

Faculty of Arts  
University of Helsinki

# **YOUNG MEN AGAINST FEMALE GENITAL MUTILATION/CUTTING IN SOMALILAND**

DISCURSIVELY NEGOTIATING VIOLENCE, GENDER  
NORMS AND GENDER ORDER

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DOCTORAL DISSERTATION

To be presented for public discussion with the permission of the Faculty of Arts  
of the University of Helsinki, in Hall 302, Athena Building, on the 13th of December,  
2019 at 12 o'clock.

Helsinki 2019

ISBN 978-951-51-5620-4 (pbk.)  
ISBN 978-951-51-5621-1 (PDF)

Unigrafia  
Helsinki 2019

# ABSTRACT

In Somaliland, the prevalence rate for female genital mutilation/cutting (FGM/C) renders it nearly universal. An overwhelming majority of girls undergo the most radical type of FGM/C, locally referred to as pharaonic cutting. Yet, there is some evidence on a shift towards less radical types, locally labelled sunnah cutting. Amongst international institutions, researchers and activists engaged in preventing FGM/C, the practice is increasingly conceptualised as a human rights violation and as a form of gender discrimination. It is now argued that challenging stereotypes about gender power structures will pave the way for abandoning the practice. Simultaneously, researchers and activists urge men to voice their opinions about the practice.

This research provides a deeper understanding of the engagement of young men in the prevention of FGM/C, but it also critically examines men's engagement. Focusing on discursive practices, I examine how young men engaged in preventing FGM/C in Somaliland discursively negotiate violence against women, gender norms, and the gender order. I also explore whether these negotiations are on the one hand, consistent with those goals related to deconstructing the patriarchal gender regime and, on the other hand, consistent with locally prevailing masculinities.

My study is guided by critical studies on men and masculinities and by a critical discourse analysis, through which I address the complex and often hidden workings of power and ideology in discourse. To do so, I collected data via semi-structured individual interviews with 19 university students (15 men, 4 women) who volunteered in a project to advocate against FGM/C in Somaliland. The interviewees employed four interlinked discourses: the *righteousness discourse*, the *health discourse*, the *hierarchical difference discourse*, and the *masculine responsibility discourse*. These discourses challenge some forms of violence against women, while legitimating others. They (re)produce prevailing masculinities and hierarchical gender order in many ways, but there are also discursive elements that renegotiate prevailing gender norms, particularly idealised womanhood.

The findings of this study contribute to theories associated with female genital cutting as patriarchal violence, feminist theories on the workings of power and ideology within a discourse, and theories on men and masculinities. More practically, these findings can inform the design of programmes to prevent FGM/C, which should remain consistent with the deconstruction of patriarchal structures and practices that uphold FGM/C.

**Key words:** discourse, female genital mutilation/cutting (FGM/C), gender-based violence, masculinities, men, patriarchal gender regime, gender norms, gender order, Somaliland

# ACKNOWLEDGEMENTS

By 2013, as a dedicated UNICEF volunteer defender of the rights of children, I had read numerous reports on female genital mutilation/cutting (FGM/C). FGM/C fascinated me due to the controversies it entails, above all the fact that girls are exposed to the practice by their mothers, who aim to secure what they consider is best for their daughters. I was determined to support efforts to prevent the practice, and decided to hone my knowledge on the topic as well as add to our understanding of prevention strategies by undertaking this research.

I am deeply grateful to all of the people and institutions that made this study possible. First and foremost, I want to thank the 19 university students who were willing to share their experiences, and whose interviews serve as the primary data for my study. Many of them are still today engaged in preventing FGM/C, and some also act as mentors for the next 'generation' of student anti-FGM/C activists. This dissertation is dedicated to these student activists, and the local civil society organisations in Somaliland engaged in preventing FGM/C. I also thank the international non-governmental organisation and their local implementing partner organisation in Somaliland, the staff from which afforded me the opportunity to explore their project and assisted with the practicalities related to data collection. I am also grateful to the other four local civil society organisations in Somaliland and their staff members who were willing to enlighten me prior to the student interviews. In addition, I extend my warmest gratitude to my research assistants Khadar and Farhan and my driver Muhumed, without whom the collection of data would not have been possible.

I am eternally grateful to my supervisors, Associate Professor Marjut Jyrkinen and Associate Professor Lena Näre, for their time, encouragement, and valuable advice. Marjut has shown an unwavering commitment to my thesis from the beginning. She has been extremely supportive throughout, making our cooperation extremely smooth. She also appreciated my prior work experiences and studies outside gender studies, and understood my urge to build a career as a practitioner whilst writing this dissertation in the evenings. Lena also provided invaluable insight and constructive feedback, particularly regarding the research methodology. In addition, our joint article written with Marjut (Jyrkinen, Väkiparta, Lämsä, forthcoming 2019/2020) through the WeAll project<sup>1</sup> served as an excellent form of collaboration, and proved helpful in the discourse analytical approach.

I also want to offer my sincere gratitude to my pre-examiners, Professor Emeritus Keith Pringle and Adjunct Professor Marja Tiilikainen, for their valuable remarks, which helped me see the strengths and weaknesses of my

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<sup>1</sup> WeAll project (No 292883) is funded by the Strategic Research Council of the Academy of Finland.

work as well as the sections and chapters that required further clarification. I also thank Associate Professor Sofia Strid for serving as my public opponent, Professor Salla Kurhila for chairing the inspection committee, and Adjunct Professor Mira Karjalainen for serving as a committee member. Vanessa Fuller provided excellent and prompt work when proofreading the manuscript.

I have been working full-time outside academia—most of the time 250 kilometres from Helsinki—throughout the six years I have been writing my thesis. Thus, I did not have as many chances to join the academic community as I would have liked. However, the comments and feedback that I received during various courses and seminars I attended, primarily organised by the Gender, Culture, and Society Doctoral Programme, helped me immensely at various stages during the writing process. The Nordic FGC Researcher Network (Forskning om kvinnlig omskärelse, FOKO) has also proved valuable, and I managed to attend two FOKO seminars (Helsinki, 2016 and Höör, 2018). Those engaged in FGM/C prevention in Finland—especially individuals from the Finnish Institute for Health and Welfare and from the Finnish League for Human Rights—have provided support for my project since the very beginning.

Soon after my field trip in January 2017, the vision that prompted my decision to undertake this dissertation became a reality. I was recruited as an adviser on gender equality by the International Solidarity Foundation (ISF), which is engaged in preventing FGM/C in the Eastern Africa. That has offered me an extraordinary position from which to utilise some of the results from my study to practical ends. At ISF, I have a number of colleagues and friends for whom I am grateful. I want to thank, in particular, Airi Kähärä, who has 20 years of experience in promoting the rights of women and girls in, for example, Somaliland. All of my colleagues in the ISF Helsinki office have demonstrated their understanding of my project, even if that meant that my tasks have occasionally been delegated to others during my study leaves.

In 2014, when I became a doctoral student, I was working at the University Consortium of Pori. From the very beginning, I felt that my supervisors and closest colleagues understood that my research topic was my true passion, and would guide my future career. Yet, they were all highly supportive and flexible in terms of work arrangements when I had research seminars or attended courses in Helsinki. This also applies to the Finnish Red Cross, where I worked for a short period of time until I was recruited by the International Solidarity Foundation.

A travel grant provided by the Nordic Africa Institute at Uppsala University was crucial in covering the costs of the data collection period in Somaliland. In addition, a grant from the Kari Mattila Foundation covered part of the research assistant's salary. Likewise, a working grant from the Alfred Kordelin Foundation made possible study leave periods from my paid work, including the data collection period in Somaliland, and significantly contributed to the completion of this dissertation, together with a finalisation grant provided by the University of Helsinki.

Going further back, my mother and late father have remained highly supportive of my studies since I began lower primary school in 1984. I am also immensely grateful for my lifelong friendship with my dear sister. Furthermore, in the last several years, my mother as well as my parents-in-law have helped enormously by caring for my children when my husband and I have endured busy periods with our careers, studies, and positions of trust.

Last, but certainly not least, I want to thank my husband Janne, who has given all imaginable support to me and taken on the greatest responsibility in caring for our two sons Iiro and Arttu during my data collection trip to Somaliland and the half-year period when I lived alone in Helsinki before my family followed with our belongings. In addition to those periods, without complaining, he has taken on a major portion of the household chores whilst I have immersed myself in my thesis. This has also meant that my sons have had to endure my absent-mindedness for several years. I am enormously grateful to have this family that has forced me—at least now and then—to focus on something other than this dissertation. I am also indebted to my friends who have remained understanding and have forgiven my scarce communication during the last few years. I will try to make it up to all of you, whilst I continue to work on preventing FGM/C and improving gender equality and human rights through various fora.

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## ABBREVIATIONS

APD	Academy for Peace and Development
CDA	critical discourse analysis
CSMM	critical studies on men and masculinities
CSO	civil society organisation
FGC	female genital cutting
FGM	female genital mutilation
FGM/C	female genital mutilation/cutting
GBV	gender-based violence
MFA	Ministry of Foreign Affairs
MICS	Multiple Indicator Cluster Survey
MoU	memorandum of understanding
NAFIS	Network against Female Genital Mutilation in Somaliland
NGO	non-governmental organisation
SIHA	Strategic Initiative for women in the Horn of Africa
UNDP	United Nations Development Programme
UNFPA	United Nations Populations Fund
UNICEF	United Nations Children's Fund
VAW	violence against women
WHO	World Health Organization



# 1. INTRODUCTION

On 6 February 2016, the United Nations Secretary General Ban Ki-Moon declared that '[n]ow is [the time for men all over the world to take up the fight to end FGM<sup>2</sup> with real dedication', marking the International Day of Zero Tolerance for Female Genital Mutilation (O'Kane, 2016). According to UNICEF (2016), in 2015, at least 200 million girls and women were subjected to female genital mutilation/cutting (FGM/C) in the 30 countries comprising Africa and the Middle East, the region where FGM/C most often occurs. FGM/C as a practice is almost universal in, for example, Somalia, Guinea, and Djibouti, with prevalence levels exceeding 90% (UNICEF, 2016).

In recent decades, efforts to address FGM/C have intensified with support from governments, international institutions, non-governmental organisations (NGOs), religious and civil society groups, and local communities (UNICEF, 2013, p. 2). Initially, these efforts focused on the adverse health consequences of FGM/C, but by the early 1990s, the health approach fell from favour because campaigns failed to significantly reduce prevalence and inadvertently promoted the medicalisation<sup>3</sup> of the practice. Subsequently, at the 1993 World Conference on Human Rights, FGM/C was reconceptualised as a human rights violation, and many countries established national legislation on FGM/C (UNICEF, 2013, pp. 6–8). Furthermore, it is now argued that framing FGM/C as a form of gender discrimination and challenging stereotypes about gender relationships and power structures will pave the way for abandoning the practice (see, for example, Berg, Denison, & Fretheim, 2010; UNICEF, 2010; WHO, 2008).

