orders within the definition of family proceedings will ensure that the family court and the High Court can apply for care or supervision orders in the same proceedings, thus avoiding unnecessary delays. That small amendment to the law will make a huge difference to a young girl's life.

The true number of women and girls affected by FGM is difficult to ascertain, given the secrecy around the practice. In July 2017, NHS Digital published experimental statistics for England that showed that between April 2016 and March 2017 there were 9,179 NHS attendances where FGM was identified or a medical procedure for FGM was undertaken. It is therefore a scandal that the first prosecution for FGM in the UK was earlier this month, even though it has been criminalised since 1985. Once again, I call on the Government to take further steps to ensure that the right procedures are in place to bring about more prosecutions, and that parents who are complicit in these procedures understand that there are consequences for their actions. Although the Bill takes positive steps in protecting the vulnerable, the Government need to do more to ensure the safety of women and girls.

4.43 pm

Helen Whately (Faversham and Mid Kent) (Con): It is good to be here today to play a part in this small but significant step towards trying to stop girls suffering FGM. I welcome the Minister's prompt response and I congratulate my hon. Friend the Member for Richmond Park on bringing forward this private Member's Bill. I acknowledge Lord Berkeley's work in this area and Nimco Ali's vigorous campaigning, which has brought the issue to the fore for many of us.

I add my disgust to what others have said about this completely abhorrent practice. It is shocking that it happens not only around the world and in Africa, but here in the United Kingdom. As my hon. Friend the Member for Richmond Park mentioned, it has awful consequences for the girls and women who suffer it, from the sheer pain and risks of infection, to the lifelong consequences, which include mental and physical scarring, problems with childbirth and risk of death. We should do all we can to stop it, but clearly that is not easy. Despite the fact that FGM has been illegal in this country since 1985, there has been only one successful prosecution, so it is hard to stop.

[Helen Whately]

NHS data tells us that FGM is happening in not insignificant numbers, so we must do whatever we can. The Bill is one step towards doing something. As my hon. Friend said, it will not completely stop FGM, but it is one step, along with education for girls and for adults who might think that FGM is okay; identifying girls at risk from FGM, and taking more steps to reduce those risks; and encouraging people who have suffered or who know that FGM is going on in their communities to speak up and to take action.

More must be done to ensure successful prosecutions when FGM occurs. We need to send out the strongest possible message that, as a society, we are completely against FGM and do not want it to happen in our communities, or to women and girls around the world. We must do everything we can, so I am glad to support the Bill as a step in that direction.

4.46 pm

Maggie Throup (Erewash) (Con): It is a pleasure to speak in this Committee, which is timely because public awareness of the abhorrent practice of FGM has increased over recent months and years. As the momentum is firmly behind positive action to ensure that women and girls are fully protected, we as legislators have a duty to strengthen the existing laws, to ensure that the courts have the necessary tools and powers not only to prosecute those who facilitate FGM, but to safeguard victims and those at risk. That is what the Bill does.

Prevention is always better than cure. In the Bill we have the opportunity to protect those in our society who do not have a voice or who cannot speak for themselves because they are children. Unlike male circumcision, the World Health Organisation is clear that FGM offers no health benefits but causes serious harm to women and girls. That can include: severe pain; excessive bleeding; risk of infections; urinary, menstrual, sexual and psychological problems; an increased risk of childbirth complications; and, in the most severe cases, death.

As my hon. Friend the Member for Richmond Park indicated, the campaign against FGM in British society is not, as some people have suggested, a war against religious groups or cultural practices; it is simply about doing what is right, so that women and girls can live a normal, healthy life and have control over what happens to their own bodies. We must recognise that for almost all victims of FGM it is not their choice to be cut, because they are mostly minors. In other cases, victims are coerced into the procedure, heavily influenced by dominant family members or those who play central roles in their communities.

Despite significant progress in strengthening anti-FGM laws in recent years, and the steps that agencies such as social services have taken to identify those most at risk, when the Bill was introduced in the other place there had been no successful prosecutions in the UK. It is therefore bitter-sweet that, as the hon. Member for Swansea East highlighted, the first successful prosecution for the offence of FGM, in addition to failing to protect from the risk of genital mutilation, was brought at the beginning of this month. During the trial, the court heard that the accused had coached her daughter to lie

to the police so that she would not get caught. That is perhaps the single piece of evidence that best highlights why the Bill is required.

