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**How Has The Journey to Womanhood Affected Female Somali Immigrants in America?**

by  
Angela Wambua

A Thesis

Submitted to the Graduate Faculty of  
St. Cloud State University  
in Partial Fulfillment of the Requirements  
for the Degree of  
Master of Science  
in Social Responsibility

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Thesis Committee:  
Dr. Sandrine Zerbib, Chairperson  
Dr. Ann Finan

## **Abstract**

This thesis discusses the practice of female circumcision among Somali immigrant women in a small Midwest community. The literature review gives the historical background of the practice, how it has been criminalized, how organizations are change agents and what impact culture has upon the practice.

In the methodology section, the research method is reviewed and highlights the success and difficulties of the qualitative research that was conducted over a span of 2.5 years. The section describes the process from the beginning of me having a presence in the Somali community to how I networked and used a snow ball sampling method to gain additional interviewees. The first woman who interviewed with me helped me gain the confidence and trust of the women who followed suit.

Additionally, the analysis explores the reasoning behind, and cultural meaning that is tied to the practice, and how it affects women for the course of their adult life. The analysis gives voice to the women's personal experience with the practice and in what ways it affects their sense of self. Their stories inform the reader about the impact of their culture and how it is challenged by being in the United States.

The conclusion discusses the findings from the interviews, and highlights the ways in which women feel they have been impacted. It then discusses what variables are at play in challenging the future of the practice.

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I feel that God made my body perfect the way I was born.  
Then man robbed me, took away my power, and left me a cripple.  
My womanhood was stolen.  
If God had wanted those body parts missing, why did he create them?

-Waris Dirie 1998

What gender means depends heavily upon on cultural values and practices; the ways a culture defines masculinity and femininity lead to expectations about how individual women and men should act and communicate; and how individuals communicate establishes meanings of gender that, in turn influence cultural views

-Julia Wood 1997

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## CHAPTER I: INTRODUCTION

It is estimated that there are approximately six to ten thousand Somali immigrants in the St. Cloud area (Anwar, 2010; Shaw, 2011).

Many Somalis, especially those who have lived in the Southern half of Somalia, have been dramatically affected by the continuing war that started in 1991 (Schaid, 2003). Somalis who lived in these areas fled to neighboring countries such as Kenya. As a result, the Dadaab refugee camp, located in Kenya, is the largest camp in the world (Taylor, 2011). According to (Schaid, 2003), there are many Somalis who came for refuge, looking for safe and permanent housing for their families in Minnesota and smaller communities like St. Cloud rather than Minneapolis because of perceived lower crime rates and more employment opportunities. The large amount of refugee services has also been a draw for Somali immigrants to Minnesota (Schaid, 2003). Many have been drawn to places in MN such as St. Cloud because of factory jobs or similar jobs that do not require well developed English skills (Schaid, 2003).

The topic of my research came from my travel to Kenya. Because of the large Somali populations that I saw in St. Cloud as well as Kenya I wondered how Somalis were adjusting to American culture that is much different from African.

After my marriage with a Kenyan man, we traveled to Kenya to visit his family. There I started to be aware of the various practices of *firaun* and *sunna*, (both type of female cutting that will be explained further later in this thesis). It is in the context of this awareness process that I began to inquire about this practice, in a small Midwest town, among Somali women. I became more interested in what *firaun* was, and the cultural significance of the practice. I wanted to inquire about the way Somali women immigrants regard the practice of *firaun* and the ways in which this practice shapes their experiences in the town that hosts a large community of Somalis.

It is important to research the experiences of Somali women in how they fulfill their cultural practices in a place where those practices and traditions are labeled as deviant by non-Somalis. Female Genital Cutting (FGC), which has been condemned by Women's Human Organization (2010) and remains a taboo subject among most Africans is a difficult topic to approach and made my research process challenging. However, I decided to take a feminist standpoint perspective in my research. My goal was to capture Somali women's experiences in their own words and with their own voice as I intended to gain a deeper understanding of this practice. In addition, I chose to be careful about the terminology I used to name these practices and decided to use the terms *firaun* and *sunna* (a version of *firaun*) instead of the term FGC, I will be using the term used by Somali women. *Firaun's* practice is based on removing a large part of female genitals while *sunna* is based on removing the least amount if any (*See appendixes for diagrams of types 1-3 and 4*).

I also came to realize that there was a gap in the literature in addressing the identities of Somali women who have undergone *firaun*, and their experiences in relation to social institutions. Many studies tackle the surrounding circumstances related to *firaun* such as from the standpoint of Somali women with *firaun*, but not particularly Somali women and their feelings about *firaun*, and how they lived their lives in a country that does not support their cultural values.

The goal of this thesis is to render more visible Somali women immigrant's views in regard to the issue of *firaun*. Hearing the voices of women from Eastern Africa is important to the understanding of *firaun* practiced in the U.S because too often other's voices get heard. It is necessary for Third world scholars to be a part of this discussion since this particular practice both originated in and is most practiced in Africa. There are insiders and outsiders to this



discussion, and third world women are the insiders. In the case of firaun, by using a feminist framework, old philosophy can be critiqued with a feminist approach with issues that surround the practice of firaun by third world women who know the issue first hand (Wangila, 2007). This research not only would fill a great gap in the literature on African immigrant women but also as my findings get disseminated, more awareness and understanding about Somali culture could be created as a result.

How does the practice of firaun affect or shape Somali women's experiences in a small Midwestern town in MN? My inquiry starts with the standpoint of Somali immigrant women in the town who have had firaun performed on their body. More specifically, I address the following questions:

1. How do Somali women define and understand the practice of firaun?
2. What are Somali women's perceived benefits and obstacles related to firaun? In which ways are their beliefs and practices gendered within their culture?
3. How does firaun shape their own sexuality?
4. Do Somali women immigrants feel "othered" as a result of firaun practices in their social interactions? And if so, in which ways?

## CHAPTER II: REVIEW OF LITERATURE

### A Debated Terminology

It is important to address the terminology used to describe these practices because they affect the women who have experienced those practices. When interacting with women who have had firaun performed, many may feel more comfortable with the terminology FGC (Female Genital Cutting), or female circumcision (FC), rather than FGM (Female Genital Mutilation). The terminology (FGM) is still used by the United Nations in official paperwork (WHO, 2010). The term for this practice is situational and varies in time and space. FGM and FGC have been accepted terminologies in the international community and Female Circumcision (FC) has been a preferred terminology by health practitioners.

A joint statement from WHO/UNICEF/UNFPA has classified firaun into 4 different types (See Appendix for 4 different types classified by WHO/UNICEF/UNFPA), and other organizations declare that within the scope of the practice of firaun, there are five different types. Somalis typically are involved with two of those different types: firaun and sunna.

The first type is circumcision, or what Somali's refer to as "Sunna", which has the least impact in terms of pain and amount of genitals removed of the five types as it only involves the removing of the hood of the clitoris. Infibulation, which Somalis call "firaun," is the third type, and is similar to the excision practice but after the infibulation of genitals has occurred, the genital areas are sewn up only leaving a very small hole for urine or blood to pass. Girls can be bound up after this procedure for over a month to develop scar tissue. The binding of girls for a month has become common place to prevent the re-opening of the stitches, and infection. Infibulation/firaun is a rite of passage for a Somali woman that's intended to make them pure and virgin like. Purity is a large part of their identity and their own sense of self (Vander, and Kwaak

1992). Women are also re-virginized by being infibulated after giving birth (Slack, 1988; Wood, 1997). Sunna is the least severe of the circumcision and infibulation is the most severe (Wood, 1997). If a mother decides not to circumcise her daughter, the daughter will be Suchuna, a social outcast (Wood, 1997). A future for a Somali woman can be dependent on this practice.