Whilst FGM/C prevention efforts have extensively considered and addressed women's perceptions associated with the practice (Kaplan et al., 2013), a new line of academic research is emerging which addresses how men position themselves on FGM/C (see, for example, Abdalla, Omer, & Elmusharaf, 2012; Gage & Van Rossem, 2006; Kaplan et al., 2013; Sagna, 2014; Sakeah, Beke, Doctor, & Hodgson, 2006). However, based on a review of 20 peer-reviewed publications from 15 countries, Varol et al. (2015) argue that existing research remains limited, and little knowledge exists regarding how FGM/C affects men. Practical efforts to involve men in preventing FGM/C have been initiated in, for example, Sudan, Senegal, Egypt, and Gambia, Kaufman (2003, p. 21) notes. He describes, for example, male religious leaders who were engaged to pressure local imams to issue a *fatwa*<sup>4</sup> on the issue, and

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<sup>2</sup>FGM refers to female genital mutilation, whilst FGC refers to female genital cutting. Currently, a hybrid term, female genital mutilation or cutting (FGM/C), is often used by, for example, United Nations agencies. In *Section 1.1* below, I discuss the debate on the terminology and the way I use the different terms in this study.

<sup>3</sup>Parents turn to medical practitioners to cut their daughters or choose less severe types of cutting.

<sup>4</sup>The technical term for a legal judgment or learned interpretation that a qualified jurist (mufti) gives on issues pertaining to shari'a (Islamic) law ('Fatwa,' n.d.).

male political leaders who were recruited to promote alternative coming-of-age ceremonies and community declarations banning FGM/C. In fact, the practice was also opposed by (male) Muslim scholars also in historical times, as Johnsdotter Carlbom (2002, p. 57) points out, exemplified by imam an-Numan ibn Thabit ibn Zuta Abu Hanifah in the eighth century (Anees, 1989, p. 111), and Sudanese Muslim leaders in the mid-nineteenth century (Abusharaf, 2000, p. 164).

In 2013, struggling to specify my research aim related to preventing FGM/C, I found a fascinating notation in the *2011 Annual Report of the UNFPA–UNICEF Joint Programme on Female Genital Mutilation/Cutting* (Diop et al., 2012). The report described an emerging phenomenon in Kenya, whereby young men were assuming an increasing role in preventing FGM/C by publicly declaring their preference to marry uncut girls. This phenomenon seemed promising, because guaranteeing a girl's marriageability represents one of the root causes perpetuating FGM/C in several practicing communities (Gruenbaum, 2006; Mackie & LeJeune, 2009), and because statistics (from, for example, UNICEF, 2013) demonstrate that younger men in particular are increasingly more critical of FGM/C. However, most studies and reports (see, for example, Berg & Denison, 2012, 2013; UNFPA & UNICEF, 2015; WHO, 2008) that address the engagement of men in FGM/C prevention focus on religious scholars, clan leaders, and village elders. Less attention is given to the engagement of young men.

In this chapter, I discuss the terminology surrounding FGM/C and the role of men in both maintaining and preventing FGM/C. Lastly, I define my research aim and research questions, and outline the structure of this dissertation.

## **1.1 FEMALE GENITAL MUTILATION/CUTTING: TERMINOLOGY, TYPES, AND PREVALENCE**

Vigorous debate surrounds the terminology used to describe the cutting of the female genitalia. The term *female genital mutilation* (FGM), which is increasingly used by researchers in the social sciences, law, and criminology, by activists, and in policy documents in Western countries (Walby et al., 2017, p. 81), is 'thought to imply excessive judgment by outsiders and insensitivity toward individuals who have undergone the practice' (Eliah, 1996, p. 6). The less value-laden and less stigmatising term, *female genital cutting* (FGC), however, has been criticised for failing to sufficiently acknowledge the harmfulness of the practice (Shell-Duncan & Hernlund, 2000, p. 6). In addition, the term *female circumcision* (FC) appears to de-emphasise the severity of most types of practices by comparing it to the removal of the male foreskin (Obermeyer, 1999). The term *female genital surgery* (or a female genital operation), which attempts to neutrally describe the practice (Johnsdotter & Essén, 2015; Obermeyer, 1999), has been criticised for

legitimising the practice and implying that it is safe or necessary as a medical procedure (Lewis, 1995). To highlight that the practice violates the rights of girls and women, whilst simultaneously recognising the importance of employing respectful terminology when working with practicing communities, United Nations institutions currently use a hybrid term, *female genital mutilation/cutting* (FGM/C). In this study, I follow the United Nations strategy and use the term *female genital mutilation/cutting* (FGM/C) when talking about the practice in general—unless when directly quoting text or speech that employs different terms. Below, I describe how and when I refer to the main types of FGM/C practices in Somaliland, *pharaonic cutting* and *sunnah cutting*<sup>5</sup>.

The World Health Organisation (WHO, 2017) defines female genital mutilation as ‘all procedures that involve the partial or total removal of the external female genitalia, or other injury to the female genital organs for nonmedical reasons.’ Whilst the variety of procedures used to alter the female genitalia cannot be clearly divided into separate categories, WHO (2017) recognises four major types of FGM/C. The least extensive (type 1) is often referred to as *clitoridectomy* and involves the partial or total removal of the clitoris, and in rare cases, only the prepuce. *Excision* (type II) involves the partial or complete removal of the clitoris and the labia minora (the inner folds of the vulva), with or without excision of the labia majora (the outer folds of skin of the vulva). The most radical type (type III), known as *infibulation*, involves narrowing the vaginal opening by creating a covering seal. This seal is formed by cutting and repositioning the labia minora, or labia majora, sometimes through stitching, with or without removal of the clitoris. This closure must be re-opened for intercourse and childbirth, a procedure known as de-infibulation (or defibulation), generally followed by re-infibulation after each birth and often when a woman becomes a widow or divorces (Shell-Duncan & Hernlund, 2000, p. 4). Shell-Duncan and Hernlund (2000, p. 9) wrote that infibulation is largely confined to Sudan, Somalia, north-eastern Kenya, Eritrea, parts of Mali, and a small area in Northern Nigeria. Type IV includes all other harmful procedures performed on the female genitalia for non-medical purposes, including, for example, pricking, piercing, incising, scraping, and cauterising the genital area (WHO, 2017).

Each society, however, develops its own language and ways of classifying the types of cutting known to its members, which may not necessarily correspond to WHO’s classification. Establishing equivalence between such locally defined types of cutting and those proposed by WHO remains complicated (UNICEF, 2013). Newell–Jones (2016), Crawford and Ali (2015), and Lunde (2012), for instance, note that while the English acronym FGM refers to all types of procedures amongst most English speakers, in Somaliland

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<sup>5</sup>‘Sunnah’ cutting is commonly spelled in two ways: ‘sunna’ and ‘sunnah’. This study uses ‘sunnah’ consistently, except in the cases where in-text quotations are used and the cited author uses the spelling ‘sunna’.

it only refers to the more extensive type, also referred to as *pharaonic*<sup>6</sup> circumcision (*gudnin pharaonic* or just *pharaoni*) in Somaliland. Thus, Somalilanders see no contradiction in stating that they would under no circumstances let their daughters undergo *FGM*, whilst also considering it important that their daughters undergo the less extensive form of cutting, referred to as *sunnah* circumcision (*gudnin sunna* or just *sunna*) in Somaliland (Lunde & Sagbakken, 2014; Newell–Jones, 2016, p. 12).

Johnsdotter Carlbom (2002) argues that Somalis consider *sunnah* circumcision a religiously recommended act. This stems from the meaning of the word ‘*sunnah*’ in Arabic as ‘recommended’. Furthermore, the same understanding of that term falls within one of the five categories to which all human actions can be classified according to Islamic law: 1) required/commanded; 2) recommended; 3) permitted; 4) disapproved; and 5) forbidden (Johnsdotter Carlbom, 2002, p. 54; referring to B. Lewis, 1994, p. 5). Accordingly, Crawford and Ali (2015) claim that the term ‘*sunnah*’ can refer to any type of FGM/C Somali people believe is required or sanctioned by Islam, and can thus refer to WHO type I, II, or even III. They also recognised the increasing use of the *intermediate* type of FGM/C, which involves less stitching than the pharaonic practice and likely emerged in response to government interventions to eliminate pharaonic cutting. To increase its acceptability in comparison to the pharaonic practice, this intermediate type is sometimes called ‘*sunnah*’ or ‘*sunnah 2*’, particularly amongst women (Newell–Jones, 2016, p. 12). However, *sunnah* cutting may be close or equivalent to pharaonic cutting in reality because traditional cutters primarily responsible for performing the practice in Somaliland are often unaware of the differences between specific practices (Akar & Tiilikainen, 2009; Lunde, 2012; Vestbøstad & Blystad, 2014). *Table 1* draws upon Newell–Jones’ (2016) report and summarises how the FGM/C practices in Somaliland relate to the WHO’s classification.

During my fieldwork, I attempted to emphasise that I refer to all types of FGM/C practices—not simply the most extensive types. Thus, I avoided the term female genital mutilation and the acronyms FGM and FGM/C during interviews. Instead, I employed the terms female genital cutting, *sunnah* cutting, and pharaonic cutting. Accordingly, in the text here, I use *sunnah* cutting and pharaonic cutting when referring to the primary types of FGM/C practices in Somaliland. When talking about the practice in general, I use the term female genital mutilation/cutting (FGM/C), as discussed at the beginning of this chapter.

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<sup>6</sup>The term pharaonic circumcision refers to a belief that the pharaohs of ancient Egypt performed similar operations on women (Talle, 1993, p. 105; referring to Widstrand, 1964).

**Table 1.** *Types of FGM/C practiced in Somaliland and the equivalent World Health Organisation classification (adapted from Newell-Jones, 2016, Table 4A)<sup>7</sup>*

<b>Sunnah WHO type I</b>	Partial or complete removal of the clitoris (clitoridectomy), requiring no stitching. Often described as removal of the tip of the clitoris in Somaliland.
<b>Sunnah 2/intermediate WHO type II</b>	Partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (excision), requiring two or three stitches to partially close the vaginal orifice.
<b>Pharaonic WHO type III</b>	Narrowing of the vaginal orifice through the creation of a covering seal by cutting and re-stitching the labia minora and/or the labia majora, with or without excision of the clitoris (infibulation), requiring four to seven stitches and resulting in a very small vaginal orifice only.

In many countries, the systematic collection and analysis of data on FGM/C began quite recently (UNICEF, 2013). According to UNICEF (2013), over the last two decades, reliable data have been collected through two major household surveys: the Demographic and Health Surveys (DHS) and the Multiple Indicator Cluster Survey (MICS). Nationally representative data on the prevalence of FGM/C among girls and women ages 15 to 49 is now available for 29 countries: 27 countries in Africa, Yemen and Iraq (Shell-Duncan et al., 2016). As the availability of representative data increases, there is more accurate figures on the number of girls and women who have undergone the practice. According to UNICEF (2016), at least 200 million girls and women alive in 2015 were subjected to FGM/C in the 30 countries in which concentrates. In addition to the challenges associated with the terminology and classification, collecting reliable data is, however, further complicated by the fact that many women may be unaware of the specific procedures performed on them (UNICEF, 2013).

