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Women's Business? A social network study of the influence of men on decision-making regarding female genital mutilation/cutting in Senegal

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Abstract

There exist two dominant but conflicting views on the role of men in the perpetuation female genital mutilation/cutting (FGM/C). One paints men as culprits, with FGM/C viewed as a manifestation of patriarchal oppression of women. An alternative portrays men as relatively uninvolved in a practice described as “women’s business.” While much has been learned about social norms surrounding FGM/C, less is known about the interactions that shape views of FGM/C decision-makers, including those interactions with men. To fill this gap, we conducted a qualitative network study in two regions of Senegal, producing detailed information about the contextual factors that are shaping and altering social networks. Our results show that change is unfolding differently in each of the regions of Senegal; in neither case do our results support either of the two prevailing views on the role of men. In both study sites criminalization has commonly driven FGM/C underground, with excision being arranged in secret by elder women. Men, however, are embedded in the social networks, exerting influence, though in different ways in each study site. In southern Senegal excision is upheld by men and women through a constellation of gender norms, and is considered to be a prerequisite to marriage. In central Senegal views on excision are influenced by the law, but also health concerns, as well as by the recent acceptability of inter-ethnic marriage and the loss of excision as a prerequisite for marriage. We find that men and elder women have the greatest power and authority of FGM/C decision-making. While men in southern Senegal exert influence through expectations regarding marriageability, in central Senegal men, particularly fathers, at times advocate for abandonment of FGM/C and have the power and authority to influence older women on the need for change. We suggest that the shifting norms and role of men in social networks offer important insights for optimizing targeted interventions to end FGM/C.

Introduction

In the vast literature on female genital cutting, there exist two dominant but conflicting views on the role of men in the perpetuation of the practice. One paints men as culprits, with FGM/C viewed as a manifestation of patriarchal oppression of women. By making females sexually passive, FGM/C allows women to be chaste prior to marriage, and after marriage faithful to their husbands. By serving to signal fidelity, it is argued that FGM/C increases paternity certainty, and thus improves marriage prospects. In settings where women's future security and well-being is linked to their role as a wife and mother, being circumcised becomes a prerequisite to marriage.

An alternative perspective portrays men as relatively uninvolved in a practice described as "women's business" (Hernlund, 2003; Yoder, Camara, & Soumaoro, 1999). Noting that the practice is often organized and performed by women on women, anthropologists in various African contexts have emphasized women's agency, and the importance of initiation in the formation of a ritual community that creates bonds between women (Ahmadu, 2000; Kratz, 1994; Thomas, 2000).

These two divergent perspectives on the role of men in the perpetuation of FGC lead to conflicting predictions. If FGM/C is an underpinning of patriarchal structures, men should be expected to be ardent supporters of the practice, as its elimination may pose a threat to their superior status in the social hierarchy. Alternatively, if FGM/C is indeed "women's business," men should have limited interest in whether or not the practice is maintained and have little influence in the decision-making process. The questions we raise are:

- What role, if any, do men play in the perpetuation or abandonment of FGC?
- By whom are the decisions made, and are men ever amongst those who negotiate a decision?
- Even if they play a peripheral role in decision-making regarding FGC, does their opinion carry any weight?
- Who holds greatest power and influence over FGC decision-making?

Gender norms, feminisms and shifting meanings of "patriarchy"

While opposition to FGM/C can be traced back to the early 1900's, in the late 1970's the issue gained renewed attention and international prominence through efforts of Second Wave Western feminists, for whom FGM became the symbol par excellence of patriarchal oppression of women (Gosselin, 2000). As the concept of women's liberation became intertwined with the idea of sexual liberation, FGM came to signify "gender oppression to end all gender oppression" (Dawit & Mekuria, 1993; see also Abusharaf, 2000; Gosselin, 2000; Wade, 2011). In this context, the notion of patriarchy became cast as a system of social structures which allow men to exploit women. According to Harrell and Santos (2017), this represented a departure from the historical use of the term patriarchy that prevailed in anthropology from the time of Morgan (1987) and Engels (1884) until the 1970's; patriarchy was defined as a "form of social organization in which the father or oldest male is head of the family, and descent and relationships are reckoned through the male line" (Harrell and Santos, 2017: 7). The most salient characteristics highlighted by this classic use of the concept are patrilineal descent and inheritance, patrilocal residence,

strong patrilineal authority, and power of the senior generation, especially men within the domestic sphere. Yet in the 1970's a second definition was shaped by feminist scholarship, employing the term "patriarchy" as masculine domination. Lerner's widely cited definition of patriarchy describes it as "the manifestation and institutionalization of male dominance over women in society in general" (Lerner, 1986: 239). Hence, the concept of domination was not just circumscribed to the realm of the family, but linked to broader societal institutions that reinforce structures of gender inequality.

Debates and theoretical developments in third-wave feminist scholarship critique traditional second wave feminist concepts of patriarchy as simplistic accounts of gender oppression that often invoked the image of a homogenized global sisterhood (Harrell and Santos, 2017; Patil, 2013), and were seen as patronizing, arrogant, and failed to recognize the varied plights of women around the world. Some Western feminist discourses came under considerable critique for their ethnocentrism and reductionism, particularly for letting sexuality become "assumed as an a priori issue around which 'all women' should organize" (Abusharaf, 1996: 5-6). Gilliam (1991: 218) charged that because FGM was portrayed as a "savage custom" from "barbaric African and Arab cultures," the way that Western women championed the cause revealed "latent racism," "anti-Islamic fervor," and "intellectual neo-colonialism." Walley (1997: 419) further points to the "tendency to characterize African women as thoroughly oppressed victims of patriarchy, ignorant or both." Such characterizations contributed to critical divisions between various feminist groups throughout Africa and the West who were engaged in what Abusharaf termed (2000: 156) a "war of visions."