According to Dirie (1998:219), a Somali woman who has experienced firaun, she says, “An uncircumcised woman is regarded as dirty, oversexed, and unmarriageable.”

### **Overview of an Ancient Practice**

Somali women use the term firaun (or sunna), which is a practice that can be traced back to the religious story of Pharaoh (Arthur, 2000). It's important to note that just like many cultural practices that historically have been accepted at one point in time and place, firaun among other rituals have affected the views of women in society cross culturally. Firaun is a practice to Africans that can be compared to other practices on women's bodies. Practices such as piercings, tanning and plastic surgery have become accepted practices altering women's bodies supported by various cultural beliefs in modern societies. Body politics that are specific to time and place have legitimized practices like firaun and sunna.

Female circumcision has existed since 25 B.C.E and its origin has been traced back to Egypt (Knight, 2001). According to Todd-Chattin (2005), Agatharchides of Cnidus, a Greek historian, wrote about it occurring among the tribes on the coast of the Red Sea which today would be Egypt (2005). The practice has been traced to Pharaonic beliefs in bisexuality of the Gods (2005). Thus, both men and women were required to be circumcised to promote healthiness and proper development into men and women (2005). Forms of the practice have been done as early as when the Egyptians used to clasp the (fibula) Labia Majora of slave women to prevent pregnancies that would interfere with slave productivity (Wood, 1997).

### **From a “Natural” Practice to a Criminalized Practice**

Historically, firaun has been legal and a common cultural and religious practice but many countries have recently banned it. It has been estimated that worldwide, 130 million women and girls have undergone this practice, and another two million girls and young women are at risk each year. It is therefore estimated that approximately 6,000 women per day go through some form of FGC.

The United States is one of a handful of countries that is changing its Federal laws concerning the practice of Firaun. Firaun laws across all fifty states do not exist, resulting with varying laws state to state (US Code - Section 116 2010).

The FGM Education and Networking Project (2010) reports that only 16 out of 50 states including MN, have criminalized the practice, and in MN this includes women 18 and older.

The 16 states all vary in their laws and consequences concerning the practice (2010).

Consequently, many organizations have dedicated themselves to a cause supporting women and children’s rights by finding unique ways to enter different communities, who have varying belief systems to educate about the harms of firaun. In addition, the important cultural and traditions built around rites of passage can be difficult to maintain in host countries of immigrants. In the case of United States as host country for instance, according to McCarus (1994), the experience in reaching womanhood is much different for immigrants. Hoffman describes the differences for American girls vs. immigrant girls moving into adolescence learning new languages, femininity under patriarchy and combating new pressures in a new country (1994). In addition, (1994) she describes the interaction between immigrants and Americans, and how Americans deal with this issue incorrectly by treating those who are different from their ‘norm’ by polarizing them. This means that different ethnic groups build communities that they find that they are supported in

(1994). These ethnic groups look within themselves for a sense of identity if it is not supported by the culture that they are living in.

For instance, the Carnegie Council (2009), is an organization that deals with ethical issues in international affairs (2009) educating those who reside in Kenya about the practice of firaun. The Kenyan Dadaab refugee camp has people from all over Africa, but mainly Somalis, where 80 % of women undergo this circumcision (Dirie, 1998). Non-profit organizations within this camp are fighting against the practice through awareness and health education. Since 1993, the Sexual and Gender-based Violence program which was formed by the United Nations High Commissioner for Refugees, (UNHCR) (2009), has been supported by various NGO's, the Kenyan government, and activists (2009). The program uses a human rights approach to promote change because many refugees are familiar with this term, and the message it brings.

There are many more small organizations worldwide helping bring awareness and aid to those who are most affected by firaun in hope of eradicating the practice where they live, or in Africa. These organizations sponsor local organizations in places like Kenya to have African women and men who know the issue first hand bring change where they live. There are websites, commercials and announcements dedicated to bringing awareness to the harms of having firaun. An organization also exists that takes in runaway girls, helping support these girls in their decision to not have firaun performed, by providing food, shelter and support. The Kenyan government is using the promotion of city culture along with health education to stop firaun. These efforts can sometimes be difficult as the food, ceremony, and status in some cases that surround firaun and its practice lead women to associate firaun as a necessary and positive experience for a young woman. Because so much more activism is occurring, firaun is being

performed sooner among women. This is so they are unable to have the opportunity hear about practice and its harms before it's too late (Gacheri, 2005).

### **Gender, Immigration, Religion**

Prior to Somalis coming to the United States, the ongoing war in Somalia displaced many families from their homes forcing them to flee into neighboring countries such as Uganda and Kenya. In this process, there has been a shift in cultural norms regarding this practice where the new society they may live in does not support their values and especially in the refugee camps where there is an inability to practice such cultural norms with which they are accustomed to (Rebuilding Somaliland, 2005). Additionally, many social problems with younger Somalis not following traditional teachings regarding family values have developed among younger generations opposing old cultural traditions (Rebuilding Somaliland, 2005). The same social problems from their tumultuous history in Somalia may be occurring in a small mid-western town in Minnesota where young Somalis are being immersed in a completely non-African culture but expected to adhere to conservative culturally specific teachings and practices such as *firaun* that Many non-Muslim westerners cannot relate to. Somalis emigrating to the United States with their refuge status may be linked to the practice of *firaun* in how they maintain their cultural practices in a country where social norms and cultural practices are very different.

Some Muslim fundamentalist and westerners believe that Islam dictates the practice of *firaun*. Islam has had a major role in Somali families, but according to Islam, families are the foundation of Islamic society, which is based upon the Qur'an and the Islamic book of revelation (Sunnah) (Rebuilding Somaliland, 2005). The Qur'an and Hadith texts do not talk about the practice of *firaun*, which shows the subject being left to individual interpretation, and differing viewpoints (Abusharaf, 2006). Dirie (1998) adds that neither the Qur'an nor the bible talk about

cutting women to please God. Other Islamic beliefs like the wearing of the hijab and the practice of Purdah, the curtain, the separation of men and women fit into this discussion of the religious texts of Islam supporting Islamic beliefs that supports their sense of self that has been developed over time and associated to Islamic religion.

In terms of immigration, FGM has proved to be an issue that is intertwined with Immigrant Somali women and access to health services, as Somali women need to access health services, the practice of firaun may have an effect on the care they receive. Upvall, Mohammed and Dodge (2009), conducted a focus group interviewing 23 female Somali Bantu refugees about firaun and health care in America. The main finding of their research was to show that more competent care needed to be given to Somali women by health care providers and emphasized the existence of obstacles to Somali women's personal health, such as the lack of communication skills and education between patient and provider. A similar study done in Minnesota by the Minnesota International health volunteers (2002) showed that many of the women felt discrimination by staff in health care facilities, but none of the findings gave any kind of insight about the firaun practice among Somali women in Minnesota (2002). It is important that health care providers seek to understand the cultural beliefs and values of women who have undergone these procedures and provide informed and sensitive care (Tilley, 2015). The impact that health care providers could potentially have upon the future of the practice is immense, this is because those working in reproductive health are best placed to initiate and facilitate support for women with FGM/C both in the immediate and future context. (Journal of Reproductive and Infant Psychology, 2014).

### **A Rite of Passage and a Requirement for Marriageability**

After the customary practice of *firaun* is performed, the parents then choose a husband for the girl to marry immediately or in the near future. According to interviews performed by Robertson (1999), when a woman is not engaged or in an arranged marriage and finds a spouse for themselves the chance for this woman to be in abusive relationship increases (1999). Physical and verbal abuse is prevalent and sometimes even in public places.