A UNICEF (2013) report showed that urban, wealthier, and educated people less frequently carried out FGM/C than their rural, poorer, and less educated fellow citizens. Rural communities are more likely to be kinship-based with limited cultural diversity, whilst urban areas are often more culturally diverse. Urban residents may more often observe that uncut girls and women do not experience social sanctions. Economic development increases commerce and migration, weakens traditional family structures, draws women to enter the labour market, and, hence, changes their economic and social roles as well as their dependence on FGM/C as a means to secure their future through marriage. Wealthier households are also likely exposed to more information on FGM/C and may meet and engage with individuals who do not practice FGM/C. According to UNICEF (2013), in high and low prevalence countries alike, the prevalence of FGM/C is generally highest

<sup>7</sup>WHO type IV, such as pricking and piercing, is not prevalent in Somaliland and is, thus, excluded from the table.



amongst the daughters of women with no education and decreases substantially as the mother's educational level rises. Schools provide a social environment conducive to new ideas, and social ties with peers who oppose FGM/C. Furthermore, educated women are more often exposed to FGM/C intervention programmes, media messages, and international discourses.<sup>8</sup>

## **1.2 MEN'S INVOLVEMENT IN THE PREVENTION OF FGM/C**

Despite some geographical variation, men seldom directly participate in the decision-making surrounding and the execution of FGM/C (Kaplan et al., 2013). As a practice, mothers, grandmothers, or other elderly community women perform FGM/C (see, for example, Mackie & LeJeune, 2009; UNICEF, 2010). Hence, FGM/C represents a form of gender-based violence in which women comprise both the primary victims and main perpetrators. Whilst women appear to stand at the forefront of perpetuating FGM/C, men also play a significant role in its continuation as fathers, husbands, and community and religious leaders (Kaplan et al., 2013; Varol et al., 2015). Correspondingly, women who decide that their daughters will not undergo FGM/C often face both peer pressure and helplessness, particularly when not actively supported by their husbands or influential male leaders from their communities (Kaplan et al., 2013). The belief that men support FGM/C alone can represent an important motivating factor influencing women's behaviour vis-à-vis cutting their daughters (UNICEF, 2013). As Kaplan (2013, p. 9) states, 'In the secret world of women, avoiding discrimination is a powerful motif to perpetuate FGM/C, and this social force must be acknowledged. However, men's power to influence it should also not be disregarded.'

Varol et al.'s (2015) systematic review of studies exploring men's attitudes, beliefs, and behaviours concerning FGM/C in 15 countries, as well as a UNICEF (2013) investigation conducted in 16 countries, revealed the ambiguity in men's views regarding the continuation of FGM/C. In most countries analysed by UNICEF, both women and men expressed similar levels of support for FGM/C. In some countries, more men than women want to end FGM/C, whilst in other countries more women than men would like the practice to stop. In Senegal and Gambia, for example, Shell-Duncan et al. (2010) found that more men than women favoured ending FGM/C; furthermore, when men were involved in deciding whether their daughters should undergo FGM/C, daughters more often remained uncut. In

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<sup>8</sup>According to UNICEF (2013), Somalia serves as an exception to these trends: 48% of girls from the richest quintile, compared to 49% from the poorest quintile, have undergone FGM/C; and 56% of mothers with a secondary or higher education reported that their daughters had undergone FGM/C compared to 43% of mothers with no education. According to Ismail et al. (2016), in Somaliland, however, 11% of women with no education would not perform FGM/C on their daughters, whilst this share climbed to about 26% amongst women with a secondary education, and roughly 36% amongst women with a higher education.

Somaliland, too, young men more than older men or young women favoured not cutting their daughters (Newell–Jones, 2017, pp. 23, 27).

Varol et al. (2015) claimed that notions of social obligation, religion, education, ethnicity, urban living, and migration, and an understanding of the negative consequences of the practice influenced men's support for abandoning FGM/C. They found that education most strongly influenced support for ending cutting. Furthermore, UNICEF (2013) demonstrated that uneducated men were more likely to support FGM/C than men with a secondary or higher education, and household wealth associated with relatively lower levels of support for FGM/C. Both patterns mirror those from a UNICEF investigation amongst girls and women. For example, in Gambia, Kaplan et al. (2013) found that ethnic identity decisively shaped how men viewed FGM/C—that is, more traditional groups exhibited greater support for the practice.

The role of migration influences thinking on FGM/C, as shown in studies amongst Somali men living in Norway (Gele, Johansen, & Sundby, 2012; Gele, Kumar, Hjelde, & Sundby, 2012). Migrant men no longer feel socially pressured to support FGM/C. Such men maintain that it is prestigious for a woman *not* to be cut. They claim that FGM/C continues in Somalia due to social obligations; that is, men dislike FGM/C, but agree to it so as not to upset their mothers. Mitike and Deressa (2009) found the same pattern in Ethiopia, where 89% of male Somali refugees valued anti-FGM/C interventions. Varol et al. (2015, p. 12) claim that this highlights the diminishing social pressure: 'When people are granted their basic human rights with stable and improved social and economic living options, the need to cut their daughter for marriageability and economic survival is removed.'

Moreover, socio-demographic factors influence how men frame and value FGM/C, and the benefits and advantages they associate with the practice. In 8 of 11 countries included in a UNICEF (2013 Table 6.3) investigation carried out amongst men aged 15 to 49, the most widely mentioned benefit of FGM/C for a girl was 'no benefit' (multiple responses allowed). Often mentioned benefits included social acceptance (mentioned by at least 10% of respondents in 7 out of 11 countries), preservation of virginity<sup>9</sup> (mentioned by at least 10% in 5 out of 11 countries), and religious requirement<sup>10</sup> (mentioned by at least 10% in 4 out of 11 countries). Other reasons cited consisted of cleanliness or hygiene, marriage prospects, and sexual pleasure for the man.

By contrast, the reasons men cite for abandoning the practice of FGM/C stem from an understanding that religion does not mandate it and that it may negatively impact sexual relationships, whilst few men conceptualise FGM/C as an act of violence or as an infringement of women's rights (UNICEF, 2010, pp. 17–23). Men in northern Sudan (Berggren et al., 2006) and Egypt (Fahmy, El-Mouelhy, & Ragab, 2010) viewed themselves as victims of FGM/C,

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<sup>9</sup>Preserving virginity also includes categories such as 'preventing premarital sex' and 'reducing sexual desire'.

<sup>10</sup>Required by religion also includes categories such as 'religious demand' and 'religious approval'.

describing complications such as sexual dissatisfaction resulting from it. In another study in Sudan (Almroth et al., 2001), men reported that FGM/C caused them difficulty during sexual penetration, resulting in wounds on or infections in the penis as well as psychological problems. In studies by Warsame and Talle (2011) and Vestbøstad and Blystad (2014), respondents in Somaliland reported men beginning to prefer entirely uncut or mildly cut wives given the diminished sexual drive of infibulated women. In addition, Bruchhaus (2013) found an emerging trend in the urban areas of Somaliland and amongst educated young men to marry ‘untouched’ (uncut) girls, girls also referred to as ‘digital’ reflecting their modernity and sensitivity.

Whilst younger men in particular are now becoming more critical of FGM/C, women typically underestimate the proportion of men wanting FGM/C to end. This results from many couples considering FGM/C an inappropriate topic for discussion between a husband and a wife, as well as because men hesitate to approach a topic often considered a ‘women’s issue’ (Johnsdotter Carlbom, 2002, p. 143; Kaplan, Nuño Gómez, Thill, & Vitale, 2017). Furthermore, organisations that deal with FGM/C are primarily women’s organisations, whose grassroots audiences consist of other women, whereby men often lack information on the practice of FGM/C (Gele, Johansen, et al., 2012).

### **1.3 AIM, RESEARCH QUESTIONS, AND STRUCTURE OF THIS DISSERTATION**

My research interest is to gain deeper understanding and problematising of the engagement of young men in the prevention of FGM/C. The research interest draws on three suggestions. First, framing FGM/C as gender discrimination and challenging gender power structures will pave the way for abandoning the practice (see, for example, Berg, Denison, & Fretheim, 2010; UNICEF, 2010; WHO, 2008). Second, men’s opinions on FGM/C should be heard, and more men be engaged in efforts to end FGM/C (see, for example, Abdalla et al., 2012; Gele, Bø, & Sundby, 2013; Ismail, Ali, Mohamed, Kraemer, & Winfield, 2016; Kaplan et al., 2013; Lunde & Sagbakken, 2014; Mölsä, 2008; Newell-Jones, 2016; Shell-Duncan et al., 2016; Varol et al., 2015). Third, masculine norms do not include solidarity with women, and promoting gender equality is often viewed against men’s interests. Thus, men who advocate for gender equality may face ridicule, contempt, and anger (Adams & Coltrane, 2004; Connell, 1995; Flood, 2004; Ruxton & van der Gaag, 2013).

Specifically, this study focuses on discursive practices, aiming to examine how young men engaged in preventing FGM/C discursively negotiate violence against women, gender norms, and the gender order. Furthermore, I explore whether these negotiations are consistent with, on the one hand, the goals related to deconstructing the patriarchal gender regime and, on the other

hand, with locally prevailing masculinities. To do so, I attempt to answer the following *research questions*:

- (1) How do young men engaged in preventing FGM/C, discursively negotiate the essence of FGM/C practices, gender norms, and the gender order?
- (2) How do these discourses (re)produce or challenge violence against women, prevailing gender norms, and hierarchical gender order?

To answer these questions, I carried out fieldwork in Somaliland, a de facto state and the northern autonomous region of Somalia, where FGM/C prevalence is close to universal. My analysis focuses on university students who volunteered in an anti-FGM/C project implemented by a local civil society organisation (CSO). The data consist of semi-structured individual interviews with 15 male students, enriched by interviews with four male students and seven local CSO employees engaged in anti-FGM/C projects.

This dissertation consists of seven chapters. In *Chapter 2*, I set the scene for exploring FGM/C and gender in Somaliland. I first discuss different understandings of violence and bodily integrity amongst international institutions, communities that practice FGM/C, and researchers. I then address gender norms and the status of women in Somaliland, as well as the prevailing FGM/C practices and the mechanisms that maintain those practices.

*Chapter 3* outlines the theoretical framework, drawing upon the critical studies on men and masculinities (CSMM) framework, the centrality of which recognises gendered power in the context of men and masculinities. After describing the postmodern feminist critique of the CSMM framework, I proceed to a discussion of theories on patriarchy—the dialectical relationship between the patriarchal gender regime, and structures and practices that constitute it. I then outline how FGM/C relates to other patriarchal practices, such as women’s socio-economic subordination. I thereby justify the importance of exploring how different patriarchal structures and practices are discursively (re)produced. I also present the critical as well as intersectional views regarding the involvement of men in the prevention of violence against women.

In *Chapter 3*, I also set up the theoretical framework for analysing the consistency of the discourses in my data with the prevailing masculinities in Somaliland. I present the theoretical conceptions of men and masculinities, including the poststructural critique (Wetherell & Edley, 1999, 2014; Whitehead, 2002) and the materialist critique (Hearn, 2004, 2014) of the concept of (hegemonic) masculinity. I discuss notions of Muslim masculinities, drawing from, for example, Arat and Hasan’s (2018) findings on the masculinities conveyed in the Qur’an. Drawing upon, for instance, El-Bushra and Gardner (2016) and Hansen (2008), I also discuss the core ideals

of ‘Somali manhood’ as well as the socio-economic realities within which masculinities are negotiated in Somaliland.