Some African feminists instead characterized FGM/C as "a symptom rather than a cause of women's subordination," and urged that the injustices experienced by women be considered within the broader socioeconomic and political contexts (Abusharaf, 2000: 156). More recent scholarship has instead advanced the concept of "intersectionality," emphasizing multiple axes of power and posit that gender inequalities may be intertwined with broader systems of social inequalities, including those of class, ethnicity, and education (Patil, 2013). Intersectionality is an analytic tool based on the assumption that people's lives and organization of power in society are shaped not by a single axis of social division, such as gender, but instead by many axes that work together and influence each other (Collins & Bilge, 2016). The term "intersectionality" was popularized in a landmark 1991 paper by Kimberlé Crenshaw entitled "Mapping the Margins: Intersectionality, Identity Politics and Violence Against Women of Color." She argued that solutions to violence could not be found by imagining women as one homogenous mass, or by painting men as perpetrators (Crenshaw, 1991). Instead, fuller understandings of violence amongst black women are garnered by looking at interlocking and mutually reinforcing domains of race and gender. As intersectional analyses have been dispersed across disciplines in academia, it has become apparent that rather than elevating one category of analysis, such as gender, subordination can be reinforced through more than one axis of social division, such as race, class, and gender. In addition to focusing on multiple elements of individual identity, intersectionality also embraces a focus on social context and the multiple domains that may shape and constrain power. Collins and Bilge (2016: 47) argue that "power relations are to be analyzed both *via their intersections*, for example racism and sexism, as well as *across domains of power*, namely structural, disciplinary, culture and interpersonal" (emphasis in original).

Social norms theory

We adopt an intersectional analysis to examine social interactions, domains of power, and the social and gender norms that are produced and contested regarding FGM/C. We draw on social norms theory, which has been a prominent framework for understanding FGM/C. Social norms are unwritten expectations regarding appropriate behaviors within particular social groups (Cislaghi & Heise, 2018a). Social norms theory posits that people follow social rules that are shared amongst people in their reference group. Norms theorists use the term reference group to refer to people with whom an individual or group commonly interacts who are salient to a particular social norm or suite of associated norms. These individuals are often a subset of a broader social network comprised of people with whom individuals are connected, either directly or indirectly. It is amongst salient social referents that there exist expectations for social norms to be upheld. In a model first developed by political scientist Gerald Mackie, it was posited that FGM/C is a social norm that spread and became locked in place by interdependent expectations regarding marriageability (Gerry Mackie, 1996). Mackie posited that in the competition for marrying to higher social strata, FGM/C provided an advantage by signaling fidelity, and became a universal prerequisite for marriage. Once locked in place, FGM/C as a prerequisite to marriage operates as a social coordination norm. Individuals opting out pay the high price of losing marriageability and legitimate childbearing.

In the original application of social convention theory to FGM/C, Mackie also identified a second possible mechanism: peer pressure (Mackie, 1996; 2000). In my prior research with Katherine Wander and Amadou Moreau in Senegambia, we found support for this second mechanism of peer pressure (Shell-Duncan, Wander, Hernlund, & Moreau, 2011). Our results suggest that FGM/C was most often related to marriageability only indirectly via concerns over preserving virginity. Instead we found strong evidence for what we called an inter-generational peer convention. We proposed that being circumcised serves as a signal to other circumcised women that a girl or woman has been trained to respect the authority of her circumcised elders and is worthy of inclusion in their social network. In this manner, FGM/C facilitates the accumulation of social capital by younger women and of power and prestige by elder women.

With the subsequent empirical investigations, as well as a growth in scientific literature on social norms, views on norms related to FGM/C have expanded to emphasize something that anthropologists have long understood: FGM/C may be held in place not only by norms related to marriageability, but also by a wide range of norms and associated meanings that may center on other concerns including peer pressure, ethnic identity, adolescent rites of passage, religion, honor, modesty and sexual restraint, aesthetics and hygiene (Mackie & LeJeune, 2009). It is useful to tease apart the constellation of norms that reinforce FGM/C in order to gain insights on the diversity of ways that the practice is enforced or upheld. But as Ellen Gruenbaum has emphasized, it is important to recognize that these multiple factors do not operate in isolation, but rather are intricately intertwined in complex sociocultural systems analogous to cogs in a machine, threads in a tapestry, or organs in a body (Gruenbaum, 2005).

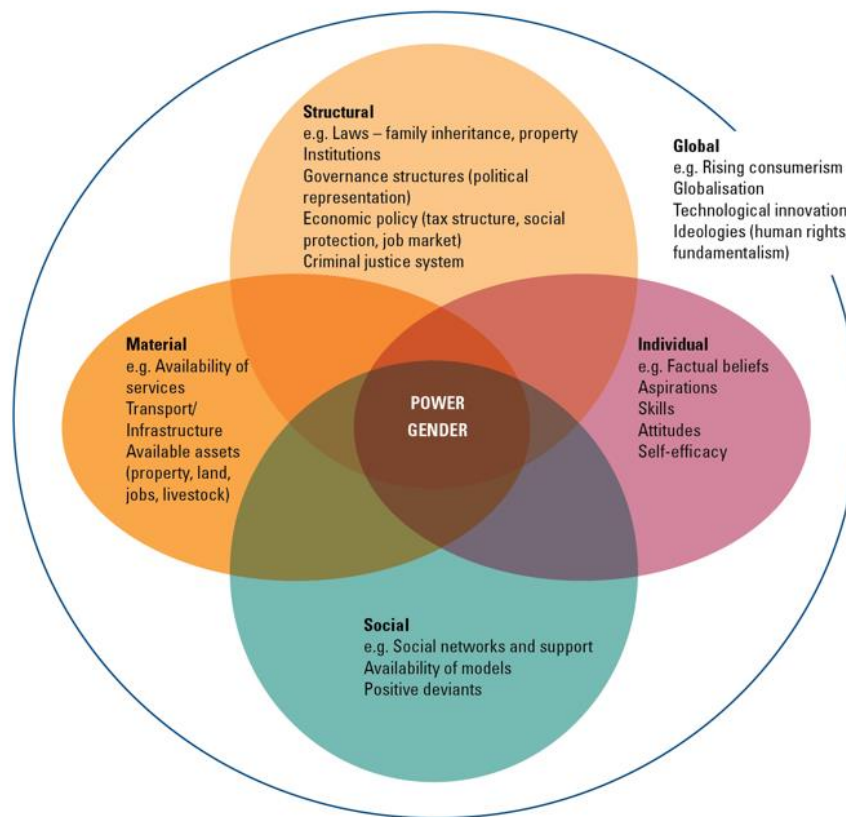
Norms scholars have also noted that in addition to individual factors and social norms, there are additional non-social factors that can influence behaviors. Mackie and colleagues (Mackie, Moneti, Shakya, & Denny, 2015) refer to these as *extra-social* influences; and include any other factor that could be economic, legal, political, religious, or related to access to social services, technology change, and other factors. Numerous social-ecological models have been developed to jointly outline these multi-level influences on behavior.