Recently, a much more successful program in Nairobi, Kenya, has been started where “The alternative rites of passage program has been a successful strategy used by the Maendeleo Ya Wanawake Organization (MYWO) to end the practice of cutting while preserving the ritual but and enhancing the transmission of knowledge surrounding it” (Abusharaf, 2006, p. 18). This program acknowledges the African tradition but uses alternative means to obtain the value that is attached to having had *firaun*. Girls are able to have the attached value of being pure and a woman through this program that brings honor to not only the girl, but to the family and community from which the girl comes from. In this program when young girls reach “African adulthood” Girls complete a program instead of *firaun* where they are taught about their bodies, sex, and cultural traditions. When these young girls graduate from the program they put on shows for their families showing off traditional dances or learned crafts. “PATH and MYWO built a communication built on communication strategy based on the present state of knowledge and attitudes (Abusharaf, 2006, p. 82).

Girls would learn in the program positive aspects of their culture, respect for their elders and sex education. They would learn dances and perform skits for their families at the end of the period of time they were in the program. At the end of their stay, families



would bring cosmetics, gifts, candy, shoes clothing to mark their new position in society (Abusharaf, 2006, p. 90).

It is believed by men that uncircumcised women are too independent and may seek a divorce in the future after they have become married (Abusharaf, 2006). Myths like this one support the practice of firaun, as well of those previously discussed among the Egyptians.

Prior research conducted has addressed the myths that surround the practice, and believe in the power of myths with the misconceptions of the female anatomy that are spread among communities and generations of families.

Many of the immigrant mothers who are making these decisions about their daughters know little or nothing about their own anatomy. They are told that if the clitoris is left alone, it will grow and drag on the ground; that if their daughters are left uncircumcised, they will be wild, and will crave men. (Burstyn, 1995 p.1)

Somali women are pressured to embrace the firaun practice to fulfill cultural and tribal expectations. In addition, some professionals in the medical health field have suggested the idea of medicalizing this procedure, at least until it is eradicated completely. Firaun has been an attractive cultural practice because to Somali men and women, beauty, womanhood and marriage ability all are outcomes of having FGC. Today what we know about some of the reasons why women undergo firaun are based on the ideas that: they need to maintain less sexual energy, become marriageable and will not be promiscuous.

### CHAPTER III: METHODOLOGY

My intent was to conduct 10 in-depth interviews with Somali women from varying social classes and ages. However, being able to get participants to commit to the process of the interview turned out to be more of a challenge than already anticipated. I knew that I would be perceived as an outsider as an American woman who would be categorized as White. I spent countless hours visiting places I knew were popular among Somali women. I worked on building trust in my encounters with Somali women. I networked with Somali friends and leaders in the community to meet potential Somali informants that could lead me to building a rapport with Somali women members of their community. I also knew that the topic of my research was very taboo and potentially painful to talk about. I was able to make several contacts, but many of my potential interviews did not follow through with the process and often did not meet with me at times and places they had chosen for the qualitative interview to be conducted.

Because of the numerous no shows and the very challenging process of building trust in a fairly tight network, my analysis is based on seven interviewees.

I started collecting data after obtaining approval of my research protocol by the IRB (Institutional Review Board) at SCSU in 2009 but I took two years and a half to complete the data collection process. I was aware of potential stereotypes against white American women that could create resistance to participate in my research. Consequently I started to establish my role and identity among Somali immigrants by visiting many restaurants and businesses either owned by Somalis or popular among Somalis. I mentioned places I knew would show I had some knowledge of this practice, such as Eastly, in Kenya Nairobi, where the practice of female circumcision takes place for many Somalis. I paid attention to gender norms and sat where

women were sitting as well as dressed in a more conservative way by covering more parts of my body. I also made it known that I was married to a Kenyan and had a Somali sister-in-law. Eventually I started to be seen less as an outsider. Through a Somali friend of my husband, I was able to connect with a Somali woman who became a key informant and provided contacts of other Somali women. Most of my respondents were referred to me by word of mouth.

I conducted semi-structured interviews with Somali women who had to be at least 18 years old, who had experienced female circumcision, and who lived in central Minnesota. My open-ended questions were organized around themes such as immigration experience and cultural and gender identities (See research instrument in appendix). My in-depth interviews were recorded after obtaining an informed consent from my interviewees, transcribed on a secure computer, and analyzed. My semi-structured interview schedule allowed unanticipated full disclosure to emerge during my interviews regarding topics such as the complexity of their sex lives.

I transcribed my seven interviews and coded them by themes that started to emerge. I used a grounded theory method (Glaser and Strauss, 1967) consisting of using an inductive approach to analyze my data and on a systematic process that starts from the “ground.” I also use reflexivity approach in that I acknowledge by social location in relationship to my interviewees whose multiple social locations shape their life experiences in different ways than mine. My inquiry is based on Somali Muslim women’s standpoint and voices.

I also tried to establish contacts with Somali women by reaching out to non-profit organizations providing services to the Somali population in the community.

I was aware of the fact that Somali women accepting to participate in my research had to “out” themselves as someone who accepted to speak with a “stranger” and may, consequently,

bring negative attention to themselves. I made sure to guarantee anonymity and used only pseudonyms in this thesis

## CHAPTER IV: ANALYSIS

After a cross-case analysis of my data, I was able to uncover several key aspects about the practice of firaun and about Somali women who shared their experiences with me. Those key findings are organized as followed:

- 1) The meaning of firaun practice;
- 2) Cultural and religious changes between pre and post-civil war;
- 3) Societal pressure and adherence to a common religious perspective;
- 4) Knowledge of the firaun and sunna practices;
- 5) Interacting effect of personal experiences and personal or public relationships;
- 6) Attitudes towards own sexuality;
- 7) Dating process.

Below, I explore each of those themes with key illustrations from my participants.

### **The Meaning of Firaun**

As I started to ask about what firaun was and what it meant to my interviewees, the concept of virginity seemed to always get inserted in each narrative. The discussion of virginity and its place within Somali culture and religion has been identified by Somali women as being an important concept for young Somali girls, teenagers and those coming of age to be married. According to the Somali women I interviewed, the practice of firaun upholds the sacredness of virginity, and is a means to ensure that those who have had it performed will remain virgins, be closer to God and symbolically remain pure until their time of marriage. It was argued that without firaun, a young girl or woman could never be seen as a virgin or given proper respect. Circumcision was therefore seen as ensuring virginity.

Many of the Somali women I interviewed believed in maintaining traditional practices for their account but challenged those practices in regard to younger Somali women. For instance, six out of seven women interviewed said that they didn't want to have their daughters circumcised. These women saw this act as something that was inevitable for them, but wanted to make a change starting with their own children. They saw this practice as a physical and emotional scar they had to bear. Florina, for instance, described feeling "ashamed" of having had firaun performed on her. She seemed to resent having been circumcised. She shared with me that sometimes she felt uncomfortable having to open her legs during a doctor exam. She said the doctor knew she had it performed and told her he had already seen worse and did not ask her any question about it. This is a common occurrence with women who have had FGM according to Journal of Reproductive and Infant Psychology (2014), "It is often at the onset of pregnancy and/or during childbirth that the effects of FGM/C become problematic, with midwives often the first health care professionals to recognize that the woman has had the procedure." Six out of the seven women never wanted their own children to live the life they had experienced in terms of the long lasting effects that firaun brings to one's own life.

Sarah, a 21 year old college student, who had firaun performed when she was five years old, explains,

For me I just wish I was never circumcised. You can't just take a part of a person's body. It's that painful. It's not something you go through once in your life and then it's over but it's gonna be stuck with you for the rest of your life. I think it's what makes it that much more painful.

Some Somali women interviewees believed that Islam demanded that women be circumcised.