The Bill clearly has cross-party support. If it allows the courts to safeguard a small proportion of girls at risk, it will have done its job. However many girls we will protect through the Bill, that will be far better than what we have now. I am delighted to be able to support it.

4.50 pm

Michael Tomlinson (Mid Dorset and North Poole) (Con): It is a great pleasure to serve under your chairmanship, Mr McCabe—our paths seem to cross quite frequently when considering private Members' Bills, and it is always a pleasure.

I wholeheartedly support the Bill. I congratulate my hon. Friend the Member for Richmond Park on his persistence and determination in ensuring that it reaches Second Reading. I am pleased to see the Minister in her place and welcome her. I was one of a very few Members who were in the Chamber when the Bill was objected to. The disgust and disappointment on both sides of the House when the Bill was blocked were clear. I made a point of encouraging the Minister, when an urgent question was brought on 11 February, to bring forward the Bill as quickly as possible. I am grateful that she has responded. I shall not delay the Committee long, but I want to raise two questions and thought that it would be easier to do so in a short speech, rather than through interventions.

First, how many cases before the family courts does the Minister anticipate will be directly affected by the Bill? My hon. Friend the Member for Richmond Park mentioned that around 137,000 women and girls in this country have been affected by FGM. Will the Minister anticipate how many of those cases may go before the family courts?

Craig Tracey (North Warwickshire) (Con): I congratulate my hon. Friend the Member for Richmond Park on bringing forward the Bill. My hon. Friend the Member for Mid Dorset and North Poole is right to raise the number of cases involved. He served, as I did, as a Parliamentary Private Secretary in the Department for International Development. Will he join me in welcoming the fact that although the Bill will help relatively low numbers of people in this country, DFID's work around the world since 2013 has helped millions of women avoid FGM? There has also been more education around the world, thanks to the Department's excellent work.

Michael Tomlinson: I am grateful to my hon. Friend for that intervention, not least because I look back fondly on my stint as a PPS in the Department for International Development—a wonderful Department that does much good across the world. The matter that we are considering is a good example of the work it does, and we should all be proud of it. Whenever I am challenged about why we spend money on foreign aid, I say that we should be proud to stand up and say exactly what we do—which in this case has been to help millions of girls across the world. I am grateful to my hon. Friend, and indeed to my hon. Friend the Member for Richmond Park, who also mentioned DFID's work.

My second question arises from the fact that we have heard from several Members that there has been only one successful prosecution. I may be going slightly broader than the Minister's remit this afternoon, but I still want to challenge her on what more can be done, within the ambit of the Bill or otherwise, to ensure that there will be successful prosecutions whenever FGM is carried out in this country.

The Bill clearly makes a technical amendment to the law, but I like to think that it is achieving something more than that, because we are debating it in Parliament and highlighting the issue. That is important in itself.

4.53 pm

Gloria De Piero (Ashfield) (Lab): It is an honour to serve under your chairmanship, Mr McCabe. I thank all Members who have contributed to the debate: the hon. Members for Erewash, for Mid Dorset and North Poole, and for Faversham and Mid Kent. I thank the hon. Member for Richmond Park for sponsoring the Bill, and for his detailed speech and obvious commitment to the issue.

The debate has in many ways been quite traumatic to listen to, but the cause is one on which we can all work together, as my hon. Friend the Member for Swansea East made clear. The Bill addresses a barbaric practice that has no place in a modern society such as ours, but which unfortunately still exists. Female genital mutilation is a horrific abuse of children of all ages, particularly those who have not reached puberty. It can have a profound and devastating impact long into later life. In the short term, it causes severe pain, with the risk of excessive bleeding, infections and urinary issues, and possibly even death. In the longer term, it causes menstrual and vaginal problems, issues relating to sexual intercourse, and complications in childbirth.