Figure 1: Social Ecological Model of Behavior



Noting that although social norms exist at several levels of social ecological models, Ben Cislighi and Lori Heise have suggested reconfiguring this framework to emphasize the potential intersections between factors at various levels, a model known as the Flower Framework (Cislighi & Heise, 2018b). They also draw attention to another sub-type of social norms, namely *gender norms*. Gender norms define what is appropriate behavior for upholding ideals linked to masculinity or femininity in different social arenas—at home, in the community, in school or the workplace, and in interpersonal relationships. Discriminatory gender norms limit girls' and women's access to power within their families and communities, reduce their educational and economic opportunities, and alter their own aspiration and ambitions for their lives.

Figure 2. Flower Framework (Cislaghi & Heise, 2018b)



What these advances draw attention to are not only the possible intersections across individual, social, material and structural domains, but also the fact that social norms are produced and upheld through social interactions that involve unequal lines of authority and power differentials within these relationships. Hence, we ask whether patterns of subordination are generated within intersections of factors such as gender, generation and ethnicity.

In our recent research, our interests have been two-fold:

- 1) How can we study the interactions that produce, uphold and potentially alter FGM/C-related social norms, and identify patterns of variation in which norms are being challenged? And
- 2) How can we better understand the lines of authority and patterns of influence that exist amongst members of social networks, and what role, if any, do men play in these networks?

Methods

To analyze intertwined social norms around FGM/C, the way in which they are being upheld or contested, and the patterns of interaction, power and influence that are salient, we have combined two

qualitative approaches: factorial focus group analysis, and ethnographic network analysis. Our research has taken place in four study communities in two regions of Senegal:

- 1) A low FGM/C prevalence region where, according to DHS data, FGMC prevalence has been sharply declining. It is a mixed ethnicity region, predominantly Mandinka, Soninke, Serahule and Wolof.
- 2) A high prevalence region where FGM/C prevalence has not significantly declined. The residents of this regions are predominantly Fula.

Important in this work is that we have shifted from a focus on individuals, to social interaction as the object of inquiry (something that Stan Yoder has long been calling for).

Factorial Focus Group Analysis

Participant observation bears the advantage of observing interactions in naturalistic settings, but it can be difficult to gain access to settings where a substantial set of interactions can be observed (Bernard, 2011), particularly on a topic such as FGM/C. Focus group discussion provide an opportunity to observe a large amount of interactions, and while they do not occur in naturalistic settings, this limitation is also a strength. This allows researchers to control the composition of focus group participants in order to do a factorial analysis comparing interactions amongst groups divided by key characteristics, such as generation, or region of residence, while maintaining control over inclusion criteria, such being from a family in which FGMC was practiced (Shell-Duncan, Moreau, Wander, & Smith, in press). We used this approach in our previous work among women in Senegal and The Gambia, and grouped overarching themes, and analyzed patterns of variation. For the overarching theme of upholding FGM/C as a means of honoring tradition and venerating ancestors, older women were most open to abandonment, and had the moral authority to do so. Younger women resisted such change, as it would be considered disrespectful, and jeopardize their social acceptance and access to social support from the older women in their marital homes.

Table 1. Summary Matrix of Themes Related to the Overarching Theme of Tradition

	Urban Gambia		Rural Gambia		Rural Senegal	
	Younger Women	Older Women	Younger Women	Older Women	Younger Women	Older Women
Honoring tradition of ancestors	+	+	+	+	+	+
Acceptable change	+/-	+	+	+/-	+/-	+/-
Acceptability of abandonment	-	+/-	-	+/-	-	+/-

+ positive consensus

+/- divergent views

-negative consensus

Blank – theme not raised

(Source: Shell-Duncan, B., Moreau, A., Wander, K. and Smith, S. (in press) The Role of Older Women in Contesting Norms Associated with Female Genital Mutilation/Cutting in Senegambia: A Factorial Focus Group Analysis. PLoS One)

In this study we also conducted a factorial focus group analysis, with subgroups divided along the line of region of residence (high vs. low prevalence), generation (older vs. younger) and gender (males vs. females).

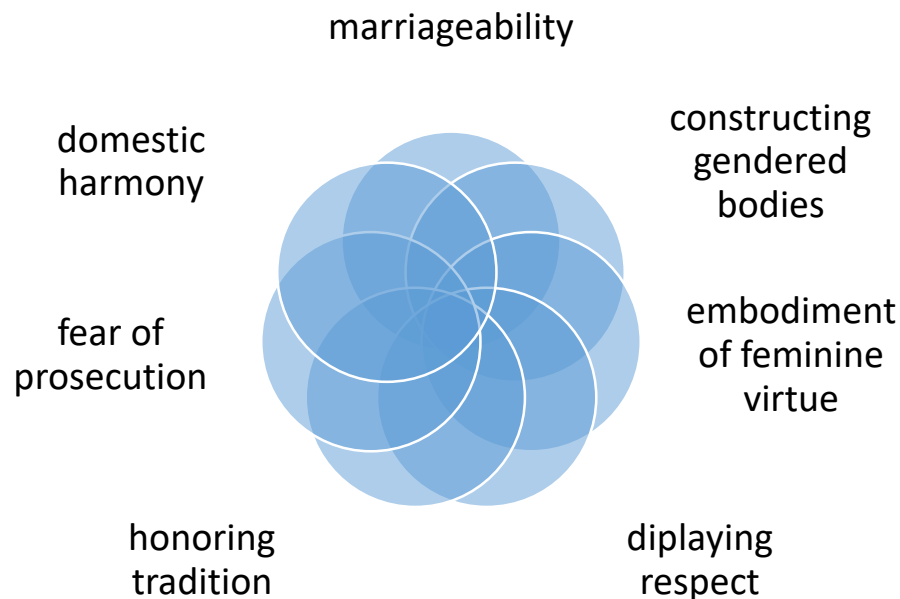
Several norms varied in important ways across our study sites, as well as along the lines of gender and generation (Figure 3). While honoring tradition and displaying respect for elders were amongst the strongest norms associated with the continuation of FGM/C in our previous Senegambia research, in this study we found these themes to be somewhat less emphasized, as excision is now being performed at younger and younger ages, and in the absence of seclusion and training. Instead, we found several interconnected gender norms to be strongly emphasized by many of our respondents. Among supporters of FGM/C, male circumcision and female circumcision were considered as complementary practices in the construction of moral personhood as well as gendered bodies. Our research supports a growing body of scholarship that finds excision to be a constitutive element in the construction of identity and personhood that holds meaning beyond that of body modification; the physical act of cutting can have a morally transformative value, as virtue and honor become inscribed on the body. And for some, this moral virtue also served to signal sexual restraint important not only for securing a marriage partner, but also in protection from gender-based stigmatization, such as being called “solema”, meaning literally uncut, but also meaning ignorant, rude, promiscuous, and uncouth. Those views were not universally upheld. People who had come to support abandonment of FGM/C often cited concerns about health risks and fear of legal prosecution, and many insisted that women can be trained and morally virtuous without having to undergo excision.