In *Chapter 4*, I describe the research methods and data. To overcome essentialism and ahistoricism, I draw upon Fairclough’s (1992, 1995, 2001) critical discourse analytical approach, which emphasises the interrelation between discourse and social change. In my analysis I also employ Lazar’s (2007) feminist critical discourse analysis, which aims to understand the complex workings of power and ideology in discourse to sustain gendered social arrangements. After describing the different phases of data collection and analyses, I address the research ethics, focusing on the risks my research poses to research participants and the Somali community in general. I also discuss how my position as a researcher and within the interview setting affected the data.

In *Chapters 5 and 6* I present, analyse, and discuss the data and the discourses that emerged in the interviews. In *Chapter 7*, I summarise the results and answer my research questions. Finally, I discuss the theoretical and practical contributions of this study as well as its limitations, and suggest avenues for further research.

## **2. SETTING THE SCENE FOR EXPLORING FEMALE GENITAL MUTILATION/CUTTING AND GENDER IN SOMALILAND**

In this chapter, I describe the context of this study. In doing so, I begin by discussing specific understandings of violence and bodily integrity amongst international institutions, communities that practice FGM/C, and researchers who represent various viewpoints on these concepts. In *Section 2.2*, I shortly cover the geopolitical and socio-demographic realities in Somaliland and focus then on gender, which represents a fundamental structuring principle that influences almost all spheres of Somali society—the family, the household, politics, and the economy (Hansen, 2008). I discuss gendered rights and responsibilities, specifically women’s economic opportunities and political participation.<sup>11</sup> In *Section 2.3*, I discuss the origins and prevalence of FGM/C in Somaliland, as well as the mechanisms that perpetuate the practice and efforts aimed at preventing it.

### **2.1 UNIVERSALIST AND RELATIVIST UNDERSTANDINGS OF FGM/C**

FGM/C and efforts to eradicate it have resulted in emotionally charged debates around cultural relativism, international human rights, racism and Western imperialism, the medicalisation of the practice, sexuality, and the patriarchal oppression of women, Shell–Duncan and Hernlund (2001, p. 1) write. They argue that identifying the most effective strategies for eradicating FGM/C stands as one of the most contested issues surrounding the practice, forcing scholars and activists to confront questions about who possesses the moral authority to condemn the practice, under what circumstances, and based upon which arguments (Shell–Duncan & Hernlund, 2001, pp. 24–25). To justify my research, which aims to contribute to eradicating FGM/C, I draw upon the works of Susan Okin (1999) and Lisa Wade (2011), which I discuss below. First, however, I discuss the most significant human rights arguments against FGM/C and their counterarguments.

Initially, programmes and interventions to abolish FGM/C initially focused on the associated health risks. However, FGM/C was reconceptualised as a human rights violation by the international community at the 1993 World Conference on Human Rights in Vienna (UNICEF, 2013). That reconceptualisation relied on an understanding that ‘certain individual rights are so fundamental to human kind that they should be upheld as universal

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<sup>11</sup>Prevailing masculinities in Somaliland are discussed in *Chapter 3*, after describing different approaches to men and masculinities.

rights, the breach of which is subject to condemnation and, in certain instances, punishment through legislative force' (Shell–Duncan & Hernlund, 2000, p. 27). In contrast to this universalist stand, cultural relativism holds that no value judgments exist which are objectively falsifiable independent of specific cultures, and as such, moral judgments and social institutions in any one society are exempt from legitimate criticism by outsiders (Renteln, 1988). Boulware–Miller (1985) broke down the human rights approach to FGM/C as claims based on the rights of the child, the rights of women, freedom from torture, and the right to bodily integrity.<sup>12</sup> Below, I briefly present each claim and the relativist counterarguments.

The *United Nations Declaration of the Rights of the Child* (1959) advocates that each child must be given the opportunity to develop physically, mentally, morally, spiritually, and socially in a *healthy and normal manner* and under conditions of freedom and dignity (Principle 2, *emphasis added*). Children will be protected against all forms of neglect, cruelty, and exploitation (Principle 9). Boyden et al. (2012) pointed out that modern globalised norms emphasise bodily integrity; reproductive, infant, and maternal health; and the rights of girls to be protected from harm. Traditional values, they note, focus more on the collective good and the social acceptance of girls, and, in practicing communities, many believe that FGM/C and early marriage *reduce* health risks associated with extramarital sex. Above all, by safeguarding girls' social standing and their transition to adulthood, these practices are often believed to *protect* girls and women against social and economic risks, such as abandonment, stigma, and destitution, Boyden et al. argue. In line with this understanding, Breitung (1996) and Boulware–Miller (1985) point out that in a cultural context where most or all girls are cut, the 'normal manner' required by the *Declaration of the Rights of the Child* can indeed include FGM/C.

The *United Nations Convention on the Elimination of All Forms of Discrimination Against Women* (CEDAW, 1981) has often been invoked by anti-FGM/C efforts that focus on FGM/C as a violation of women's rights (Shell–Duncan & Hernlund, 2000, p. 28). Article 5a requires states to 'modify the social and cultural patterns of conduct of men and women, with a view to achieving the elimination of prejudices, customs, and all other practices which are based on the idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for men and women.' Opponents demonstrate that female initiation, including genital cutting, can be highly empowering to women, and thus remains unrelated to Western feminist ideas of patriarchal oppression (see, for example, Hernlund, 2000; Thomas, 2000). Ahmadu (1995, p. 45) argues that 'mounting an international campaign to coerce 80

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<sup>12</sup>In addition to the international human rights conventions mentioned by Boulware–Miller (1985), FGM/C practices are also considered a violation of women's human rights by the International Covenant on Civil and Political Rights (ICCPR); the International Convention on Economic, Social and Cultural Rights (ICESCR); and the Convention on the Rights of the Child (CRC), which the United Nations General Assembly adopted and released for signatures in 1989, on the thirtieth anniversary of the Declaration of the Rights of the Child (see Walby et al., 2017, p. 81).

million adult African women to give up their tradition is unjustified.' She also emphasises the 'anti-culture' or 'anti-progress' dilemma facing many African women when they decide to cut their daughters (Ahmadu, 2000).

Furthermore, widely differing meanings are attached to women's bodies and sexuality. For some Western feminists, the clitoris symbolises women's emancipation and, hence, FGM/C symbolises patriarchal oppression (Shell-Duncan & Hernlund, 2000, p. 21). Opponents have criticised the Western 'preoccupation with the clitoris' and overemphasis on the effects of FGM/C on sexual pleasure (see, for example Abusharaf, 2000; Ahmadu, 2000; Obermeyer, 1999). Nussbaum (1999, p. 127) addresses this criticism drawing parallels to other bodily functions: 'We all know that people who are blind or unable to walk can lead rich and meaningful lives; nonetheless, we would all deplore practices that deliberately disabled people in those respects, nor would we think that critics of those practices are giving walking or seeing undue importance in human life.'

The *United Nations Convention Against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment* (CATCID, 1984) defines torture as inflicted 'by or with the acquiescence of a public official or other person acting in an official capacity.' The escalating medicalisation of FGM/C practices extends to this definition, since parents increasingly turn to medical practitioners to cut their daughters. Shell-Duncan and Hernlund (2000, p. 29), in turn, argue that this definition is weakened by the fact that most FGM/C procedures take place in unofficial settings. In terms of the cruelty of FGM/C, they claim that because health hazards form the cornerstones of opposition to FGM/C, medical facts based on case studies of infibulations have been generalised to describe the health risks of all types of FGM/C (Shell-Duncan & Hernlund, 2000, pp. 15-17). They maintain that a bias in medical facts may exist, since women are also reluctant to seek medical assistance due to modesty or the inaccessibility of health services, thereby reporting only severe or prolonged complications.

To sum up, international actors and programmes that employ the universalist perspective consider FGM/C a violation against children's and women's rights, against freedom from torture, and/or against the right to bodily integrity. Scholars and activists who lean on a more relativist position emphasise that communities that practice FGM/C do not view it as a violation to the body or to girls' dignity. They point out that amongst practicing communities FGM/C serves to ensure culturally considered understandings of what is best for girls.

In a well-known essay, Okin (1999) argues that a liberal egalitarian and feminist approach to multiculturalism must carefully analyse intragroup gender inequalities when examining the legitimacy of minority [cultural and religious] group rights within the context of a liberal state. She posits that group rights that enable minority cultures to preserve themselves seldom serve the best interests of girls and women living in these cultures. I suggest that the controversy between (Western liberal) feminism and multiculturalism



extends from liberal states to development interventions initiated by Western feminists or other actors from the global North or West. Typically, these interventions address cultural, religious, and social practices often highly valued by (many) people in practicing communities in the global South.

Commenting on Okin's work, Pollitt (1999, p. 27) summarises the controversy between multiculturalism and feminism thusly: 'You could say that multiculturalism demands respect for all cultural traditions, while feminism interrogates and challenges all cultural traditions.' Similarly, Kellner (1993), who explored FGM/C from the perspective of the rights of children, states that even if outlawing FGM/C appears to degrade some cultural traditions, the physical and psychological well-being of the affected children should be granted a higher concern, and FGM/C should, therefore, be criminalised in Western societies. Moreover, Pollitt (1999, p. 29) claims that the premise of the multiculturalist approach is false, since cultures are imagined as 'stable, timeless, ancient, lacking in internal conflict, premodern'. Along similar lines, Tamir (1999, p. 52) states that 'there is no reason to "freeze" a culture in order to preserve it':

*[A] great deal of paternalism is embedded in the assumption that while 'we' can survive change and innovation and endure the tensions created by modernity, 'they' cannot; that 'we' can repeatedly reinvent ourselves, our culture, our tradition, while 'they' must adhere to known cultural patterns.*

*(Tamir, 1999, p. 51)*

Scholars arguing against cultural essentialism insist that cultures are dynamic, evolving, interpenetrated, and internally contested, and therefore, it is unfair to characterise a society as inherently patriarchal, or to reduce social patterns to culture alone (see Wade, 2011). 'Other' cultures are not less stable than 'ours', and lack neither internal conflict nor the ability to reinvent themselves (Tamir, 1999). Hence, culture and its attendant values are open to examination, debate, and change resulting from interventions by the international community and by local communities engaged in an ongoing dialogue about their own local practices (Twum-Danso Imoh, 2012). Accordingly, '[n]o culture or comprehensive doctrine is "by nature", or in any given or fixed way, either compatible or incompatible with human rights' (Donnelly, 2007, p. 291).

Examining the 'acrimonious' debate over FGM/C at the intersection of feminism and postcolonial theory, Wade (2011) aims to separate productive from destructive discursive strategies. Wade (2011, p. 27) claims that FGM/C amplifies the conflict between feminism and postcolonialism because, 'unlike issues that are historical (foot binding), disturbing but rare (widow immolation), chosen by adults (cosmetic surgery), or impermanent (veiling), FGM/C practices are ongoing, frequent, performed on children, and can involve extensive and irreversible bodily modification'. According to Wade

(2011), FGM/C tests the anti-imperialist and feminist consensus and adoption of a 'radical uncertainty' (Boddy, 1998)—willingness to continually revise our knowledge about unfamiliar practices and to abandon preconceived notions about what liberation for women resembles.