To maintain the virginity that a girl is born with, firaun must be performed to maintain it.

Many believed that having had firaun performed would ensure that a girl would not be outwardly sexual and that some more conservative beliefs and higher morals' standards would remain intact. Since having experience firaun is not visible, other acts such as the way women dress symbolizes that firaun has taken place seem to replace it.

For many Somali women it was very important to adhere to proper rules of attire dictated by cultural and religious expectations. There are certain expectations by traditional Somali men and women on how Somali women look and these expectations seemed strongly enforced. It was believed that the way a woman looks could speak volumes about who the woman is and the virtue she possesses. Being veiled entirely, being seen as a woman who does not talk to men and who follows the protocol for the community she lives in, she will be seen as being circumcised.

If she does not appear and perform in those terms then her circumcision is likely to be questioned along with her morals. A woman may be seen by peers or family as being promiscuous, or challenging the status quo. Generally speaking, a woman has ultimately passed her test into womanhood among the Somali community if she is seen to maintain these expectations.

Though the Qur'an talks about women needing to be covered from the eyes of men, it does not specifically determine to what extent, men and women have taken extreme measures to obtain Sunna in response to this uncertainty. Hannah argues, "Religion doesn't require FGC. The Qur'an says that you don't need it. It's culture that says FGC is good." Women refer to Sunna as extra credit in Islam. When women have Sunna they are regarded as being clean because this practice is regarded as a purifying process in the Somali community. Being a

proper Muslim/Somali ultimately is a type of performance that brings a desired traditional status. Since no one really knows whether a woman has had sex or not, this perception maintains the mystery of a woman's virginity that's hidden to others.

Today women's journey to womanhood means maintaining traditional values, religion and culture. Women have the important role of maintaining traditions and morals within the family and communities they live in. Faith and Fiona 20 and 22 talked about culture being a stronger force than that of religion. They both agreed that *firaun* was a part of culture, and not religion. They believed that the practice of *firaun* only existed because people thought that it was part of their religion. The practice of *firaun/sunna* was interpreted into assessments of Somali women's lives within the Somali community where they lived, based on the fact that if a woman was too social, talked to men, carried herself publically as too outgoing, or was not married, it then meant that she may not have been circumcised or not circumcised well enough the first time. Women are supposed to be more modest.

Denise, a thirty three year old widow and mother of six children, stated: "Firaun is changing; many practice sunna which is less severe." She personally did not believe in it, but she argued that religion demands it and calls for the practice of sunna, which aim is to make the clitoris bleed a bit. According to Denise and others, to be a better Muslim one must have experienced the practice of sunna because of the stigma for being not circumcised.

To establish that *firaun* has been performed on them, some women argued that they dress to mark their religious status and with the same token, to mark their *firaun* status. Though they are not required to veil themselves before they are married, many do to establish the *firaun* status.



Florina, a married 26 year old woman and mother of two children, who appeared at the interview as outgoing and easy to talk to, explained how she did not wear the hijab before she was married but did now. After she began wearing the hijab she experienced different interactions with professors and with people she had normal contact with before within the community. She felt that people saw her as less approachable when she wore the hijab or veil. Florina explained how women in the community had experienced pressure from their husband asking to dress “appropriately,” veiling themselves. She gets criticized by other Somali women about the way she dresses because she wears jeans sometimes and does not always cover herself the way traditional Muslim women do. This demonstrates the extent of influence fraun has on dress and the way others view your status of virginity. It also shows how much the practice of fraun and the way women dress are intertwined and how one impacts the other.

However, for Mary, a thirty-four year old woman, fraun had a different meaning. She believed that fraun’s practice helped women’s body to be cleaner and healthier than uncircumcised women’s bodies. She stated: “Women are unclean and having had fraun/sunna, it prevents women from smelling or getting wet, or having as many yeast infections like uncircumcised women.” She also stated that it is typical for mothers to check the size of their daughter’s clitorises and to compare them to siblings to determine a need for sunna. She added, “I can tell which women have not undergone a circumcision by their actions and behaviors.” Somehow, the practice of fraun is perceived to do more than altering the women’s bodies, it also help their behaviors.

While Sarah, a twenty one year old, also agreed with Mary’s belief that the Qur’an dictates the practice to some extent, she believed that the purification process from the Qur’an

was changed or interpreted differently by some Somalis consequently changing their perception on sunna and its meaning.

Some Somali women's views differ from the perceptions that the practice is sanctioned by religion. Hannah, a twenty-three year old woman has a different perception of firaun/sunna and why it was performed. She stated, "Religion doesn't require sunna/firaun at all. The Qur'an says that you don't need it. It's culture that says sunna/firaun is good." She legitimized the practice as part of Somali culture and not a religious requirement.

Somali women have different perceptions of the practice of sunna/firaun and why it is performed and to what extent it should be performed. They legitimize the practice in different ways but they seem to all agree it is a cultural expectation for a woman to have it performed to have good standing in the community.

### **Somali Pre and Post-War Culture**

Somalia started to modernize and then the civil war broke out. Women were blamed for the promiscuity of a nation that was thought to have brought on this war. Somali women talked about the period during the war and in pre-war times as a time when women wore mini-skirts and had afros as opposed to covering their hair with the hijab. And this was not seen as a tell tale sign of promiscuity. Instead, today, many seemed to see the tumultuous and violent state of Somalia and felt that the fighting and the loss of the social and political structure of their country in some way was their faults. They believed that their "immoral" behavior during those times contributed to the chaos that followed. Mary said, "Hijab started after the war in 1991-1993. People blamed God, God was thought to be punishing them with the war." Now many women believed that Sunna/firaun were a part of a purification process for Somali women in particular. There described two schools of thought among women as to what dictates the practice of

circumcision. Some women argued that religion did not dictate the practice but that culture did, while others believed it was actually religion that dictated those practices.

Moral burden was placed upon women, where as there is less consequences for men who violate the moral code of Islam. One interviewee explained, Muslim men need to be covered just as women. They all wear beards, their eyes are guarded and can't look at women. [I believe] it is the woman's benefit to cover up, so mans' not molesting us. The Qur'an says there is a need for women to be covered. She says that her husband or father didn't force her to cover up...it's for her own benefit as to not be molested.

Modest Muslim/Somali status in the United States is a performance, because no one seemed to really know one's status with fraun underneath your clothing. A woman's actions were a reflection of the family's status in the community and what kind of honor they held.

For a Somali woman, the fact that she had, or had not been circumcised was not visible and too taboo to talk about. There were other criteria built to determine if Sunna or fraun has been performed, and if they were virtuous as dictated by Islam and the Somali culture. Behavior in public and dress style could therefore be a marker of implicit purity.

In the United States, there were few Somalis who had all of their family in one place or even alive for that matter, thus most Somali women lacked the backing of family members who would be an extra voice in terms of a woman's circumcision status.

Outward appearances proved initially who and what a Somali woman "was all about." Furthermore, Denniston, Hodges, and Milos (1999) concluded that nowhere in the Qur'an

was male or female circumcision practices mentioned, or the word 'circumcision' was even included. Uncircumcised is used in one section being referenced to Jewish men and boys, but never in a literal sense.

The position of many authors discussed how circumcision was seen as obligatory for both men and women. The ramifications of taking part in circumcision for women are much different than it is for men and results could be detrimental in terms of sexual gratification.

