

ASYLUM QUESTIONNAIRE

I. Qualification

1. Is FGM a ground for international protection¹?

Please elaborate: Text of the law, year, paragraph/provision.

2. What are the general requirements to be recognised? Who is recognised? (please try to be explicit for each category below on whether what is written in the law corresponds to what happens in practice)

- a. Women and girls being at risk of FGM
- b. Women and girls who have already undergone FGM –
- c. Parents or siblings protecting their daughter(s)/sisters from FGM
- d. Individuals opposing FGM

Please elaborate:

3. Criteria for assessment for women and girls at risk of FGM:

- a. Is there a specific age threshold to assess the risk? (e.g. after 15 a girl is no more considered at risk)
- b. Does religion/level of education/status of the parent etc. impact whether they are considered 'at risk'? (e.g. if a mother is highly educated and emancipated, she will be considered as able to protect her daughter)
- c. Is there a difference in risk assessment depending on whether the girl is accompanied or unaccompanied (in case she would go back to her country)? (e.g. is a child that is unaccompanied more likely to be granted asylum?)
- d. Does the country of origin make a difference (safe country of origin list)

Please elaborate:

4. Criteria for assessment for women and girls who have undergone FGM:

- a. Are they recognised for consequences of having undergone FGM? (if so, is there a compulsory examination they have to undergo –medical, psychological, etc.-)?
- b. Are they recognised for risk of re-cutting?
- c. Does it make a difference which type of FGM they have undergone?

Please elaborate:

¹ Refugee status or subsidiary protection.



5. **Does the country provide protection to women and girls from affected communities born / or living in Europe** (in case they go back to the country where their family originates from)? (e.g. the so-called “refugees sur place”)
6. **What Country of Origin Information (COI) reports are used in your country to assess asylum applications?**
 - a. Who is the author of these COI reports?
 - b. For how many countries are they available?
 - c. How is the information gathered?
 - d. Is it accessible to the public through a database?
 - e. Is there specific, adequate and up-to-date information on FGM and a gender-, culture- and age-sensitive analysis?
 - f. Are there obstacles to access such information for authorities?

In case no COI reports are available for specific countries, are there any other sources consulted (national experts, international organisations, etc.)?

Please elaborate:

II. Procedures

7. **Is there an early identification system of vulnerable applicants?** In case yes:
 - a. What is the kind of assistance and support services vulnerable applicants are entitled to once identified? (e.g. psycho-social support and accompaniment throughout the procedure, specific reception conditions guarantees, possibility of having a person of choice with them during the hearing -apart from their lawyer-, possibility of choosing the gender of the professionals involved throughout the procedure², etc.)
 - b. Even though such services might be foreseen by law, are there any practical barriers to accessing them?

Please elaborate:

8. **Is the woman/girl applicant informed at an early stage about the asylum procedures and qualification criteria? If so, who is responsible?**
9. **Is the woman/girl applicant clearly offered the possibility of choosing the gender of the professionals involved at every stage throughout the asylum procedure?**
10. **Are there asylum officers / authorities (including administrative and judicial authorities) / interpreters / lawyers / social workers and assistants at all levels trained on gender-, age- and cultural-sensitivity concerning traditional harmful practices and FGM specifically?**

² Not always women prefer other women, but they should be left the possibility to select the gender of their choice.



11. **Is there a system (database or other, etc.) available for asylum authorities to contact interpreters at national/regional level?**
12. **Is there a support system to assist women and girls affected by FGM seeking asylum to prepare their claim (paper work)? Is there in addition a preparation path to help them prepare for their interview? And if yes, who is in charge of providing these services?**
13. **Is having a medical certificate a requirement for applicants who are asking for asylum on the grounds of FGM? Is it possible to have also a psychological (or any other discipline) certificate to support the asylum claim? If yes:**
 - a. Is there a standardised protocol around this?
 - b. Are there adequately trained services able to provide this assessment?
 - c. Are there services available (is there an official list of experts) on all national territory?
 - d. Are there evaluation studies on the effectiveness of this medical certificate?
14. **Is there cooperation between medical sector, social services, legal and asylum officers in terms of sharing information/certificates of asylum seekers (overcoming professional secrecy clauses for the sake of the asylum procedure)?**
15. **Is there a requirement for girls granted asylum based on the risk of undergoing FGM to have annual medical examinations to ensure they didn't undergo FGM after being granted asylum? If so, is this practice considered effective?**
 - a. Is the fact that they might have undergone FGM after being granted asylum a reason for withdrawing their status?Please elaborate:
16. **How is late disclosure of the risk of undergoing / having undergone FGM (including when it represents a new element in a second asylum claim) treated? Does it raise credibility issues?**
17. **Are there procedures to facilitate family reunification for girls at risk of FGM? (visa, contacts with embassies in countries of origin)**
18. **How are cases where unaccompanied girls at risk of FGM have to be reunified with the relatives (which could potentially put them more at risk of FGM) handled?**
19. **What is the level of procedural protection/rights/status for a woman/girl who is subject to a Dublin decision but has applied for asylum in a second country?**
20. **(How) can a Dublin decision be overthrown based on having undergone or being at risk of FGM (how is that dealt with in each country?) (e.g. in case the first entry country does not consider FGM as a ground for asylum, in case there are no specialised services to help FGM affected women and girls, etc.)**

III. Reception Conditions

21. **Are reception centres separated for women and men? Alternatively, are there separate areas for women and men, such as specific safe spaces within the reception centre dedicated only to women and girls? In this framework, how is family unity respected?**
Please elaborate:
22. **Are there gender-, culture- and age-sensitive services in reception centres for FGM affected women and girls? Are they systematised?**
a. Are such services accessible for women hosted in other types of housing (e.g. individual housing)? Are they informed that such services exist?
23. **Are specific services (e.g. sexologist, gynaecologist, psychologist) available and accessible (both geographically and financially) for applicants affected by FGM?**
24. **Are there policies and systems in place to prevent and respond to gender-based violence that might occur in reception centres (rape, sexual violence, domestic violence, forced prostitution)?** (e.g. a gender-based violence focal point; specific services/spaces for women; possibility of splitting the family unit in case of domestic violence where the husband/father is a perpetrator)
25. **Is information on criminalisation of FGM and gender-based violence provided to asylum seekers while in the reception centres during their asylum application? Is the same information accessible for women hosted in other types of housing (e.g. individual housing)?**
26. **What is the level of service provision in reception centres for a woman/girl who is subject to a Dublin decision but has applied for asylum in a second country?**

IV. Data collection

27. **Does your country have a national registry for FGM cases in the asylum system? If yes, what does this registry record?**
a. Number of applications for asylum based on FGM
b. Number of refugees granted asylum on the basis of FGM
c. Number of applicants receiving a negative decision having applied on grounds of FGM (are they granted any other protection?)

Is this registry available and accessible to the public?

Please elaborate:



V. Integration

28. **When they leave the reception centres after a positive decision, do beneficiaries of international protection from FGM-affected countries receive standardised specific adequate healthcare / have access to specific services / are put in touch with civil society organisations dealing with the issue in the country of residence?**
- a. Is there any specific service provided for minors?
29. **Do beneficiaries of international protection from FGM-affected countries after being granted asylum on other grounds (not FGM) receive also standardised information concerning illegality of FGM, gender-based violence and what are the services available for their Sexual and Reproductive Health and Rights?**

* (In each question: a section will be included for further comments/details based on their country)