Based on her discourse analysis, Wade (2011) surmised that prior to the mid-1990s scholars employed both cultural inferiority and cultural difference frameworks<sup>13</sup> related to FGM/C practices. She found that in the 1990s, postcolonial scholars contested the cultural inferiority framework, often arguing that Western feminist engagement with FGM/C is 'imperialist'. In some cases, authors even conflated being 'Western' with opposing FGM/C and with cultural imperialism, 'making a Western, nonimperialist, anti-FGC argument logically impossible' (Wade, 2011, p. 35). In Wade's view, this conflation is not representative of the academic engagement dominated by the postcolonial perspective since the mid-1990s (between 1996–2005, she identified only two documents applying the cultural inferiority framework). Furthermore, many of those criticising Westerners for their imperialist approach are themselves Western and oppose FGM/C. Thus, Wade contends that both accusations of African 'barbarism' and Western feminist 'imperialism' are empirically false, erasing African opposition to FGM/C as well as Western feminists' acknowledgement of transnational power asymmetry.

The central premise guiding my research is the understanding of all FGM/C practices as problematic and as human rights violations, in keeping with several international and regional human rights treaties and declarations. Even if human rights premise is not completely devoid of problems, as discussed above, there is increased commitment by all countries to end FGM/C. For example, the United Nations General Assembly's resolution *Intensifying global efforts for the elimination of female genital mutilations* was adopted through consensus in December 2012. *The Protocol to the African Charter on Human and Peoples Rights on the Rights of Women in Africa* was signed and ratified by 40 out of 55 African Union member-states (excluding Somalia). This so-called *Maputo Protocol* obliges states to implement legislation against FGM/C and implement other measures such as public awareness, support for survivors, and protecting women at risk.

In order to support any culture's efforts to reinforce human rights and the equality of women, Western feminists (or any other outsiders) must 'hold their own practices up to the same critical scrutiny they apply to Others, to hear the plural voices of women everywhere and to learn from them, while also refusing to prejudge the merits of practices that are unfamiliar or threatening to those of us raised in bourgeois liberal societies' (Honig, 1999, p. 40). Whilst a community's faith must be entrusted to its individual members, as Tamir

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<sup>13</sup>The inferiority framework is reflected in the language that identifies FGM/Cs as something only a bad or uninformed person would practice. The difference framework is visible when a scholar explains that FGM/C practices are unfamiliar and distressing, and need to be understood as well as opposed, whilst resisting condemnation of those involved (Wade, 2011, pp. 31, 40).

(1999) posits, I suggest that outsiders can sometimes help render visible social norms that are often deeply internalised, normalised, and invisible, and maintain harmful traditional practices like FGM/C.

In summary, this section focused on problematising the justification of Western feminists and the international community to promote abolishing FGM/C practices. In *Chapter 4*, I further elaborate upon my position as a Western feminist researcher who explores a community other than my own.

## **2.2 GENDER AS A FUNDAMENTAL STRUCTURING PRINCIPLE OF SOMALI SOCIETY**

In this section, I first discuss the geopolitical and socio-demographic realities in Somaliland. I then turn to discuss gender as a fundamental structuring principle of Somali society, and the status of women in Somaliland. Because Somaliland lacks international recognition, few Somaliland-specific population statistics and datasets exist within reports from the United Nations and other international agencies. Furthermore, official national statistics produced by the Somaliland government are incomplete. Thus, in what follows, reports from local organisations, such as the Academy for Peace and Development (APD)<sup>14</sup>, NAGAAD<sup>15</sup>, and Strategic Initiative for Women in the Horn of Africa (SIHA)<sup>16</sup> serve as crucial sources of information.

The formerly British Somaliland Protectorate achieved full independence from the United Kingdom on 26 June 1960. A few days later on 1 July, Somaliland united with Somalia, a territory falling under the United Nations mandated Italian Trusteeship, establishing the Somali Republic. In 1988, the Siad Barre regime in Somalia launched a crackdown against the Hargeisa-based Somali National Movement and other militant groups, part of a set of events leading to the civil war (Metz, 1993). Ahmed (1999) wrote that the war against the Barre government caused massive displacement and casualties in Somaliland, with an estimated 50,000 to 100,000 deaths in the capital city of Hargeisa alone, destroying both the existing economic infrastructure and the traditional pastoral life. Following the collapse of Barre's government in 1991, local authorities in Somaliland, led by the Somali National Movement declared independence from Somalia on 18 May 1991, and reinstated the borders of the

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<sup>14</sup>The Academy for Peace and Development (APD) is a Hargeisa-based research institute established in 1998 in collaboration with Interpeace—an international organization that prevents violence and builds lasting peace. APD focuses on peacebuilding, promoting democracy and civic participation in decision-making (<https://apd-somaliland.org/>). The APD report that I refer to in this study is published by UNICEF.

<sup>15</sup>NAGAAD is a network of 46 women's organizations in Somaliland, founded in 1997 to serve as a collective voice for women wishing to see their rights as equal citizens respected in Somaliland (<https://www.nagaad.org/>).

<sup>16</sup>Strategic Initiative for women in the Horn of Africa (SIHA) is a network of civil society organizations from Sudan, South Sudan, Somalia, Somaliland, Ethiopia, Eritrea, Djibouti, Uganda, and the coastal area of Kenya, established in 1995 to strengthen the capacities of women's rights organizations and to address women's subordination and violence against women and girls in the Horn of Africa (<https://sihanet.org/>). Studies compiled by Luedke (2015; 2018) that I refer to in this study are also published by SIHA.

former independent State of Somaliland (Lewis & Sundström, 2014, pp. 80–83). Since then, the territory has been governed by a democratically elected government that seeks international recognition as the Government of the Republic of Somaliland (*Constitution of the Republic of Somaliland* [English], 2001). According to the latest data on the government's website, the population in the region in 2014 stood at about 3.8 million ('Somaliland in Figures 2016', 2018).

The ongoing war in southern Somalia between Islamist insurgents on one side, and the Federal Government of Somalia and its African Union allies on the other, has primarily left Somaliland unaffected, leaving it relatively stable (BBC News, 2017; see also Luedke, 2015). For a number of years, Hargeisa has been a melting pot and meeting place for Somali society and the Somali diaspora (Vestbøstad & Blystad, 2014). Yet, formal state institutions remain weak in Somaliland and the central government has faced constant challenges in delivering services to its citizens (Luedke, 2018, p. 9). According to the latest World Bank Group survey on Somaliland, more than half of the people in urban areas, and nearly two in three in rural areas live in poverty ('Somaliland Household Survey 2012–2013', 2014). Since Somaliland remains unrecognised, international donors face difficulty in providing aid, and the government relies primarily upon tax receipts and remittances from the extensive Somali diaspora, which significantly contributes to Somaliland's economy (Harris & Foresti, 2011).

The private sector is dominated by the micro-level as well as small and medium enterprises, and few job opportunities exist within national and international NGOs, whilst government positions are often awarded on the basis of patronage and clan connections, Luedke (2018, p. 13) claims. Furthermore, she notes, the youth unemployment rate reaches 84%, whilst the overall unemployment rate is 70%, one of the highest in the world. Nimo-Ilhan (2016) wrote that frustrated with the high unemployment and scarce educational opportunities, increasing numbers of young people emigrate to Saudi Arabia and the United Arab Emirates, as well as to Europe. He points to a specific word '*tahriib*' which refers to the growing emigration of Somali youth to Europe, individuals who plan to return to their homeland after attaining an education, wealth and, thus, social and economic status abroad.

With few exceptions, Somalis in Somaliland and elsewhere are Muslims, the majority of whom belong to the Sunni branch of Islam (Abdullahi, 2001, p. 1). Islam is the state religion of Somaliland, and no laws may violate the principles of sharia (*Constitution of the Republic of Somaliland* [English], 2001). According to the constitution, the promotion of any religion other than Islam is illegal, and the state discourages behaviour which contradicts 'Islamic morals'. Johnsdotter Carlbom (2002, p. 27) describes the Somali population as divided into a few large clan families. According to Luedke (2015, p. 11), the three major clan families in Somaliland are the Isaaq, the Darood/Harti and the Dir. Isaaq is the largest and most homogenous, representing 66% of the Somaliland population and controlling the social, political and economic order

(Bradbury, Abokor, & Yusuf, 2005). According to Talle (1993), subclans and their smaller segments function economically and politically as corporate groups and carry a more practical relevance to individuals than do clans. According to Luedke (2015, p. 11), below the clan family level, there is the clan itself, the primary lineage group, and the Dia (Arabic)/Mag (Somali). All (male) members of society are defined by belonging to the Dia/Mag group which has a collective obligation to pay and get blood compensation, based on acknowledged rules or a contract known as *Xeer*, customary law in Somaliland (Gundel, 2006). Luedke (2015) claims that outside of politics, however, clan structures appear to become weaker and more scattered. This happens especially in urban areas, where the initial responsibility of clan elders in resolving conflicts between pastoralists has reduced, whilst they have had difficulties adapting to non-clan based 'modern' issues such as sexual violence (Luedke, 2015, p. 12).

Luedke (2015, p. 9; see also Ahmed, 1999) wrote that the absence of men during conflict times made women acquire new importance as merchants, traders and heads of house. The resolution of conflict and peace and reconciliation in Somaliland, however, relegated women back to the status of passive agents, she argues. 'As the modern state structures of the Barre regime collapsed, traditional modes of social organization, in which men define and occupy the "public" sphere, took over' (Luedke, 2015, p. 9). Furthermore, even if women are often responsible for income generation for their families, the majority of males still feel that it is a man's sole responsibility and right to make decisions on behalf of the family, including the allocation of income made by the women, Luedke notes.

Gender represents a fundamental structuring principle that influences almost all spheres of Somali society: the family, the household, politics, and the economy (Hansen, 2008). According to Talle (1993, p. 84), gender is 'a metaphoric vehicle in the Somali culture; it provides images of how to think about and value other relations and distinctions.' This scheme provides a hierarchical relationship, granting precedence to men and male 'things' (Talle, 1993). According to the Academy for Peace and Development (APD, 2002), the clan system prescribes distinct paths of social and personal development for both men and women. In traditional nomadic settings, all family members have a specific, well-defined role. Women's work includes, for example, making materials for the construction of the nomadic home, moving the family dwelling during the frequent nomadic movements, and procuring daily supplies of water and firewood. Furthermore, the patrilineal principle whereby communities are grounded on descent through a male line defines the identity and affinity of both men and women (APD, 2002).

Luedke (2018, p. 10) maintains that the significance of the clan system represents a primary reason for the continued subordination of women in Somaliland. A woman's loyalty to the clan is considered weaker than a man's clan allegiance because a woman's clan alliance often transfers following marriage. Thus, women are excluded from decision-making and clan-based

forums in which to voice their interests and concerns (Luedke, 2018). Regional and historical differences appear to exist in terms of marriage patterns among Somalis. Referring to Helander (1991), Johnsdotter Carlbom (2002) notes that in the northern parts of Somalia, individuals prefer to marry someone from another clan; in the south, however, a close relative appears to be the best choice. Johnsdotter Carlbom (2002, p. 27) goes on to argue that, since the start of the civil war, Somali women are increasingly expected to marry a man close to their own clan to avoid competing loyalties if a clan conflict arises. Traditionally, marriages involving individuals with distant clan fractions or even other clans were desirable, since such unions were expected to maintain peaceful relations and political stability (Johnsdotter Carlbom, 2002).