### **Support and Maintaining of a Practice by Community, Peer and Family Pressures**

Firaun or sunna is a rite of passage within a tight community meant for girls and young women. All women who I interviewed described it as a coming of age ceremony. Firaun or Sunna is an act that prepares a young girl into becoming a young Somali woman of virtue. All of the women interviewed were young girls when they had it performed. Some women were circumcised as early as 6 years old. The Somali community has been maintaining its culture by putting an emphasis and value on firaun that impacts individual families performing this practice. This rite of passage that equates purity with self worth was supported and maintained by its members. The practice is foundational to maintaining the Somali culture and necessary for community building. Having had firaun/sunna is gratified as a girl or young woman will be showered with gifts and praised from those who support her in the community. Fiona stated,

Every girl wants to become circumcised because it's seen as something good in the culture almost a coming of age ceremony. They got clothes, candy and didn't have to go to school. The girls didn't understand the practice.

After the circumcision, a girl is now seen as a woman and as pure. This ritual, a rite of passage “marks” girls, not just as women, but as women who are respected by the community they belong to. They are not children anymore, but seen as respected and valued individuals.

The practice can be seen as a ritualization process, where other cultures similarly practice their own version. In the Western world, some teenagers take vows of abstinence in formal rituals such as quinceañeras, sweet 16 celebrations or purity balls. As young Somali children they see their friends, close or distant family members or groups of young girls in the community getting circumcised. Therefore, as girls, they grow up wanting to join and be a part of a certain exclusive group. They grow up seeing the firaun practice as a positive experience where girls are showered with gifts, receive acclamation, are decorated with beautiful henna, are given money and sometimes have a party where a goat is slaughtered in celebration of their development. Some girls begged to have sunna/ or firaun performed not realizing the lifelong pain that some women reported having the burden to bear. Some Somali women explained that as girls, they were “taught” to want it, but did not necessarily know the kind of pain that was involved. Sarah remembered her experience as a child, and stated, “I was so excited to be circumcised-that’s how much they made me love it, I used to cry every night.” Mary also believed strongly in firaun and sunna. She explained,

I cried to get sunna cause I didn’t wanna be different from the other girls.....I forced my parents to let me do it. Every year there were big groups of girls who went and got it done and I wanted to be a part of that experience.

The girls coming together as a collective group to have firaun performed, took part in a rite of passage that afterwards made them into “pure” women. Mary reiterated that “The purpose of sunna, is to be clean, just like men.” Hannah reported, “You feel better after having it done” After firaun, Denise remembered going shopping and receiving money. Many of the women interviewed recalled receiving gifts after having had the circumcision performed.

The custom, which is based on a reward system, reinforced the custom. Denise said “Firaun is preparing the girl for that point when she gets her period and develops into a woman.” Just like Muslim Somalis there are religious groups such as Christians who value virginity and find the act of sex sacred to their religious and cultural beliefs. Women within more fundamentalist Christianity groups receive an unspoken praise through acceptance in the community they belong to or church by abiding to the expectations of what is seen as being a “good” Christian.

Even though factions of different religions believe in different Gods, one could argue that, there are conservative traits that run through that for the most part all value modesty and fight the promiscuity of American popular culture. As a Somali woman, one of my interviewees conveyed the hard reality of having a daughter and not believing in the practice of firaun and having a husband and his extended family that does. She knew there would be a time where the discussion of circumcision would come up again when her daughter got older. She was able to divert the entire issue until her child came of age to have it performed.

Parents benefit from Firaun/sunna because the daughter is now “marriage material.” They assume that they will be able to get an appropriate dowry for her. Many families have an

immense amount of pressure before and after the wedding night because the daughter's confirmation of purity by the new husband affects dowries and success of marriages. Men will pay more money for a woman who has been circumcised in traditional culture than for a woman who has not. A woman who has been circumcised is seen as available for others to marry. She believes that she carries a new status that is highly valuable.

Circumcision of women plays out in their future marriages. Having had FGC is expected to guarantee purity, which is necessary to be marriageable. Purity is deemed necessary for finding a worthy mate, and determines the marriage selection process. Firaun/sunna benefits the community as the ritual makes another woman eligible in the community to be married off. The act of circumcision is being reinforced by the end result of being perceived as a highly valued young woman in the community. The stigma from the community of not having it done could be unbearable if it was known that a girl had not been circumcised. It's seen as shameful to "not be cut." The stigma of being non-circumcised is reinforced by the many myths about what may happen to a clitoris and, in relation to this, to the future of a young Somali girl and her character if she is not cut.

One can also argue that the chosen future husband benefits from the firaun practice as it serves to symbolize and ensure her virginity (depending on the severity of circumcision) because she will be sewn up until her wedding night. The Somali tradition also seems to support the right for a husband to divorce his wife if she is faulted for not having had sunna or firaun performed on her body. There are no repercussions for a man that has been known to be sexually active before this point, and no body marker of his virginity or lack of.

In my research, I found that my interviewees experienced a set of conflicting emotions. Their whole community participated in the circumcision process. Groups of girls were typically

all circumcised together, or sometimes by family units. Sometimes they are led into cold water to numb the area to be cut, or sometimes there is anesthesia or even nothing used depending on what type of circumcision is performed. Hannah recalls her experience with firaun when she was little, “A family comes and brings goat.” She remembers being 7 or 8 years old when she had it done with 9 other girls in her own house. She talked about how after the first and second girl was cut there was lots of blood and some ran away but she knew it would not be avoided.

Typically nurses, excisors or gypsies are hired to perform the circumcisions. There are exceptions to every case though and sometimes in rare instances fathers do it to their daughters. During this ritual, girls go through a variety of varying emotions. They experience excitement, and anxiety leading up to the circumcision, and then afterwards endure pain, but at the same time receive a new status and respect from others. The practice itself carries with it a set of very conflicted emotions that takes time to be processed. Florina remembered her Somali cousins talking about their experiences:

Before I was circumcised, and besides the pain, I remember them pointing to it as a positive thing; this kind of got me excited when my aunt told me that I too would be circumcised. I remember being happy, but I would always go and spend time with my aunt; she picked me up frequently and I used to get spoiled at her house, I think this was why I was really excited though.

There seems to be contradiction between pleasure and power. In American youth culture the importance of the clitoris is tremendous where many things are sexualized and the ways in which Americans have and find pleasure in sex is very important to relationships and finding potential spouses or mates. Some of my interviewees argued that the American culture was based on a problematic sexual drive. For instance, Mary was glad she had experienced sunna because she



condemned American uncircumcised women for using “plastic” in their sexual relationships even though they were married. She argued that those uncircumcised women have “a real appetite for sex,” but that it was not “their fault ‘cause they weren’t cut to control their sexual desires.” The Western construction of women’s sexuality, where historically there was no emphasis on women experiencing any sort of pleasure from sexual activity helped support both the misconceptions of what the experience of sex should be like for women and the idea that American women were defective. Mary believed that if some women had small clitorises they didn’t have to have sunna, but those who had large ones had to have it done. Somali men and women interpret girl’s clitoris’ size with a certain level of sexual “appetite” they are anticipated to have as adult women. A girl with a large clitoris may be perceived as being more apt to being sexually active early on before marriage, unfaithful in marriage or promiscuous, versus a girl with a small clitoris.

Faith and Fiona both argued that “Somalis think that when Somali women are too social or not settled that (means) you aren’t circumcised. Somali women are supposed to be more modest.” Somali women face a dilemma. On the one hand, they are pressured to undergo circumcision. On the other hand, they may experience difficulties with the ability to have an orgasm. They report that their husbands expect them to enjoy sex but that when they do not, they tend to have to resort to “faking it.” Men are expected to be the only ones to see the desire of their wives, but may be unable to witness that pleasure in their wives.