According to overwhelming consensus in the medical profession, FGM has absolutely no health advantage. As the World Health Organisation puts it, there are "no...benefits", but "only harm". It is an abhorrent practice that constitutes a violation of the human rights of women and represents a stark reminder of the inequalities between sexes, with women cruelly and inhumanely discriminated against. Yet it still occurs. Some estimates suggest that more than 200 million women across the world have been victims of FGM. The World Health Organisation labelled it "A Global Concern", concentrated in regions and communities across Africa, the middle east and Asia. However, as so many Members have said today, it happens right here in the UK.

Despite being illegal since 1985, statistics published by NHS Digital show that between April 2015 and March 2016, FGM was identified in 9,223 attendances at NHS trusts and GP practices, 6,080 of which were new cases. In the following year, 9,179 attendances included 5,391 new cases. The most recent statistics show 2,320 attendances in the first three months of 2018, of which 1,030 were newly recorded women or girls. However, given the known obstacles associated with reporting and recording FGM—the act is likely to be committed by a family member or an established and respected member of the community, for example—the real figure is likely to be even higher.

Female genital mutilation is occurring, yet prosecutions of those committing it are not. Clearly, the statistics paint a stark picture that shows that more must be

done, which is what the Bill seeks to do by giving the courts the ability to include local authorities in protecting against FGM. Currently, female genital mutilation protection orders are the best device for acting against FGM. They allow a court to present prohibitions, restrictions or requirements, where it sees fit, to protect a girl who has already been or is at risk becoming a victim of FGM. Examples might be the prohibition of travel or passport surrender to prevent a girl at risk from being taken abroad for FGM. Use of such protection orders, however, appears minimal. Ministry of Justice figures show that only 205 FGM protection orders had been made up to the end of December 2017 since their introduction two and a half years earlier.

The Children Act, however, allows judges to make temporary care orders if they are concerned about a child's health, with section 8(4) listing the areas in which that is applicable. For a child at risk of molestation, violence or a forced marriage, for example, judges can force the relevant local authority to intervene and to provide interim care to ensure the child's safety, but FGM is not listed under that section, so judges cannot do the same for young women faced with that repugnant practice. The Bill seeks to amend that apparent oversight, listing FGM as one of the stand-alone statutes in section 8(4) of the Act and allowing judges to intervene directly and to involve local authorities in FGM cases.

That proposal, as many have said, is certainly no panacea for the widespread practice of FGM in the UK—much more needs to be done to eradicate it. Does the Minister agree that we need to tackle the cultural conventions in communities in which FGM is commonplace through education and awareness? Does she agree that confidence must be given to members of those communities to speak out against those who perform such operations? Will she tell us what steps have been taken to increase the number of prosecutions of those who are identified?

The Bill is certainly a welcome step in the right direction. As my colleague Baroness Kennedy said in the other place, at the very least

"it adds to the armoury of those who hear these cases".—[*Official Report, House of Lords*, 20 July 2018; Vol. 792, c. 1420.]

That can only be a good thing. It gives judges and local authorities greater scope to address and, crucially, prevent FGM, by adding an extra tool.

It is incumbent on all in Parliament to do what we can to tackle the devastatingly damaging practice of FGM. In that spirit, the Opposition will certainly not stand in the way of a reasonable Bill such as this, which we welcome as it seeks to do just that.

4.59 pm

The Parliamentary Under-Secretary of State for Justice (Lucy Frazer): It is a pleasure to serve under your chairmanship, Mr McCabe.

I thank my hon. Friend the Member for Richmond Park for his support for the Bill, for sponsoring it through the House and for his commitment to protecting young women. Like him, I also pay tribute to Nimco Ali for her campaigning in this important sphere, and recognise the work of Lord Berkeley in bringing the Bill forward.

As others have said, female genital mutilation is a barbaric and illegal act. Many have referred to the effects of FGM; I will repeat them and refer to the

[Lucy Frazer]

leading judgment of Lady Hale in the Supreme Court case, where the question was whether the risk of FGM amounted to persecution. She held that it did, and in coming to that conclusion, she stated that the procedures “are irreversible and...last a life time. They are usually performed by traditional practitioners using crude instruments and without anaesthetic. Immediate complications include severe pain, shock, haemorrhage, tetanus or sepsis, urine retention, ulceration... Long term consequences include...urinary incontinence...and sexual dysfunction... It is likely that the risks of maternal death and stillbirth are greatly increased”.