Somali culture is affected by the interaction between nomadic pastoral traditions and the norms of Islamic teaching. The position of women within an Islamic society is determined by the Qur'an, the tradition of the Prophet Mohammed, and the interpretations of Islamic law and traditions (APD, 2002). According to APD (2002) who explored the compatibility of provisions in the *United Nations Convention on the Elimination of All Forms of Discrimination Against Women* (CEDAW, 1981)<sup>17</sup> with Islam (more specifically, Islamic sharia law) and with Somali culture (more specifically, customary law or *Xeer*) in Somaliland, both Islam and the Somali culture view women's rights differently than CEDAW.<sup>18</sup> Islamic law is more progressive than Somali customary law since 'it grants women rights in inheritance and ownership, stipulates procedures for settling divorce, initiating marriage, and maintaining widows and orphans' (APD, 2002, p. 27). The rights of women, however, have been incompletely implemented in accordance with Islamic principles, because knowledge of Islam remains limited within Somaliland, APD concludes. Thus, customary law is pervasive and undermines the application of Islamic law. The report further points out that the Somaliland Constitution acknowledges gender equality (Article 8 on the equality of citizens and Article 36 on women's rights), but defines women's rights within the Islamic context as strictly assigning different roles to men and women (APD, 2002).

Whilst conflicts sometimes produce more progressive gender ideologies, in Somaliland radical versions of political Islam have gained ground since the civil war and precipitated a shift towards stricter interpretations of gender

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<sup>17</sup>Somalia is one of the few countries not a signatory to CEDAW. According to Legal Action Worldwide (LAW), the Somali government is committed to ratifying CEDAW, and LAW has provided technical advice to the relevant ministries in South Central Somalia, Puntland, and Somaliland ("Legal Action Worldwide," 2018).

<sup>18</sup>According to Luedke (2015, p. 15; see also Bendana & Chopra, 2013; Le Sage, 2005), similar to other sub-Saharan African countries, Somaliland is a legally plural society. The three disparate, yet overlapping legal systems comprise of *Xeer*, which is the traditional law, governing clan relations at the Dia/Mag Paying Group level; *statutory law*, which applies to civil and criminal matters; and *Islamic Shari'a Law*, which applies to family matters, such as divorce and inheritance. Each legal system has its own purview and scope of jurisdiction, but they are extremely fluid, and clan elders typically have a final say in each system. According to Social Research and Development Institute (SORADI, 2011), most cases of sexual and gender-based violence are handled in the customary system with reference to collective responsibility as opposed to individual culpability.

roles (Luedke, 2018, pp. 11–12). Despite women's entrance into the informal economy during the civil war, women are still denied inheritance in customary law, have limited access to financial assistance such as micro-credit (Luedke, 2018, pp. 9–11). Women's increased economic role has not increased their political power or status, and they continue to be excluded from most public and political activities, including open councils (*shir*) where adult men debate and make decisions (El-Bushra & Gardner, 2016). According to a NAGAAD (2019) study on the gender gap in Somaliland, the overall gender gap remains at 0.45 (whereby 0 indicates absolute inequality and 1 indicates absolute equality). Women lag behind men most prominently in terms of political empowerment (0.02), whilst the gender gap is narrower—yet still significant—in terms of economic participation (0.58), economic opportunity (0.56), and educational attainment (0.68). Women's political representation is low to non-existent: there is one female (82 male) members in the Lower House (Parliament); zero female (82 male) representatives in the Upper House (Guurti); two full and one deputy female (29 male) ministers; 9 female (365 male) representatives in Local Councils; and zero female judges (NAGAAD, 2019, p. 31).

Furthermore, women are never considered the most respected, senior 'elders' of the society, and in cases involving conflicts between women and men, male elders often protect the interests of men over those of the women (SIHA, 2013). Luedke (2018, pp. 9–11) notes that people continue to conceptualise gender roles along pre-war ideals: women as responsible for the household and men as responsible for activities outside the home including generating income. Thus, she argues, most women do not have the opportunity to work in the formal sector and remain trapped in petty trade and low-paying positions in the informal sector. Furthermore, due to the double burden of being responsible for both generating income and domestic duties, women seldom have time to expand their economic roles beyond subsistence-level employment at the margins of the economy (Luedke, 2018, pp. 23–24).

In addition, strict interpretations of Islamic tradition, whereby men and women are not supposed to interact before marriage, have been interpreted in such a way that prevents unmarried young men and unmarried young women from speaking with one another openly (Luedke, 2015, p. 21). Influenced by trends in the Middle East, Wahhabism (also known as Salafism) has been increasing in Somaliland (Luedke, 2018). Wahhabis now control the economy and education through funding madrasas (schools for Islamic instruction), and radical mosques increasingly preach for more restrictive roles for women, Luedke (p. 11) claims. She found, for example, that there is a growing sense that women who work outside the home in the informal economy are 'polluted' or 'sexually open', particularly when the work entails interacting with men, for instance, when women work as tea sellers. At the same time, youth are being exposed to contradictory gender discourses: 'the strict traditionalism, which scripts how men and women should behave according to patriarchal practices,

as well as regulates interaction between them, and the more progressive gender ideologies and changed gender roles produced by conflict and modernization' (Luedke, 2015, p. 21).

Turning to violence against women, official national statistics are unavailable for Somalia (UN Women, 2019). According to a United Nations Populations Fund (UNFPA, 2015) report on sexual gender-based violence against women in Somalia, the majority of reported cases stem from physical assaults, followed by rape and sexual assaults (no separate data for Somaliland appear in that report). According to a United Nations Development Programme (UNDP, 2014) report on gender-based violence in Somalia, data from Somaliland shows a particularly disturbing increase in the numbers of reported gang rapes in the region in 2013. Luedke (2015, p. 6; see also Human Rights Watch, 2009) claims that 'the safety and security attributed to Somaliland does not hold true for all of its residents, particularly women and girls, who are exposed to various forms of oppressions, including harmful traditional and cultural practices and cruel forms of sexual violence, such as multiple perpetrator rape.' She argues that the uninterrupted conflict from the 1980s through to the mid-1990s led to the breakdown of social norms and institutions. While inter-clan conflicts were traditionally bounded by codes and social conventions whereby the elderly, sick, women and children were secure from attack, and the customary clan law contained strict rules about compensation and revenge for acts such as rape and murder, women and children were suddenly targeted in a direct and systematic way (Luedke, 2015, p. 8; see also Gardner & El Bushra, 2004).

The Strategic Initiative for Women in the Horn of Africa (SIHA, 2013; see also Luedke, 2015) suggests that in Somaliland joblessness, idleness, and poverty amongst young men leads increasing numbers of young men into emasculation and drug dependence, thereby contributing to new forms of violence, such as gang rapes. Increasing numbers of gang rapes may, in turn, contribute to perpetuating more severe types of FGM/C, since such practices are believed to protect girls from rape and premarital sex (discussed in greater detail in *Section 2.3*). In terms of the legal framework, rape was not defined as a crime in Somaliland as of the end of 2016,<sup>19</sup> although advocacy efforts aimed at adopting the Sexual Offences Bill were entering an advanced stage, according to UNFPA Somalia (2017). However, latest national criminal statistics ('Somaliland in Figures 2016', 2018) take into consideration rape offences, reporting that 91 offences occurred in 2016. In Somaliland, as elsewhere, men's violence against women remains underreported, whereby the prevalence is likely significantly higher than what is reported to authorities (see Walby, 1990, p. 137). In the next section, I discuss the prevalence, legal and policy framework regarding FGM/C, as well as mechanisms that perpetuate the practice in Somaliland.

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<sup>19</sup>*Chapter 2* describes legislation and policies both preceding and during my fieldwork in 2016. Some changes thereafter are described in *Chapter 7*.



## 2.3 FGM/C IN SOMALILAND

Members of specific ethnic groups—regardless of where they live—often adhere to the same set of social norms, including whether to practice FGM/C (UNICEF, 2016). In Somalia, where relatively little ethnic variation exists, FGM/C is almost universally practiced, and prevalence amongst ethnic Somalis living in neighbouring Ethiopia and Kenya more greatly resembles the national prevalence in Somalia than that of either neighbouring country (UNICEF, 2016). According to Gele et al. (2012), however, infibulation (pharaonic cutting) remained nearly non-existent amongst southern clans in the early nineteenth century, whilst reaching almost 95% amongst northern clans. Southern clans later adopted infibulation by emulating northern clans in order to increase their status, they argue.

According to the 2011 Multiple Indicator Cluster Survey (MICS), 99% of girls and women aged 15–49 in Somaliland underwent FGM/C. Also, two recent studies in Somaliland show that the practice of FGM/C is nearly universal. Based on a community survey, key informant interviews, and focus group discussions with 2060 community members (1128 women) and 209 opinion leaders (46 women) in 25 communities, Newell–Jones (2016) concludes that the prevalence rate stands at 99% in urban and 100% in rural communities. Data in Ismail et al. (2016) study stem from two surveys conducted amongst women who attended the prenatal clinic at the Edna Adan Hospital in Hargeisa. The first cohort participated in research between 2002 and 2006, whilst the second took place between 2006 and 2013. In the second cohort, data were drawn from a sample population ( $n = 6108$  of 6172 participants), the results of which rely on physical examinations from participating women receiving antenatal care. That survey revealed that 98.4% (or 6011 women) of the second cohort underwent FGM/C. A mere 1.6% ( $n = 97$ ) of participants bore no signs of FGM/C.

Despite the consistently high prevalence rate, evidence points towards a change in the type of cutting. Whilst Newell–Jones (2016) found that 80% of the girls and women underwent pharaonic cutting, an increasing proportion of girls underwent intermediate and sunnah cutting in the younger age cohorts. Equal numbers of 12- to 14-year-old girls underwent each of the three types, whilst almost all women over 60 years old underwent pharaonic cutting. Ismail et al. (2016) studies also revealed a clear shift towards sunnah cutting: in the first cohort (2002–2006), 1% underwent sunnah cutting, whilst in the second cohort (2006–2013) the share reached 17.8% (the intermediate cut was not parsed into a separate category). Furthermore, 95% of respondents who provided an answer reported that they would perform sunnah cutting on their daughters, whilst less than 5% said they would perform pharaonic cutting. Given the confusion in terminology I discussed in *Section 1.1*, particularly related to the varied use of the term ‘sunnah’ in Somaliland, it is important to exercise caution when interpreting shifts in FGM/C practices reported in various studies.

The average age at which pharaonic cutting is performed in Somaliland lies between the ages of 7 and 9 years, whilst sunnah cutting is generally performed at a very young age, sometimes even soon after birth (Ismail et al., 2016). Decisions about whether a girl is cut and the type of cut she undergoes are made by the mother alone in a clear majority of cases, by grandmothers in approximately 10% of cases, and jointly by mothers and fathers in less than 10% of cases (Newell-Jones, 2016, Chart 7.2.9A). Bruchhaus (2013), however, claims that men are increasingly participating in dialogues of FGM/C both in their own families and within the Somaliland community. In addition, Vestbøstad and Blystad (2014), who carried out research in Hargeisa in 2009, found that FGM/C is currently openly discussed, albeit more in public than in private contexts. They argue that in the private context, FGM/C is only talked about among girls who are about to become cut, their mothers, and the ones who carry out the practice.