Florina shared a “common joke” with me regarding Somali women’s sexuality. She said Somali women “lay on their back playing with their gum while the man is inside her ....and when he comes they ask... are you done?” Florina also argued that “Somali men don’t like circumcised women any longer.” In addition, she was resentful about circumcision. She stated,

If I had a say I wouldn't touch my clit, because I feel that they took away some of my pleasures. [...] I feel like I have to concentrate while I'm having sex with my husband. Two of my friends who had firaun say they enjoy it they feel it, they have an orgasm. One (friend), she says she doesn't. She doesn't feel anything. She doesn't have an orgasm. She just pretends she's having, she's enjoying it just so that her husband can enjoy it. I don't think many enjoy sex. If I had my clit I think I would enjoy it more.

Body politics cross culturally have impacted women of all colors and religions. Women appeal to men's desires to get a desired outcome. Acts such as circumcision that were withheld to maintain the virtue of a woman for one man may challenge sexual relationships especially in a cultural context where experience pleasure in sexual relationships is normative.

### **Origin of FGC - What Somali Women Know About Firaun and Sunna**

What do Somali women know about the practice of circumcision? Sociologically, it is important to relate the lack of knowledge about the origin of this practice affects the perpetuation of firaun, and its practice on women. With knowledge comes power and the lack of knowledge about firaun may leave Somali women helpless to resist it. When there's no definite knowledge about the practice it tends to support the tradition. Since individuals, in particular, since women may have a limited access to the texts/religious explanations about Islam, it tends to provide other power over what a "good" Muslim should do. Who can argue what the purpose of having firaun is, if no one really knows where it came from? Who is most affected by this lack of knowledge? It appears that women are the most affected by this practice and the lack of knowledge about it.

I identified two story telling mechanisms that seem to be maintaining the firaun tradition: the story of Pharaoh and various stories that they have been told regarding the practice. Almost

all the Somali women I interviewed when asked about the origin of sunna/firaun brought the pharaoh story from the Bible in the time of the Hebrew slaves King Rameses. They thought that firaun was named after pharaoh. Some of my interviewees thought that the pharaoh created circumcision to punish women. Others thought that this was how he controlled work and production of women slaves that prevented them from having sex and therefore from having pregnancies that would then reduce their productivity. Some women thought that Pharaoh had concubines and that, “when he visited women and had sex with them, he didn’t want them having sex with anyone else while he was away so he had them sewn up... and would later know if they had been unfaithful to him if she was opened when he returned.”

One of the women I interviewed revealed a theory that the practice came from the Prophet Mohamed who was Arabian. She stated, “He said that cutting too much was bad for sex, and that sunna was better so now many Arab countries practice sunna.” Another Somali woman had no idea where the practice came from but stated that men were not being educated about the practice done to women. Florina didn’t know as much about the origin of the practice but knew that firaun was the worst circumcision and that it maintained virginity when a woman had been circumcised in this way.

It seems that what my interviewees know about the practice of firaun/sunna is that, eventually, it will be seen as an outdated practice that many newer generations of Somalis will be unable to relate to. Florina stated, “Men don’t like a circumcised woman anymore, that’s the reality of it. They prefer women that aren’t circumcised.”

Some of my interviewees finally argued that they did not understand the rationale behind the Pharaoh story. In addition, some Somali women thought the practice was used to be “mean” to them. This practice seems to pose a challenge to some of the women I interviewed because of

limited education, lack of advocacy, and the context of this practice currently rendered illegal in the United States. Combined, those elements seem to threaten a part of Somali culture and some aspects of their sense of self and of what the future generations will bring.

### **Culmination of Somali Women's Feelings Towards This Practice**

Some of the women I interviewed felt that they knew the practice was 'bad,' but that they were too young when it happened to be able to make a decision about whether they would have it or not. They know the practice is frowned upon by younger generations of Somalis and health professionals but at the same time, they believe that the religion and/or culture demands that it be performed. Women have a wide range of feelings toward this practice and some of my interviewees did not necessarily feel any less than any other woman for having it done. All but one of the women I interviewed reported never wanting this practice to be performed on their daughter. Only one woman, who had been circumcised, had made the decision with her husband to require that this practice be performed on their daughter. As there are now laws in the United States and in Kenya prohibiting the practice of firaun, this may present some risk and difficulty in trying to maintain their cultural views towards this practice.

One of the mothers I interviewed did not want to have the circumcision performed on her daughter but she was aware that it would become a topic of discussion between her and her husband due to his families belief in the importance of having it performed. . This particular interviewee was the only woman who had her husband present on and off throughout one of the interview sessions. He was surprisingly indifferent to the conversation that was happening in his kitchen.

Some women believed that women tended to be "harder on each other" than the men were on women when it came to making the decision of whether to have firaun or sunna

performed on their children. Women reported that Somali men under a certain age of approx 40 years were known to have relationships outside of their marriage in search of uncircumcised women able to enjoy sex. It seemed overall that younger Somali generations were more flexible about their traditional beliefs in terms of firaun or sunna than older generations, who tended to embrace more fundamentalist views in culture and religion. For the latter, this practice seemed to help them define who they were and to hold onto a certain concept of honor for their family.

### **Dating Practices**

Some of the women I interviewed reported that knowing whether a woman had had firaun/sunna or not had become an important topic of discussion during dating. Sarah explained that when she was getting to know a Somali man asking for a date, this man, had, at one point, asked her if she was circumcised. She chose not to reveal her status to boyfriends. She said that “three of her boyfriends have asked me.” She added, “A lot of boyfriends want to know if their girl is circumcised for quality of sex.” She emphasized the fact that women were not able to ‘sleep around’ but that she knew many Somali men in their twenties who were not virgins while she was. She was expected to be a virgin and so were they, but at the end of it all men got away with having sexual relations outside marriage. One time her parents found out that she was dating men, and they said that if she had been circumcised, she would not have behaved in that way.

For women in their twenties having had firaun affected negatively some of their relationships with men. Somali women saw men in their culture as responsible for holding a higher moral standard as many other men in the society that they lived in.

When it comes to dating currently in the Somali community, men are perceived as enforcers of traditional values but are also encouraging modern ones. Sarah said men were

modernized and did not want to date circumcised women anymore, and neither did she support this practice. The men have started to embody less traditional western values. She would never want her daughter to go through it. She wanted to educate her daughter about firaun so that she could hear about it from someone else first. Sarah only had sunna and said that she could not imagine how the other women could have had undergone the most extreme forms of circumcision. When she looked back upon her own experience she did not remember it being a particularly bad memory but said,

it is that painful. It's not something that you go through once in your life and then it's over, but it's something that's gonna be stuck with you for the rest of your life. I think that's what makes it more, like that much painful, cause you know it's not gonna end here.

One time when she was 17 years old she "broke down" to a teacher about her circumcision but had not really talked about it since. She argued that immigration had challenged the values of Somalis, and how they fit into the western world.

Sarah talked about the double standards between men and women, when it comes to dating. She stated, "Men are studs and women are hoes when they sleep around." Sarah said that she was in a small group of independent women who were not very traditionally dressed and that people in the Somali community did not like that. Girls separated themselves from one another because they might be judged for hanging out with her. She said, "For me I just wish I was never circumcised"

Hannah said that sunna/firaun was not a necessary practice anymore and that a woman should date and get married without having firaun/sunna performed. She felt bad after having experienced it and would never do it to her own daughter. She stated,

“Now some men are interested in women who haven’t had firaun. If a man really wants a circumcised woman he will go back to Africa for her. Everyone knows it’s not right. “

## CHAPTER V: CONCLUSION

Not all Somali women are the same. They don't have the same profile, and there is no generalized belief that can label all women. Each woman prepared for the practice of circumcision differently and had different experiences that have brought them to have very unique lives and viewpoints toward the practice of FGM/C. Women began their conversations with me by sharing their immigration story then their lives in St. Cloud, including the many aspects of their lives affected by *firaun* that most people are not aware of. They shared with me their personal experiences and gave me candid glimpses into themselves and their lives. I was both surprised by the information the women were willing and unwilling to discuss. Although the women I talked to had similar views towards the practice they expressed their experiences through their personal lens, making each story unique in its own way. Upon completion of my interviews I was able to see clear themes from the discussions I had in regards to *firaun* and *sunna*.