Sharp differences existed between our study community as to whether there are any distinctions (morally, sexually, and otherwise) between cut and uncut women, and whether this influences marriageability. In our high prevalence study sites, excision was considered to be a prerequisite to marriage, and many men imagined uncut women to be sexually insatiable and otherwise uncontrollable. Similar to Sarah O’Neill’s richly detailed ethnographic study of Fula communities in northern Senegal (O’Neill, 2013), we found that men considered the image of uncut genitals to be repugnant, and imagined obstacles for both childbirth and sexual intercourse. Respondents in our low prevalence study sites, by contrast, insisted that excision has no bearing on a woman’s marriage prospects, claiming that uncut women would be just as desirable marriage partners as cut women. Some men in fact, claimed that an uncut wife would be better because she would not be living with ongoing health problems. This view has emerged in a context in which arranged marriage has become largely replaced by “love marriage,” often giving rise to inter-ethnic marriage, and in some instances, FGC-discordant marriages (where one partner is from a family who has traditionally practiced excision, while the other partner’s family did not). In our high prevalence study sites, the imagined possibility of having an uncut wife living in a family of excised women is viewed as a risky source of domestic friction, whereas many respondents in our low prevalence region claimed that cut and uncut women can live together harmoniously.

In both of our study regions, people are acutely aware that excision has been targeted for elimination by international organizations, the government and numerous non-governmental organizations. While respondents are often unclear about the exact content of the law against excision, most view it as potentially enforceable. These factors contributed further to important changes in the way that excision is talked about and, for some, carried out. A decade ago we found Senegalese men and women willing to openly talk about excision. Today, however, it has become taboo to discuss excision publicly, and for

those who still carry out the practice, it has been driven underground, taking place at night and in secrecy from other members of the community.

Figure 3 Social Norms Associated with Excision in Senegal



Social Network Analysis

Our second approach to studying interaction, and characterizing patterns of influence and power involves ethnographic network analysis. People are embedded in a vast array of interpersonal connections – both direct and indirect - that comprise their social networks. It is through social networks that norms are shaped, upheld through beliefs about positive or negative sanctions, and altered or abandoned. While analysts have begun to focus on effective ways of empirically identifying social norms, less attention has been given to understanding the social networks in which norms are shaped.

A significant idea in network theory is that individuals are embedded within a thick web of social interaction, and that these interactions influence behavior (Behrman, Kohler, & Watkins, 2002; Valente, Watkins, Jato, van der Straten, & Tsitsol, 1997). One important finding is that interpersonal relationships often influence a person's behavior above and beyond the influence of his or her own attributes, even one's individual preferences (Brunson, 2013).

Qualitative approaches to social network analysis have long existed, particularly in the discipline of anthropology, but are resurging in popularity, especially as a powerful tool to identify key features of a reference group. There are varied approaches to conducting ethnographic network interviews. The

approach we adopted involved interactively creating a sociogram that maps the constellation of decision makers and key influencers, how people define themselves in relation to other decision makers, lines of authority, and the nature and relationship of social network partners (Trotter II, 1999). The network map then became a focal point for discussions that illuminate the arenas of social interaction that shape or enforce social norms, as well as the composition of network partners, patterns of influence, and means for enforcement of social norms.

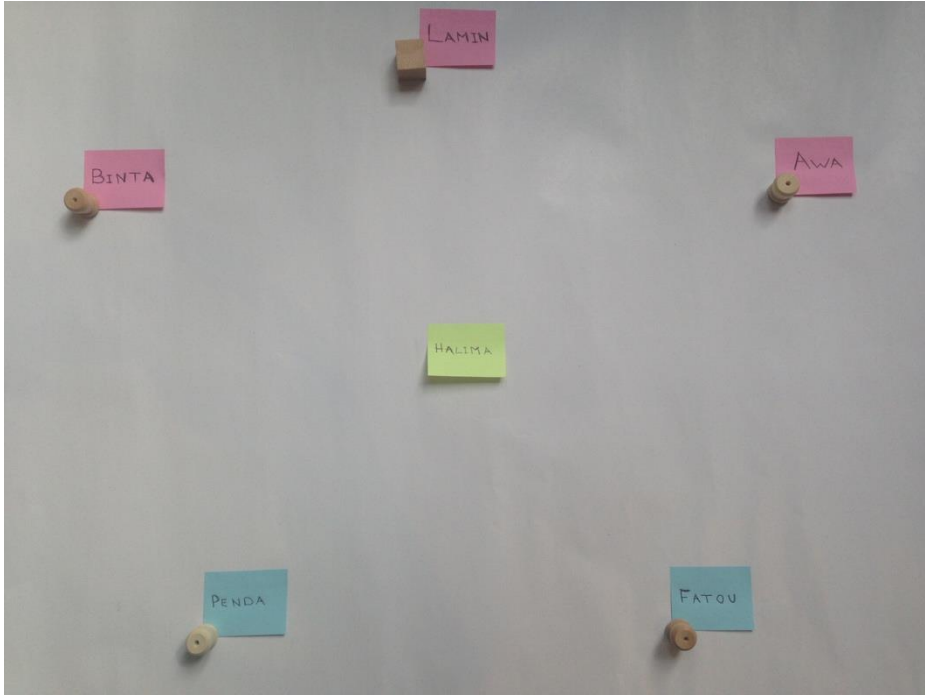
We interviewed mothers of daughters under the age of 5, and then used snowball methods to interview select network partners. Our interviews began with name generator questions designed to elicit names of people within the direct social network. These were general questions such as:

- Who are people you discuss important matters important to you?
- Suppose you need help with jobs around the house. Who would you ask to help you?
- When you are sick or recovering, who would you ask to help you?
- Suppose you need to borrow money. Who would you feel you could ask for money?
- If you want information about something new, like a new technology or a new illness treatment, who would you ask?
- Who comes to you for information?
- Who are people that you spend time with in your free time?
- Are there people you are close to who you have not mentioned yet? (probe if spouse not listed)
- Besides the people you listed, are there people in this community who you consider to be influential?