Almost 80% of respondents in Ismail et al.'s (2016) study had undergone FGM/C in Somaliland. Other countries highly represented included Ethiopia (about 10%) and Somalia (about 8%). FGM/C was mostly performed on respondents by traditional birth attendants and older women. Around 5% of respondents reported that trained medical personnel, including doctors and nurses, had performed FGM/C on them in hospitals (a phenomenon referred to as 'medicalisation'). Newell-Jones' (2017) study showed an increasing medicalisation of FGM/C in Somaliland. As such, 11% of young women (15-24 years) were cut by a health professional (nurse, midwife, or doctor) and 16% of mothers reported that their daughters were cut by a health professional. Newell-Jones argues that this trend towards medicalisation is strongest in urban and semi-urban communities and amongst educated people.

In a survey in Somalia, where 290 women's motives for having their daughters cut were explored, nearly 70% stated that religion was the main reason; 20% stated that remaining a virgin and to get married were the main motivations; 10% pointed out tradition; and 1% listed hygiene as the primary motivation (Dirie & Lindmark, 1991). Yet, the strongest reason that participants in Newell-Jones' (2016, p. 26) survey gave for supporting the continuation of FGM/C in Somaliland was that FGM/C remains a traditional practice. Purification was the second most-cited reason associated with reducing the sexual desire of girls, which again is thought to protect girls from premarital sex and the associated loss of virginity. Marriageability was listed by 20% of survey participants, and 22% cited religious reasons for supporting FGM/C. In the Ismail et al. (2016) study in Somaliland, 72% of female respondents reported that they would have their daughters cut for reasons stemming from tradition and 28% for religious reasons (25% of survey participants did not respond to this question). These varied reasons and results reflect Boddy's (1986) notion that religion, tradition, and culture are often interconnected and mutually reinforcing—that is, valued traditions and cultural beliefs are incorrectly ascribed as mandated by religious doctrine. I

next discuss in greater detail the different motives applied to prescribe cutting Somali girls.

Despite FGM/C predating the emergence of both Islam and Christianity and religious scriptures not mandating the practice, the belief that it is a religious requirement contributes to its continuation (Boddy, 1986). The Qur'an does not specifically require female circumcision, but it has been mentioned in the oral tradition (Hadiths, testimonies about the sayings and doings of the Prophet Mohammed<sup>20</sup>), the interpretation of which Islamic scholars disagree on (see, for example Akar & Tiilikainen, 2009). These testimonies are used both to promote and oppose the practice. Johnsdotter Carlbom (2002, p. 56) writes that Muslim scholars who argue against FGM/C often quote the following Qur'anic passages: 'Verily, we create man in the best conformation' (95:4 in the Qur'an), 'Let there be no alteration in Allah's creation' (30:30), and 'He perfected everything he created' (32:7).

Referring to Giladi (1997, p. 266) and Abu-Sahlieh (1994), Johnsdotter Carlbom (2002, p. 59) argues that Islamic scholars today urge Muslims who practise FGM/C to adopt its most moderate forms. However, she continues, reflecting on Islamic sources is restricted to the religious elite, and the religious texts are often out of reach to the overwhelming majority of people who practise FGM/C. Thus, many lay Muslims understand clitoridectomy and infibulation as religious obligations. Moreover, whilst refraining from FGM/C is consistent with Islamic principles, it is practically impossible for a scholar to state that all forms of FGM/C are forbidden according to Islamic sources and the positions of the Islamic law schools (Johnsdotter Carlbom, 2002, p. 60).

Somaliland is predominantly Sunni Muslim, relying on Shafi'i law school, one of the two Islamic law schools (out of five) that regard female circumcision as required, yet recommending a moderate type (Johnsdotter Carlbom, 2002, p. 53). Clerics, however, disagree about Islamic guidance on female circumcision. For example, amongst 38 religious leaders interviewed in Newell-Jones' (2016) study in Somaliland, a clear majority described pharaonic cutting as 'not required<sup>21</sup>' under Islamic law, and sunnah cutting as 'honourable'. The minority of religious leaders who considered pharaonic cutting as 'honourable' were mostly older men from rural communities, indicating that rural religious leaders are more traditional in their

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<sup>20</sup>The most frequently quoted—yet controversial—hadiths regarding female circumcision include one about how the Prophet talks to a circumciser on her way to perform the procedure ('Do not overdo it, because it [the clitoris] is a good fortune for the spouse and a delight to her'), one about ritual purification ('If the two circumcised parts have been in touch with each other, ritual purification [*ghusl*] is necessary'), and one suggesting circumcision is a religious duty for men and an honourable act for a woman ('Circumcision is a way for men, but is merely ennobling for women') (Johnsdotter Carlbom, 2002, p. 55).

<sup>21</sup>Newell-Jones (2016) refers to three categories according to which human actions are classified in Islamic law: 'obligatory', 'honourable', and 'not required'. In this study, I mostly refer to the five categories described by Lewis (1994; see also Johnsdotter Carlbom, 2002), and suggest that 'obligatory' parallels 'required/commanded'; 'honourable' parallels 'recommended', and 'not required' disaggregates the remaining categories of 'permitted'; 'disapproved', and 'forbidden'.

interpretation of Islamic law than those from urban communities (Newell–Jones, 2016, p. 42).

According to Talle (1993), who explored the symbolic dimensions of FGM/C in Somalia, the primary reason Somali people to support infibulation (pharaonic cutting) lies in the belief that it protects girls against immorality. Infibulation is necessary because ‘women are held to be easily affected by visual impressions and emotions, and thus prone to be led astray by forces beyond their control’ (Talle, 1993, p. 91). Second, Somalis believe that women must be ‘created’ as females and as gendered persons. Thus, a Somali child can be understood as androgyne (the female genitalia containing a male part—the clitoris—and the male genitalia containing a female part—the foreskin of penis), and through circumcision, the child is ‘purified’. The clitoris is also considered harmful and disgraceful for a woman because it is viewed as upholding her sexual urge. Thus, an ‘uncut’ girl is considered ‘unclean’ (*xaaraan* from the Arabic *xaraam*, prohibited by religion). Simultaneously, a central aspect of personhood in Somali culture consists of belonging to an agnatic<sup>22</sup> group. Ambivalently, then, the vertical scar resulting from infibulation (pharaonic cutting) can represent a fake penis, implying that the girls are symbolically transformed into ‘pure agnates’ (Talle, 1993, p. 97). That is, Talle (p. 104) argues, the natural organ is replaced by a constructed one, which ‘transforms girls into pseudo-males in kinship terms’.<sup>23</sup> Third, the pudenda of an uncut girl is considered ugly and unnatural, whilst a smoothed/excised and then a tied/covered pudenda is considered more attractive and more feminine by Somali women as well as men (Talle, 1993).

Beyond the culturally embedded meanings about ‘purifying’ the androgyne by removing body parts (such as the clitoris) considered masculine and/or disgraceful for a woman, purity in relation to FGM/C also entails religious purity ascribed to the category of virgins. The concepts of ‘religion’, ‘to remain a virgin in order to be married’, and ‘tradition’ are often intertwined: the pharaonic cutting (tradition) appears to create a barrier that preserves virginity, which Muslims consider the will of God (Dirie & Lindmark, 1991). In this study, therefore, I use the term ‘religious purity’<sup>24</sup> to refer to virginity and

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<sup>22</sup>An agnate is a person related through patrilineal descent.

<sup>23</sup>According to Talle (1993, pp. 99, 103), de-infibulation (or defibulation)—that is, the opening up of the woman’s vagina for the sexual intercourse—is the inversion of infibulation, in that it symbolises ‘separating’ and ‘opening’ instead of ‘sewing’ and ‘closing’. At defibulation, Talle argues, the husband both makes the ‘woman’ anew in terms of gender, and also establishes himself as a ‘man’. That is, she becomes a woman (wife, non-virgin) and potential mother, and he may join the lineage assembly (*shir*) and become a full member of his society. According to Johndotter Carlbom (2002, p. 72–73), in the south of Somalia, men are expected to ‘open’ their wives as described by Talle (1993), whilst in the northern parts of Somalia (including Somaliland), it is common to turn to medically trained staff in clinics or to a traditional circumciser. According to Ismail et al. (2016), in Somaliland, defibulation occurs in the presence of female members of the bride and groom’s families to verify that the bride is a virgin. It is performed by a senior female member of the community, a traditional birth attendant, or by medical staff in a hospital. Occasionally, however, the husband forcibly performs penetration and bursts through the scar from the infibulation.

<sup>24</sup>For Muslims, religious purity also implies other aspects, too. For example, a minor purification (*uudu*) is mandatory before each prayer by washing the hands, mouth, nose, face, arms, head, neck, ears, and feet. An additional stronger purification (*gushi*) by bathing is mandatory before a prayer if the

abstinence from premarital sex. Refraining from sexual activities and remaining a virgin until marriage is of outmost importance among Somalis, because the worst imaginable thing is an unmarried pregnant daughter, which is believed to result in persistent stigma directed at the entire family (Johnsdotter Carlbom, 2002, p. 115). Becoming unmarriageable and rejected by one's family represents a social disaster in a community, where both the culture and religion emphasise family as the primary social unit (Johnsdotter, Carlbom, Geesdiir, & Elmi, 2000, p. 26). Considering the patrilineal principle of Somali society—whereby every child inherits its father's clan affiliation—a child born outside marriage is born with no blood ties (Johnsdotter Carlbom, 2002, p. 116). Furthermore, the conceived immorality of the mother is transferred to the child, 'making it a defiled person' (Talle, 1993, p. 93).

Talle (1993, p. 96), in turn, writes that, in Somali society, virginity is not considered a natural condition in women, but has to be forcibly implanted upon young girls—by stitching together and closing their vaginal entrance. Instead of virginity being indicated by a preserved hymen, a girl *becomes* a virgin through infibulation (pharaonic cutting) and remains 'closed' until her future husband 'opens' her once married (Talle, 1993, p. 96). According to her, for Somalis, a chaste girl means a 'sewn' girl, whereby the closing is more important than the excision of the clitoris and other tissue. People also perceive FGM/C as protecting women against rape. In Somaliland, support for pharaonic cutting associates with rural and nomadic lifestyles, as shown in, for instance, Lunde's (2012, p. 54) study. She explains, if girls must walk long distances to fetch water and firewood or to tend animals, they become more vulnerable to sexual assault, and pharaonic cutting is thought to protect girls in such circumstances. In Lunde's study, participants also claimed that rape is increasing as a result of girls no longer undergoing pharaonic cutting, and rapists attempt to find girls who underwent sunnah cutting.