All Interviews show that women carry a certain private burden in their daily lives when it comes to having experienced *firaun/sunna* firsthand. For some it was a mental burden. For others, it was a physical or emotional burden. Some even found it to be a burden to live up to the rules and expectations dictated by their culture and religion.

Although the way the practice of *firaun/sunna* is viewed by Somali women may differ, some see it as a form of violence against women, while others view it as a cultural necessity for their daughters to undergo, it is evidently clear that the sociological implications for this practice amongst Somalis in America are great and unavoidable. With laws established to protect women and children against this specific practice, it will be harder to continue the practice on younger generations. For example, legislation has made it increasingly risky for parents to send their



children back to Africa to undergo circumcision. This coupled with the large financial expense to the Somali families to fly their children to Africa could be a big deterrent to the practice. With the education available via health care, media and educational systems about women's rights, specifically their bodies and topics such as violence against women, the debate to, or not to circumcise Somali women will become more and more prominent thus challenging the status quo within this culture.

As the debate on female circumcision continues within the Somali community, there are dissenting voices that are challenging the practice, giving voice to the women who feel that the practice has left them scarred. Not all women feel the same way about their bodies regarding the practice, but enough women have brought up troubling concerns that have caused others to take notice. I have noticed that Somali men who are brothers to sisters that had undergone the practice when they were children, are now fathers, and are starting to have conversations about the practice within their own homes that is challenging the practice. A seed of change has been planted and is starting to take root giving alternative ways to signify purity and marriageability among Somalis. I am a white woman who has had the opportunity as an outsider, to be let in by Somali women into a culture that I will never fully understand for many reasons. Even so, we are all women and I feel solidarity with them and a responsibility to share with you their issues as women, and to amplify their voices as they deserve to be heard.

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## Appendix

### Types of FGC

- **Type I** — Partial or total removal of the clitoris and/or the prepuce (clitoridectomy).
- it is important to distinguish between the major variations of Type I mutilation, the following subdivisions are proposed: **Type I a** removal of the clitoral hood or prepuce only; **Type I b** removal of the clitoris with the prepuce.
- **Type II** — Partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (excision).
- When it is important to distinguish between the major variations that have been documented, the following subdivisions are proposed: **Type II a** removal of the labia minora only; **Type II b**, partial or total removal of the clitoris and the labia minora; **Type II c** partial or total removal of the clitoris, the labia minora and the labia majora.
- Note also that, in French, the term ‘excision’ is often used as a general term covering all types of female genital mutilation.
- **Type III** — Narrowing of the vaginal orifice with creation of a covering seal by cutting and appositioning the labia minora and/or the labia majora, with or without excision of the clitoris (infibulation).
- **Type V. a** removal and apposition of the labia minora; **Type III b** removal and apposition of the labia majora.
- **Type IV** — All other harmful procedures to the female genitalia for non-medical purposes, for example: pricking, piercing, incising, scraping and cauterization. (WHO 2010).

## Informed Consent

### Informed Consent

**Title:** How has Female Genital Mutilation affected immigrant life in America?

**Primary Investigator:** Angie Wambua, Graduate Assistant seeking master's degree in Social Responsibility

**Telephone:** 320-310-6755

**Purpose:**

By conducting interviews I hope to see how FGM has affected the lives of Somali of Women in the U.S. The questions asked will attempt to reveal how Somali women really feel about themselves, their families, the community, and services they receive from health care providers.

**Study Procedures**

By conducting qualitative research I will develop questions for interviews that will give me a good perspective about issues women face after having FGM. I hope to see how FGM is affecting my target population, Somali Women and more specifically central Minnesota in large Somali communities such as St. Cloud, Rochester and Minneapolis where I will be conducting my research. With the help of students who have been informants for me, I will then use a snowballing method to find and interview the women who have undergone FGM, all the women who will be interviewed will be in their twenties. I will do in-depth interviews with approximately five women who have undergone any of the five types of FGM. I will take notes and also use a tape recorder with the written consent of the interviewee. I will take the rest of the current semester so finish my interviewing in St. Cloud MN.

**Benefits**

Benefits from this interview include, learning more about yourself, and contributing to a research study that may be beneficial in the future to make the lives of others who have also experienced FGM better, and to bring communities closer to one another.

**Risks**

There is a minimal risk to this interview because all interviewees will be kept confidential. In the research results only pseudonyms will be used to replace the real names of the women who took part in the interview. The interview will consist of approximately 35 questions that will range from where you grew up and immigration process, to the feelings and attitudes that you might have regarding the nature of your own experience with FGM, and experiences with health care providers and family interactions.

**Confidentiality**

The confidentiality of the information gathered during your participation in this interview will be maintained. Your personal identity will remain confidential. You will not be identified by your name in any published material. All data will be kept in external drive only accessible with password.

**Voluntary Participation/Withdrawal**

You can stop the study at any time, for any reason, without penalty. Your decision whether or not to participate will not affect your current or future relations with St. Cloud State University, the Human Performance Lab, or the researchers. The study investigator may stop your participation at any time without your consent if it appears to be emotionally harmful to you, or by your request.

**Acknowledgement of informed consent for Female Genital Mutilation interview**

I have read all of the information on this consent form and received satisfactory answers to my questions. I willingly give my consent to participate in this interview

**Subject Name (Printed)** \_\_\_\_\_

**Subject Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

St. Cloud State University

Institutional Review Board

Approval date: 4-2-10

Expiration date: 4-2-11

**Informed Consent**

**Title:** HOW HAS THE JOURNEY TO WOMANHOOD AFFECTED FEMALE SOMALI IMMIGRANTS IN AMERICA?

**Primary Investigator:** Angie Wambua, Graduate Assistant seeking master's degree in Social Responsibility

**Translator:** Fathiya Mohamed

**Telephone:** 320-310-6755

**Purpose:** By conducting interviews I hope to see how firaun has affected the lives of Somali of Women in the U.S. The questions asked will attempt to reveal how Somali women really feel about themselves, their families, the community, and services they receive from health care providers.

**Study Procedures**

By conducting qualitative research I will develop questions for interviews that will give me a good perspective about issues women face after having firaun. I hope to see how firaun is affecting my target population, Somali Women in St. Cloud, MN where I will be conducting my research. With the help of students who have been informants for me, I will then use a snowballing method to find and interview the women who have undergone firaun; all the women who will be interviewed will be 18 years or older. I will have the help of a translator who will abide by the same rules as the primary investigator that has attained IRB approval from St. Cloud State University. I will do in-depth interviews with approximately five women who have undergone any of the five types of firaun. I will take notes and also use a tape recorder with the written consent of the interviewee. I will take the rest of the current semester so finish my interviewing in St. Cloud MN.

**Benefits**

Benefits from this interview include, learning more about yourself, and contributing to a research study that may be beneficial in the future to make the lives of others who have also experienced firaun better, and to bring communities closer to one another.

**Risks**

There is a minimal risk to this interview because all interviewees will be kept confidential. In the research results only pseudonyms will be used to replace the real names of the women who took part in the interview. The interview will consist of approximately 35 questions that will range from where you grew up and immigration process, to the feelings and attitudes that you might have regarding the nature of your own experience with firaun, and experiences with health care providers and family interactions.

**Confidentiality**

The confidentiality of the information gathered during your participation in this interview will be maintained. Your personal identity will remain confidential. You will not be identified by your name in any published material. All data will be kept in external drive only accessible with password.