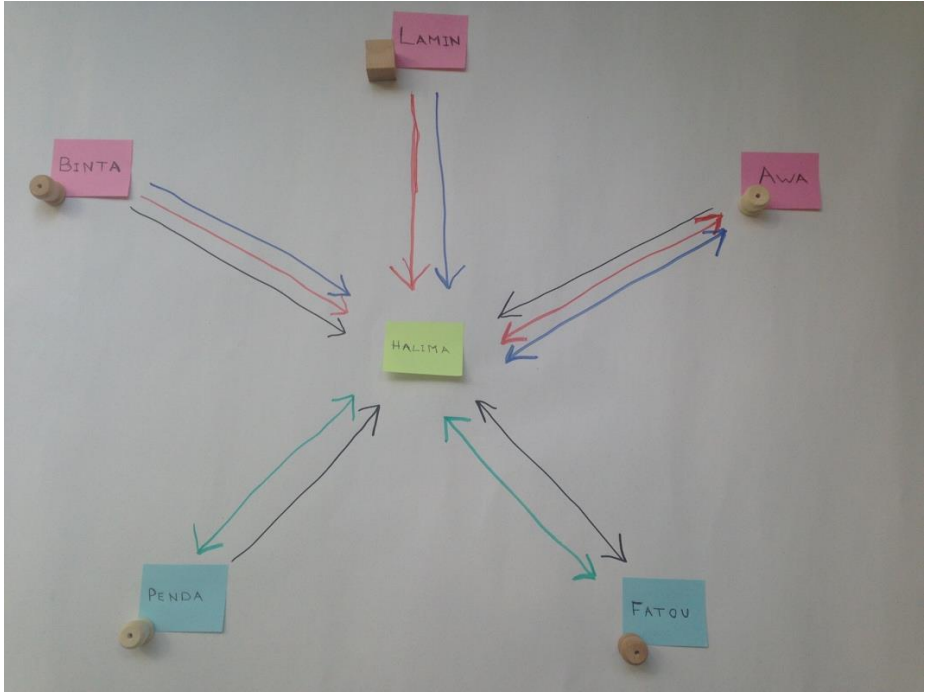
The practice of excision is also considered to be a matter of “proper parenting.” To explore how excision fits within broader cultural understandings of child rearing, we drew on focus group and interview data on meanings of proper parenting, and the associated roles and responsibilities. We used these findings to create a series of questions about those network partners who are salient members of the reference group regarding rearing of young girls. These included questions such as:

- Who participates in important decisions about girls in your family?
- Who decides if you should seek medical care if your daughter is sick?
- When your child is older, who will help decide if and when she is ready for school?
- Who participates in any other important decisions about your daughter?

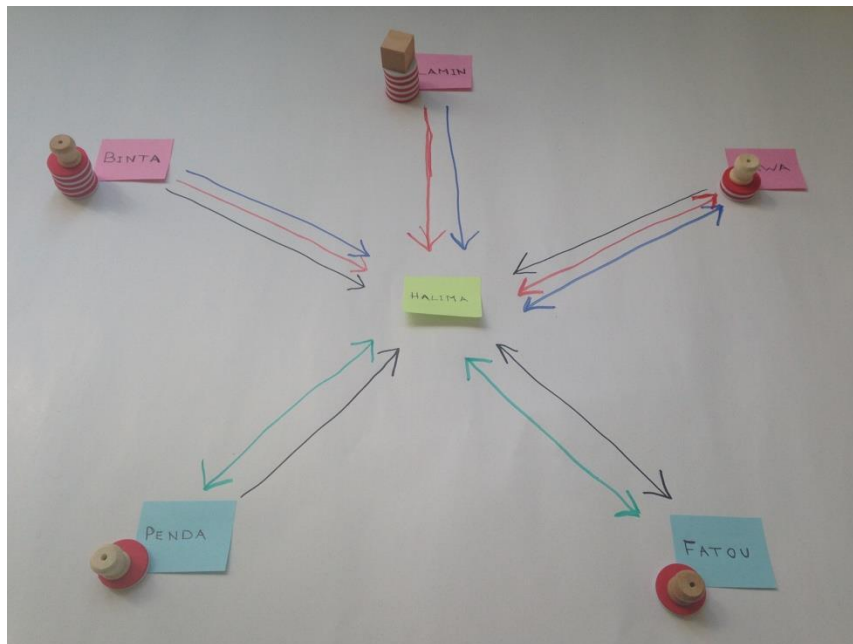
Interviewees then identified decision-makers and key influencers. Their names were written on post-it notes, and placed on a large sheet of paper. A square wooden block was used to designate males, and a round wooden block was used to indicate females.



Questions were asked about various types of social support, and the direction of the support was indicated by arrows. The types of social support investigated included material support (assistance) indicated in red, financial support (blue), emotional support (green), and informational support or advice (black).



And finally, plastic chips were staked to indicate a “tower of influence” – 5 chips indicating the most influential, and 1 chip being least influential. At the end of the interview, respondents – egos- were asked what they believed to be each network partner’s views on excision. The chip was face up red if they thought the alter preferred for excision to stop, and white if they believed they preferred for excision to continue.

