

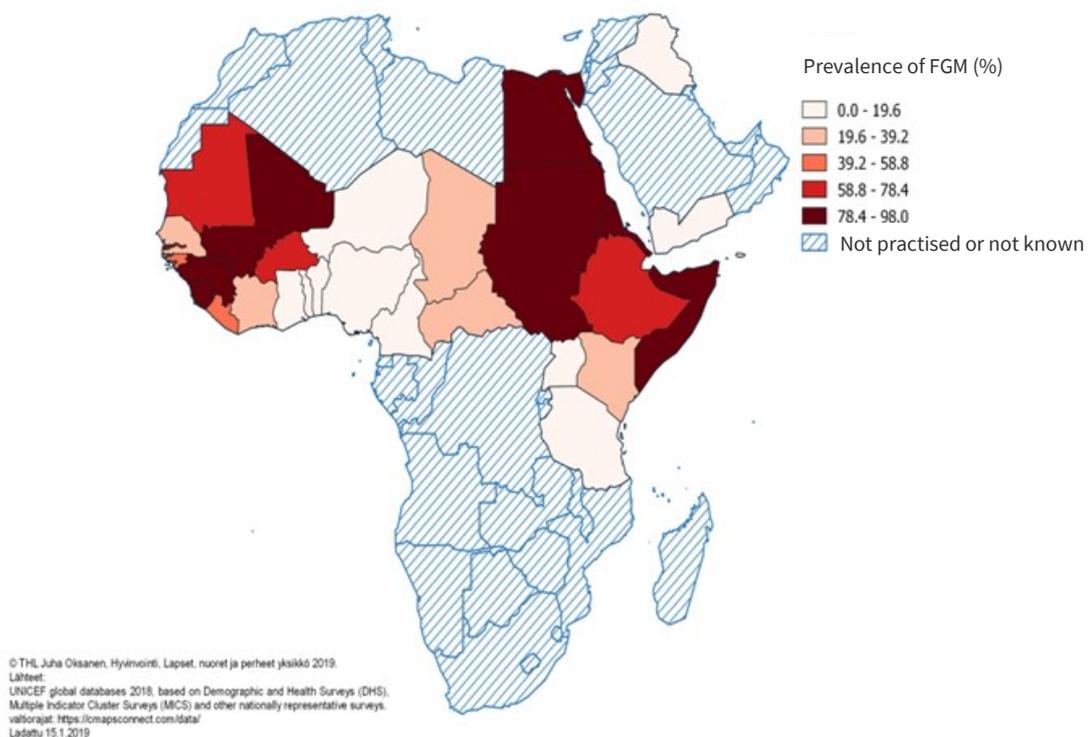
Assessing the threat of female genital mutilation

The assessment form can be used to assess the threat of female genital mutilation or to find out if mutilation has already taken place. The form is a tool for working with clients. By filling in the form and filing it with the client documents, it can be ascertained that the subject has been brought up with the client, and other employees and necessary parties will also be informed.

1. From which country have the client, her parents or her spouse come from?

Using a map and a list of countries, find out if the client comes from a country where FGM is practised.

Risk countries:



High prevalence:

Somalia, Guinea, Djibouti, Sierra Leone, Mali, Egypt, Sudan, Eritrea

Relatively high prevalence:

Burkina Faso, Gambia, Ethiopia, Mauritania, Liberia, Guinea-Bissau, Chad, Ivory Coast, Nigeria, Senegal, Central African Republic, Kenya

Low prevalence:

Yemen, Tanzania, Benin, Iraq, Togo, Ghana, Niger, Uganda, Cameroun

In addition:

Kurdish regions: Iran, Syria, Turkey
Indonesia, Afghanistan

2. Ask about the following:

- Has the client's mother, sisters or other relatives been circumcised?
- Has the family found it difficult to adapt to the Finnish culture? Is the family also isolated from their own cultural community in Finland?
- Is the family planning an extended holiday in their home country, or are they sending the girl for a longer period to some other country where FGM is practised?
- Is the girl aware of an approaching family ceremony or a festival organised in her honour?

3. Also pay attention to the following:

- if there are gaps in the monitoring of the girl at the child health clinic or in school health care or she has missed regular examinations at a certain age
- if the girl, her parents or some other person close to the family says that FGM is important for the family for cultural or religious reasons
- if the girl, a friend of hers or a family member expresses their concern over the girl being subjected to FGM