**Voluntary Participation/Withdrawal**

You can stop the study at any time, for any reason, without penalty. Your decision whether or not to participate will not affect your current or future relations with St. Cloud State University, the Human Performance Lab, or the researchers. The study investigator may stop your participation at any time without your consent if it appears to be emotionally harmful to you, or by your request.

**Acknowledgement of informed consent for Female Genital Mutilation interview**

I have read all of the information on this consent form and received satisfactory answers to my questions. I willingly give my consent to participate in this interview

Subject Name (Printed) \_\_\_\_\_

Subject Signature \_\_\_\_\_

Date \_\_\_\_\_

St. Cloud State University

Institutional Review Board

Approval date: 4-1-11

Expiration date: 4-1-12

## Interview Schedule Within Themes

### History of residency

What has been your immigration experience?  
 What country are you originally from?  
 What is the immigration experience of your other family members?  
 In what states did you first live after coming to America?  
 Who do you live with now?  
 Can you describe a typical day for you and your family in MN?  
 How do you see yourself? Do you classify yourself as American or Somali?  
 What did your life look like before you came to the U.S.?  
 What were the circumstances in why you moved?  
 In what ways did your life change since you came here?

### Identity

How do you identify ethnically here in the U.S., I am interested in understanding how you see yourself?  
 What does it mean to be a woman in Somali culture?  
 How do you become a woman?  
 How do women who have had firaun feel about those who have not?  
 What is the terminology used by Somali or African women for FGC/FGM/firaun?

### Family Practices

Where? And How old were you when you had firaun, and how old were the other girls whom you knew that had it done?  
 How old are many of the women getting married and why?  
 What do you expect to happen when you get engaged to be married in the U.S.? How will your family respond?  
 How will the cultural traditions of firaun be played out in the marriage process and wedding night?  
 How do you see your life in the U.S. where firaun is not supported?  
 Do you believe firaun is necessary for your family to practice?  
 Do you have children?  
 Girls or boys?  
 What issues do you struggle with concerning raising children and being in a different country?  
 Does your husband and family want firaun to be practiced in your household?

### Beliefs system

How do you practice the traditions of your culture?  
 Where do you believe this practice of firaun originated?  
 What were you taught as a child about firaun?  
 What was your own experience with firaun?  
 How does the Koran influence your personal experiences with firaun?  
 How could the practice of firaun be avoided, and still fulfill the cultural expectations of being a woman?  
 Have you ever heard of anyone performing a different ritual in place of performing firaun?



### Community Interaction

How involved are you with other groups or in the community?

How do you think the community views the practice of firaun?

Have you suffered discrimination because of firaun?

Has any specific incident come up where you had to tell someone in your community or family that you had firaun performed? What are their reactions? Why do you think they asked?

### Health Care

What is your experience with the health care system here?

How would you describe your interactions with doctors and nurses?

Do you have any problems communicating with the health care providers?

How does the health care provider find a solution to the language barrier?

How have you been treated when receiving health care?

Who is your health care provider?

Is firaun an issue when you see doctors and other health care practitioners?

Has firaun affected your health? And what types of healthcare have you received?

Do you see a counselor and if yes why?

### Sense of Self

What changes have taken place since you came here in your personal life and relationships with husband, family and friends?

How do you feel about your own firaun in terms of before and then after?

Is there a status issue surrounding those who have and do not have firaun performed?

### Relationship with Partner

How does the practice of firaun impact your relationship with others?

What is your relationship like with your husband or partner having had firaun?

Do you ever argue about firaun with your husband or partner about anything related to firaun?

Are there any issues that come up in your sex life that are related to having had firaun?



## St. Cloud State University Institutional Review Board (IRB)

Office of Sponsored Programs Administrative Services 210  
 Website: [stcloudstate.edu/osp](http://stcloudstate.edu/osp) Email: [osp@stcloudstate.edu](mailto:osp@stcloudstate.edu) Phone: 320-308-4932

**Name:** Angie Wambua  
**Address:** 510 8th Ave N #1  
 St. Cloud, MN 56303  
**Email:** [anan0601@stcloudstate.edu](mailto:anan0601@stcloudstate.edu)

### IRB APPLICATION DETERMINATION: APPROVED

**Co-Investigator:**

**Project Title:** How has Female Genital Mutilation Affected Immigrant Life in America?

**Advisor:** Sandrine Zerbib, Jiping Zuo

The Institutional Review Board has reviewed your application to conduct research involving human subjects. Your project has been: **APPROVED**

--IRB approval of a project expires upon the date shown at the bottom of this letter. The researcher must submit a Continuing Review/Final Report form in advance of the expiration date to report conclusion of the research or to request an extension.

--Informed consent documents must display the IRB's official stamp which shows approval and expiration dates. A stamped copy of the informed consent documents will be provided to the researcher upon IRB approval of the study.

--The researcher must seek approval for any changes in the study (its design, the consent process, funding sources, etc.).

--Adverse events (research related injuries or other harmful outcomes) must be reported to the IRB as soon as possible.

--The IRB reserves the right to review the research while it is in progress or when it is completed.

Good luck on your research. If we can be of further assistance, please contact the Office of Sponsored Programs at 320-308-4932 or email [jkuznia@stcloudstate.edu](mailto:jkuznia@stcloudstate.edu). Please use the SCSU IRB number listed on any of the forms submitted which relate to this project, or on any correspondence with the IRB.

**For the Institutional Review Board:**

Jodi Kuznia  
 IRB Administrator  
 Office of Sponsored Programs

**For St. Cloud State University:**

Dennis Nunes  
 Dean, Graduate Studies

OFFICE USE ONLY

SCSUIRB#: 734 - 903  
 Type of Review: Expedited

Today's Date: 4/5/2010  
 APPROVED: 4/2/2010  
 Expiration Date: 4/2/2011

SCSUIRB# 734 - 903

## OFFICE USE ONLY

Type of Review: Expedited

Approval Date: 4/1/2011

Expiration Date: 4/1/2012

**St. Cloud State University  
Institutional Review Board for the Protection of Human Subjects (IRB)**

**Name:** Angie Wambua**Advisor:** Sandrine Zerbib, Jiping Zuo**Address:** 510 8th Ave N #1

St. Cloud, MN 56303

**Email:** anan0601@stcloudstate.edu**Co-Investigator:****Research Title:** How has Female Genital Mutilation Affected Immigrant Life in America?

The Institutional Review Board has received your continuing review application and is extending approval of your research involving human subjects for another year.

Please note the following, which apply to extension of IRB approval:

--IRB approval of a project expires upon the date shown at the top of this letter. The researcher must submit a Continuing Review/Final Report form in advance of the expiration date to report conclusion of the research or to request another extension.

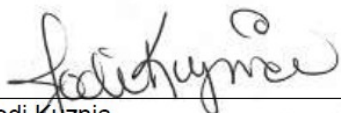
--Informed consent documents must display the IRB's official stamp. A new stamped copy of the informed consent documents, showing the updated approval and expiration dates, will be provided to the researcher when IRB approval of a study is extended.

--The researcher must seek approval for any changes in the study (its design, the consent process, funding sources, etc.).

--Adverse events (research related injuries or other harmful outcomes) must be reported to the IRB as soon as possible.

--The IRB reserves the right to review the research while it is in progress or when it is completed.

If you have any questions, please contact the Office of Sponsored Programs at 320-308-4932 or email jlkuznia@stcloudstate.edu.

**For the Institutional Review Board:**


Jodi Kuznia  
IRB Administrator  
Office of Sponsored Programs

**For the St. Cloud State University:**


Dennis Nunes  
Interim Dean, Graduate Studies