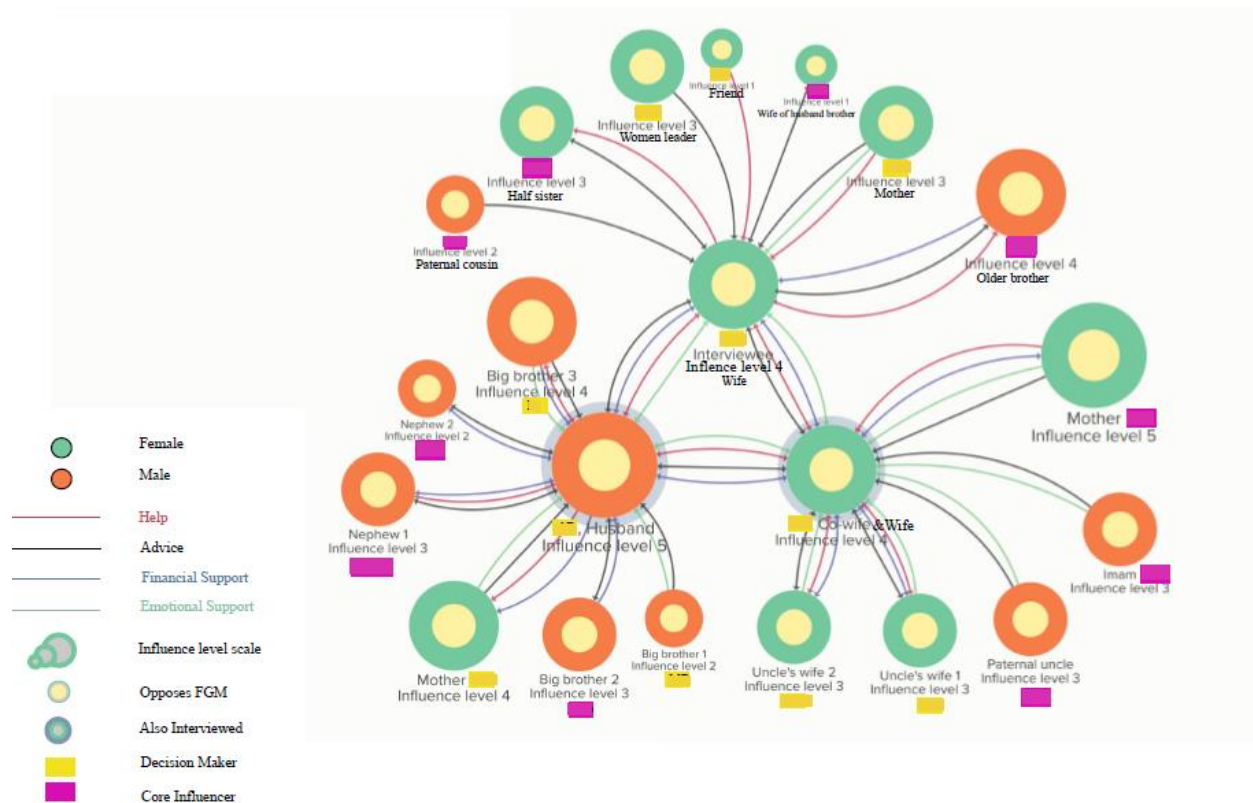


The maps were photographed, and then digitized and anonymized, and analyzed alongside the interview transcripts. The maps helped

interviewers frame specific questions, and these discussions form the heart of the network interview.

A sampling of our findings from social network analysis

Communities of care include both men and women, most often extended family members, but also in some instances neighbors and women’s group leaders. While women are most often in charge of routine care, men are typically involved in decisions over “important matters.” Hence men, particularly fathers of young girl’s, figure prominently in the networks of all respondents, females and males alike. In the context of the interview, we delved into whether these same network partners somehow influenced decisions regarding excision. Importantly, network partners identified by our interviewees – ego – as not directly involved in decision making are still embedded in interactions regarding children, and hence their perceived preferences may influence decisions.



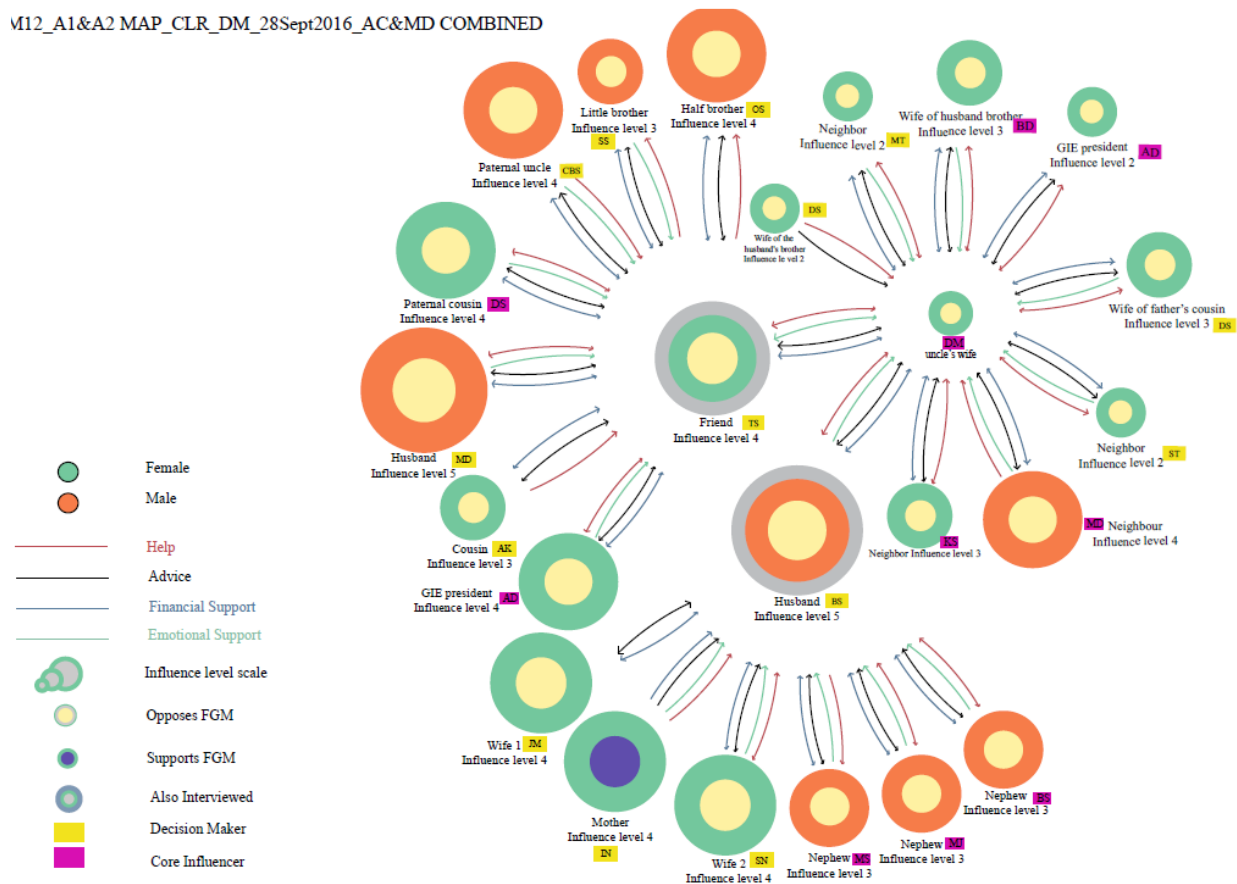
This network map was constructed in the course of 3 interviews, first with a young Mandinka mother named Diallo (pseudonym), her co-wife Fatouma, also a Mandinka woman, and their husband Ebrima, a Sereer man. Name generator questions with Diallo, and then separately with Fatouma and Ebrima, produced a large list of network partners. Those listed here are those who they identified as being decision-makers or core influencers regarding important matters regarding young girls. Most people listed are family members, and network partners for both women include both men and women, a pattern quite typical in our network interviews. Also typical is that the people with the greatest degree of influence are first and foremost the husband, followed closely by older women in their immediate families.