The Bill before this Committee is designed to further protect victims of this horrific practice. The Bill ensures that, if a local authority wishes to bring a care or supervision order in relation to a child at risk of significant harm, it can do so during proceedings for an FGM protection order, avoiding the need for separate applications and potential delay. This change in the process, which is the sole purpose of this Bill, is an obvious and uncontroversial remedy for this small gap in the law and will supplement the measures that this Government have brought forward to tackle FGM.

The hon. Member for Swansea East and my hon. Friend the Member for Mid Dorset and North Poole rightly highlighted the lack of prosecutions in this area. They are right to state that we must do what we can to increase prosecutions so that more people can be brought to justice for this horrific act, but, as the hon. Member for Ashfield rightly identified, one of the difficulties in bringing people to justice is that this act is committed within families. Another difficulty relates to the age of the victims, who cannot speak out when they are so young. This is an issue that affects not just this country; there have been only a small number of prosecutions across many countries in Europe.

Michael Tomlinson: The Minister is absolutely right when it comes to evidence, but are there any lessons that we can learn from jurisdictions abroad, even though there are equally small numbers of prosecutions in Europe? What more can we learn? What more can we do to ensure that of these 135,000 victims, more than just one case is prosecuted in this country?

Lucy Frazer: That is an important point and a challenge; I am sure the Crown Prosecution Service is looking closely at that. Others have made the broader point about education and the hon. Member for Ashfield has challenged the Government on what more we can do. Like my hon. Friend the Member for Richmond Park, I am very pleased that today the Department for Education has announced that education on the issue of female genital mutilation will take place in schools.

My hon. Friend the Member for Mid Dorset and North Poole also asked about how many cases will come before the court in respect of this private Member’s Bill. I answer honestly that we do not expect the number to be large. We cannot say with exact precision how many there will be, but, as others have said, if by some small amendment we can protect any women at all—whether that number is large or small—from the horrific consequences that many hon. Members have outlined, we should do so. Given the impacts, that is what we are doing through our support of this legislation.

Finally, I thank hon. Members from across the Committee for the united and consensual way in which we are proceeding with this legislation. This is the second Bill that I have had the honour of taking through this Parliament with cross-party support, and I see many hon. Members here who were party to the other proceedings on upskirting. These are examples of the Houses of Parliament at their finest, where we identify issues that affect people and bring them forward, plugging gaps in the law, in a cross-party, consensual way. I am privileged yet again to be part of this very important measure. I would also like to mention the contributions by my hon. Friends the Members for Erewash and for Faversham and Mid Kent. Finally, I am pleased to say that I and the Government support this Bill and commend the motion that the Bill be allowed to proceed to Second Reading.

The Chair: With the leave of the Committee, Mr Goldsmith, do you want to make a few brief concluding remarks?

5.5 pm

Zac Goldsmith: I thank Committee members for all their contributions. The Bill, as has been acknowledged, effectively closes a loophole. As my hon. Friend the Member for Erewash pointed out, it is fundamentally about prevention—preventing abuse and preventing harm.

I want very briefly to touch on the point made by my hon. Friend the Member for Mid Dorset and North Poole. He and my hon. and learned Friend the Minister are right that it is impossible to estimate the number of cases involved, but we know that in the year to September 2018, 117 FGM protection orders were issued—up about 20 on the previous year and another 20 on the year before that. That gives some indication of the number that may be involved.

The hon. Member for Swansea East and many other hon. Members expressed disappointment that there has been only one conviction. That point was well made, and I think that disappointment is shared across the Committee.

I thank my hon. Friend the Member for Faversham and Mid Kent, because it was her question at Prime Minister’s questions that secured the formal commitment to make Government time available for the Bill. I am really grateful to her for that, and I know a lot of other people are, too.

We heard two powerful speeches from the Front-Bench representatives, my hon. and learned Friend the Minister and the hon. Member for Ashfield, who both fully support the Bill. I am very grateful to them for that, and for making powerful speeches with great compassion. Finally, I thank you, Mr McCabe, for chairing the Committee.

Question put and agreed to.

Resolved,

That the Committee recommends that the Children Act 1989 (Amendment) (Female Genital Mutilation) Bill [Lords] ought to be read a Second time.

5.7 pm

Committee rose.