As our interviews turned to the subject of excision, both Diallo and Fatouma were very reticent. They provided responses such as “excision is not good,” or “it is harmful.” But when asked for further explanations, they simply said “I don’t know.” It was clear that excision is now a topic that they are not willing to publicly discuss. Their husband, Ebrima, provided a bit more insight by talking in general terms. “If it (excision) still exists, it must be in secret... I have not heard of it for a long time.” And later he explained, “This (excision) is done by the grandmothers. They come to collect any of their grandchildren to be excised. But to say they go and ask the fathers to give out money for his

daughter’s circumcision, no that does not happen.” From all three interviews, it became clear that excision had become a clandestine affair, and a family secret. At the same time, they all agree that excision is not linked to marriageability. When asked if excision plays a role in finding a husband, Fatouma replied, “No, you marry anyone you want to. They (men) do not consider that.”

M12

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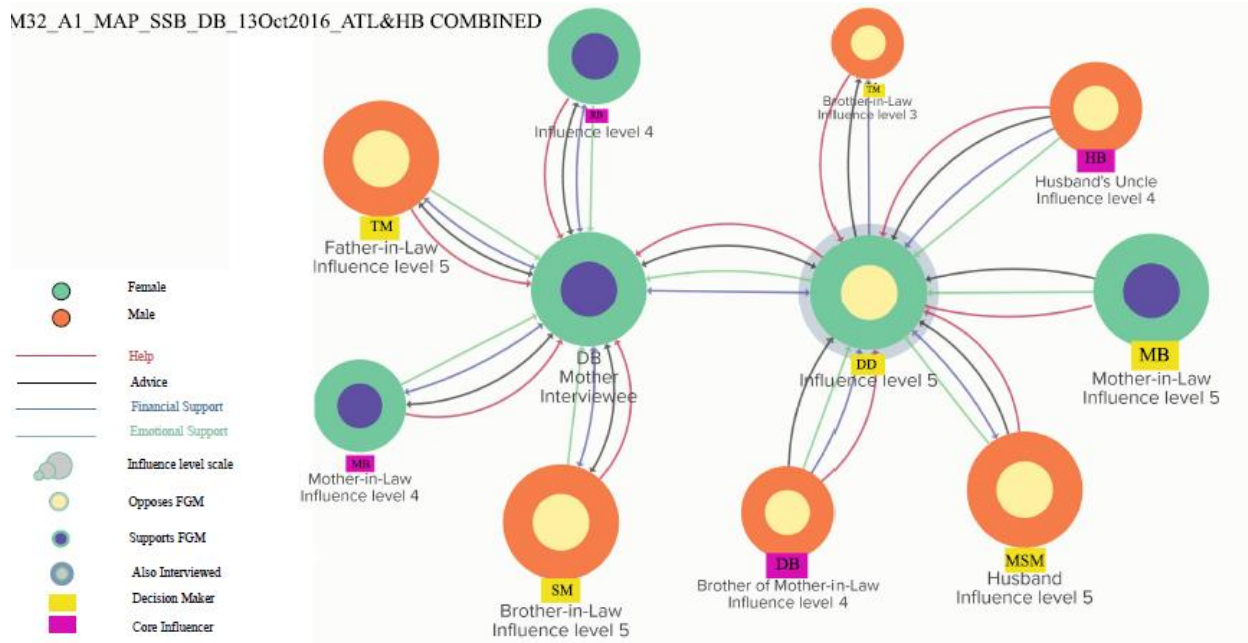


In this same community, a different story was told by “Binta” (pseudonym) is a 33 year-old Mandinka woman married for 18 years to a Serahule man, Bunama. Together they have 7 children. Binta’s eldest daughter underwent excision at the age of 3. The women present knew something was gravely wrong when the young girl fainted, and heavy bleeding continued. Binta and her husband rushed their daughter to the clinic. Binta explained, “the doctor refused to treat her. He said I deliberately circumcised her.” Because he blamed her for causing the injury, he refused to treat the young girl. They resorted to boiling herbs, and giving this to the girl to drink. “She recovered, but I decided to not circumcise my other girls.” Binta’s husband and co-wife Mariama supported this decision. “You could lose too much blood,” Miriama explained sadly. Binta’s mother-in-law remained unconvinced that girls in their family could be raised properly without undergoing excision, and she remains one of the rare outspoken supporters of excision in this community. Bunama explains, “As you can see, in this world consensus cannot be all the time.” His delicate role has been to convince his mother to honor their decision, and not defy the parents’ wishes and “take” the girls for excision, something that most agree

grandmothers have the right to do. Even though filial piety is a core value, as men age and becomes fathers, they gain stature in their own home, and acquire the authority to engage elder women, including their mothers, in discussions about matters pertaining to the welfare of their own children.

M31

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In our interviews in the high-prevalence communities, we learned that the dynamics surrounding excision are quite different. Nearly all people in the communities are Fula, and excision appears to be universally practiced. In this region, excision is considered to be essential for marriage and motherhood. Nonetheless, respondents here are keenly aware that anti-FGM campaign that have been ongoing throughout the region, and that excision is now criminalized.

Kadiatou (pseudonym) is a 19 year-old Fula woman, a married mother of two, with one boy and an infant daughter. When the topic of excision was first raised in the interview, she provided a stock response: excision should stop because it is “not good.” Because of her ease with our interviewer, herself a Fula woman, Kadiatou gradually opened up. She recalled the day when many in the village attended a bantaba – an open air meeting held under a tree in the village center. Presenters had come to the village to explain that excision is harmful, and for that reason, other nearby communities were now abandoning the practice. Men and women in attendance were asked to agree to also stop performing excision. Afterwards, women discussing amongst themselves decided that is it fine for men to publicly pledge to abandon excision because, “it is not their problem.” But the women were united in their refusal to support this stance.

Excision is now commonly organized and carried out in secret. A traveling circumciser comes to the home of the girl or a close relative in the pre-dawn darkness, performs excision, and departs before daybreak. In FGDs, one man explained, “Those who do it hide it and do it at an early age, just after birth. Most of the time the circumcisers come and go into a house and the girl is brought and excised in

the house.” Another man added, “Now, even a father does not know if his daughter has been circumcised. Everything is kept secret between the mother, the grandmother and the circumciser.”

In our interview with Kadiatou, she shared the many benefits of excision: girls who have been excised are well mannered. Men will prefer such a refined woman as a bride, as she will be respected by his family and community. And she will never be subjected to the insults and exclusion what would befall an uncut woman. “An uncut woman,” Kadiatou explains, “when people talk to her, they would say, ‘Get out of here! You have not been excised.’ She could be the victim of mockery and accused of being sterile... They would say, ‘she will not give birth.’” In this community, an uncut woman would be violating the dominant gender norms, raising suspicions about her private sexual behaviors and fertility. Violating norms related to the formation of gender identity, sexual restraint, and feminine virtue are associated with images of an incomplete woman who would not be deemed worthy of being a wife and mother.

Even though men in this network diagram are depicted as opposing the continuation of excision, their private approval is understood. They are not consulted in excision decision-making, differing from decision on other “important matters” regarding young girls. Some fathers still insist that as “chef de famille” or head of the family, they should be consulted on all important matters in their family. But in reality, they do not assert this authority when it comes to excision, and have allowed the arrangements to become “women’s business.” But their authority, along with that of older women, is understood, as is the gravity of going against their express wishes. Men’s negative perceptions of uncut women as wanton and insatiable, their repulsion of the image of uncut genitals, and their concerns over the standing of their family and marriageability of their daughters exert considerable influence over the continuation of excision, despite their lack of involvement in making arrangements for excision to be carried out and their public stance of opposition.

Conclusion

In conclusion, we do not find unequivocal support for predictions of the role of men generated from either the view of FGM/C as patriarchal oppression of women or as exclusive women’s business. The patriarchy argument, as elaborated by some second wave feminist, suggests men as oppressors of women should be ardent supporters of the practice of FGM/C, a finding that does not consistently bear out in our data. We find that while many men do support the continuation of FGM/C, they can be receptive to changes in social norms that uphold the practice, particularly regarding marriageability. Moreover, because of their power and authority in the domestic sphere, they can be crucial in supporting abandonment and influencing elder women, as younger women in the family lack the power and authority to do so. Our data also contradict the expectation of the women’s business perspective, which predicted that men should be uninvolved in decision-making. Even if men are uninvolved in making direct arrangements for carrying out excision, their preferences are understood and their influence is great. We also find that when fathers were involved in conversations regarding circumcision, girls were more likely to remain uncut in our low prevalence study site. These accounts provide a compelling rationale for examining FGM/C in terms of what Harrell and Santos (2017) refer to as generalized patriarchy, which considers simultaneously dimensions of power along axes of gender and generation. To this we add concern for the intersections of ethnicity, and broader social, legal and economic contexts that can shape and constrain choices.

The labels “victim” and “perpetrator” overlook the fact that gender socialization is a process handed down by generations, and only at times considered with critical reflection. Both men and women have internalized gender norms that shape expectations of feminine ideals, values and behaviors. As Grace Mose argues in Kenya, the inequalities that emerge for girls and women are often not deliberate, but assumed to be normal (Mose, 2008). Excision practices must be understood by reflecting on how gender norms are embedded in everyday interactions, how gender is performed, how virtue is perceived, and how women are sanctioned for failing to conform to gender norms (Armstrong, Hamilton, Armstrong, & Seeley, 2014). These findings fit with a body of work by scholars that interrogates the ways in which practices and customs constitute a means of “doing gender” – the way that gender norms are played out in public spaces and conform to prevailing notions of feminine ideals (West & Zimmerman, 1987).

Some have argued that the value placed upon excision by women themselves emanates from internalized oppression and a compulsion to apply the disadvantaged double standard established by men as an act of “defensive othering” (Schwalbe, Holden, Schrock, Goodwin, & Thompson, 2000); women, as subordinates to men, fear further marginalization and collaborate in gender-based stigmatization in an effort to distance themselves from a more oppressed category. However, focusing on women’s involvement in excision as a means of colluding with patriarchal systems and deflecting stigma to uncut women ignores the social benefits of the practice for women themselves; it overlooks the way in which excision is linked to regulating access of young women to the social capital of older women, and elaborating hierarchies of power between women, namely the power of elder women over younger women (Shell-Duncan et al., 2011). These social benefits operate as positive sanctions (inclusion, access to resources, power) upholding the practice of excision. Our findings resonate with those of historian Lynn Thomas, who, writing about colonial Kenya, argues that “Female initiation not only remade girls into women, it transformed adult women into figures of authority within their community” (Thomas, 2000: 136). She adds that “to reduce adolescent girls’ beliefs that excision would transform them into adult women to patriarchal conspiracy would be to ignore how the institution of female initiation regulated relations among women as well as between women and men” (Thomas, 2000: 131).

At the same time discursive approach suggests that the factors that contributed to the “othering” of uncut women have become weakened in recent years particularly in central Senegal, allowing for the emergence of cultural norms that slowly and subtly rework previous dominant ones. Men’s incentives to perpetuate excision have become weakened as it has become de-linked to marriageability. The multiple meanings ascribed to excision by women, and the social pressures that bring most women to support the continuation of the practice have not uniformly eroded. For some women, excision is still strongly tied to gender norms regarding the embodiment of feminine virtue. Yet knowing that excision is no longer a prerequisite to marriage and motherhood opens possibilities for critical reflection on other norms upholding the practice.

Social network analyses reveal that young women are positioned within hierarchies of power, being subordinate not only to men, but also older women. We suggest that recognizing the multiple domains that shape and constrain power, including but not limited to gender and generation, point to avenues for promoting positive social changes, namely change led by and supported by men and older women.

This suggests that men can play an important role in ending the practice of FGM/C, and should be involved in intervention efforts.

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