Proceeding to arguments around marriageability, first we must note that Somali marriage 'is not merely a pact between a man and a woman, but an alliance between agnatic families' (Talle, 1993, p. 95), whereby both bride wealth and dowry are exchanged. If a girl's infibulation is broken before marriage, her parents lose (the substantial) bride wealth and their competence as guardians is questioned (Talle, 1993, pp. 95–96). Examining the marriageability argument from the perspective of men's preferences in Somaliland, 94% of unmarried men who participated in Newell-Jones' (2016, pp. 32–33) study preferred to marry a cut woman (Newell-Jones, 2016, pp. 32–33). Some young men, however, changed their mind after discussing FGM/C in a group setting and after considering the health implications, which they previously did not link to their future marital life. They worried about the impact of pharaonic cutting on the health of their wives and on marital sex, whilst also wanting evidence of virginity. While the men in Newell-Jones' study were concerned that *they* would not enjoy the marital sex with a cut wife,

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prayer is impure due to, for example, menstruation, childbirth or sexual intercourse (Akar & Tiilikainen, 2009, pp. 52–53).

Johnsdotter Carlbom (2002, p. 57) points out that the fundamental Islamic value of *women's* rights to sexual satisfaction in marriage is also mentioned when arguing for the eradication of female circumcision. Newell–Jones (2017, p. 27) also found that the type of cut that their future wife has undergone mattered for 84% of young men. Furthermore, 89% of unmarried men stated that they preferred to marry a woman who underwent sunnah cutting. Whilst only 3% of respondents preferred to marry an uncut woman, 29% preferred that their daughters remained completely uncut (Newell–Jones, 2017, p. 37).

Turning our attention to national FGM/C prevention efforts in Somaliland, Bruchhaus (2013) states that unlike many other African countries where anti-FGM/C activities encounter strong resistance and are regarded as foreign intrusions into the local culture, Somalia initiated awareness-building campaigns as early as the 1970s. Such campaigns collapsed with the fall of the Barre regime in 1991. In 1997, Bruchhaus describes, UNICEF held its first seminar in Somaliland aimed at relaunching anti-FGM/C activities. This included establishing a national committee and regional task forces in order to formalise policies. Establishing these agencies led to the inclusion of FGM/C in the national gender policy, categorised as a form of gender-based violence under the subheading 'harmful traditional practices' (Lunde & Sagbakken, 2014). However, FGM/C was not seen as a priority in the 1990s since there were many more pressing needs (Lunde, 2012, p. 61). According to Bruchhaus (2013), international organisations initiating activities in Somaliland, along with the emergence of civil society, national NGOs, and a free press, have played a role in placing FGM/C back on the agenda in the post-war era. Given earlier efforts, FGM/C as an issue is quite openly discussed in urban areas, although in rural areas, communities remain reluctant to address the issue (Bruchhaus, 2013; Vestbøstad & Blystad, 2014). However, given the lack of water, food, and pasture, alongside difficulties accessing health centres and other public services in addition to interclan conflicts, FGM/C represents a less-than-urgent issue to tackle (Bruchhaus, 2013).

The Republic of Somaliland's National Constitution (*Constitution of the Republic of Somaliland* [English], 2001) mentions FGM/C under article 36, sub-article 2, stating, 'the Government shall encourage, and shall legislate for, the right of women to be free of practices which are contrary to Sharia and which are injurious to their person and dignity.' The National Gender Policy (2009) states that 'the most predominant forms of violence against Somaliland women are traditional practices such as female genital mutilation/cutting and virginity checks'; the National Youth Policy (2010–15) indicates a need to 'sensitise the public about the eradication of Female Genital Mutilation and advocate for laws prohibiting it fully (Newell–Jones, 2016, p. 68). There is, however, no approved FGM/C policy or law in place in Somaliland.<sup>25</sup>

According to Newell–Jones (2016, p. 68), drafting a National Policy for the Abandonment of Female Genital Mutilation (FGM/C Policy) began in 2009.

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<sup>25</sup>*Chapter 2* describes on legislation and policies preceding and during data collection for this study in October 2016. Some changes thereafter are described in *Chapter 7*.

UNFPA in collaboration with local CSOs intended to present the final policy to the Cabinet in 2016, but further discussions between ministries were required. The Ministry of Labour and Social Affairs and the Ministry of Religious Affairs have agreed on the proposed policy in relation to WHO types II and III (see *Table 1*), but disagreed on sunnah cutting (WHO type I). According to Newell-Jones (2016, pp. 8–9), the Ministry of Religious Affairs supports banning all types except sunnah cutting, whereas the Ministry of Labour and Social Affairs supports banning all types of FGM/C. Amongst community members, 80% of men and 63% of women support legislation banning all types of FGM/C except sunnah cutting, whilst less than 10% favour banning all types of FGM/C (Newell–Jones, 2016, p. 30).

Network against Female Genital Mutilation in Somaliland (NAFIS, 2014) found that people in Somaliland consider religious leaders best-suited to stop FGM/C, and to explain and declare FGM/C as not fulfilling a religious duty. Respondents also called on medical professionals to handle the health-related issues; the Ministry of Health and the Ministry of Religious Affairs and Ministry of Justice to make appropriate laws; the Ministry of Labour and Social Affairs and the Ministry of Education to integrate FGM/C into the school curriculum; and clan leaders and elders to convince communities about stopping FGM/C. Young men in particular mentioned that ‘intelligent’ and ‘knowledgeable’ people should take the lead in challenging FGM/C, whilst women of all ages wanted non-governmental and civil society organisations to play a leading role.

Whilst this chapter discussed the gender policies and FGM/C practices in Somaliland, in the next chapter I discuss the theoretical notions of patriarchy, gender-based violence, and masculinities.

### **3. THEORETICAL CONSTRUCTIONS OF PATRIARCHY, GENDER-BASED VIOLENCE, AND MASCULINITIES**

In this chapter, I outline my theoretical framework which draws from critical studies on men and masculinities (CSMM). The CSMM critically addresses men within the context of gendered power relations. Hearn (2004, p. 51) sums up the use of the CSMM framework, which 'seeks to make clear that these studies of men are critical; on men; explicitly gendered; and by men and women, separately or collaboratively.' The framework is, however, somewhat at odds with contemporary feminist theorising which I outline through Beasley's (2012, 2013, 2015) critique of CSMM.

After discussing some alternative directions for the interaction between feminist and CSMM theorising, and thereby motivating my use of CSMM, I proceed to present the 'juridico-discursive' (Foucault & Gordon, 1980) perspective to gendered power in the context of men and masculinities. This model draws upon notions of patriarchy, gender order, hegemony, and ideology (Whitehead, 2002). I focus on the structures and practices of patriarchy, relying on, for instance, Walby (1990, 2011), whose theorising I use to illuminate how FGM/C upholds and is upheld by other patriarchal practices. I also discuss the role of women as both victims and the primary perpetrators of FGM/C. I proceed by discussing men's anti-violence activism, feminist concerns that it entails a risk of reproducing male privilege, and intersectional concerns that research on male 'allies' has failed to attend to the structured differences in men's lives and has failed to promote marginalised men's engagement in gender justice work.

I then discuss the theoretical conceptions of men and masculinities, and the poststructural and materialist critique of the concept of (hegemonic) masculinity. According to the poststructural critique presented through, for instance, Whitehead (2002) and Wetherell and Edley (1999, 2014), the concept of masculinity/masculinities does not fully capture the variability, complexity, and contradictions in the way that men do/perform 'being a man'. The materialist critique, in turn, is presented through Hearn (2004, 2014), who posits that the concept takes attention away from men's practices. I go on to discuss notions of Muslim masculinities drawing upon Arat and Hasan's (2018) findings on the salient character traits conveyed in the Qur'an. I then discuss the core ideals of 'Somali manhood' (El-Bushra & Gardner, 2016) as well as the socio-economic realities within which masculinities are negotiated in Somaliland.



### 3.1 POSTMODERN CRITIQUE OF CRITICAL STUDIES ON MEN AND MASCULINITIES

In this section, I discuss critical studies on men and masculinities (CSMM), drawing heavily from Beasley (2012, 2013, 2015), who analysed the discordant theoretical directions between the three major subfields of gender/sexuality: feminism, sexuality studies, and pro-feminist (critical) studies of men and masculinities (CSMM)<sup>26</sup>. Whilst she found significant epistemological links between the subfields, as well as important differences in terms of, for instance, theoretical trajectories, content, focus, cause, and scholars, her primary critique and concern addresses the current location and future directions of CSMM. Beasley (2012, 2013) argues that the theoretical frame of reference employed by most CSMM writers offers a quite strict adherence to modernism in contrast to feminism and sexuality studies, which were heavily influenced by a postmodern critique. Whilst Beasley (2012, p. 748) views modernism and postmodernism ‘as broad theoretical trajectories located on a continuum, rather than as distinct—much less necessarily oppositional’, she argues that the differential trajectories cannot simply be combined without explanation. The prevalence of (modernist) social constructionism in CSMM theorising—conceiving of power in terms of social structures and oppression, and identities formed by the social structuring effects of power—highlights the growing gap against feminism and sexuality studies (Beasley, 2012, 2013).

Beasley (2013) identifies three specific points to support her claims regarding the deepening relationship between feminism and sexuality: ‘the take-up of postmodern thinkers, a sustained questioning of gender categories, and a position which disengaged gender and sexuality, associated with a comparatively more positive pro-sex view of sexuality.’ To her, this deepening relationship is not evident in the case of CSMM. Beasley (2012, 2013) takes Connell’s work as a starting point, since her work provides the central reference point for many in the field of CSMM. Adopting an approach that rejects both macro-structural determinism and its opposite, micro-level agency by voluntarist subjects, ‘does not involve a rejection of a modernist concern with structures of power, but rather merely a rejection of strong structuralist principles’ (Beasley, 2012, p. 754).

Yet, Beasley (2015) notes that Connell nevertheless proposes a less fixed conception of gender identity than some other CSMM writers. ‘Connell’s inclination to reiterate the gender category term, *masculinity*, enables gender to be viewed in the less fixed sense of a historical pattern of gender practice which is separate from sexed bodies’ (Beasley, 2015, p. 571, original emphasis). By contrast, Beasley (2015) argues that a range of other approaches to CSMM retain a more rigid account of gender identity, and these approaches strongly associate with practical interventions. She exemplifies with Hearn—another

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<sup>26</sup>Beasley refers to critical studies of men and masculinities, CSMM (2012), to masculinity studies (2013), and to men/masculinity studies, MMS (2015). In this study, I use critical studies on men and masculinities (CSMM), unless when directly quoting texts or speech that employ different terms.

central figure within the CSMM—who argues for moving from ‘masculinities’ back to ‘men’, ‘men’s’ practices’, and ‘men’s social relations’ (Hearn, 1996b; see also *Section 3.4*). Beasley (2015, p. 572), however, claims that an investment in gender category politics ‘involves parcelling together social norms of gender with a particular sexed body and, hence, invokes what feminist theoretical debates would associate with naturalised associations when compared to Connell’s focus on “masculinity”’. In his critical analysis of Hearn’s theoretical position, Berggren (2018, p. 335; referring to MacKinnon, 1989) draws parallels between Hearn and masculinity scholars informed by radical feminism, for whom ‘there is no meaning to the terms “men” and “women” beyond dominance and subordination’, and who are thus less inclined to appreciate the notion of masculinities in the plural.

Reflecting on the relationship between contemporary feminist theories, CSMM scholarship, and practical interventions around violence, Beasley (2015) suggests three alternative directions for the interaction between feminist and CSMM theorising. These alternatives are ignoring disjunctions, confronting them and bringing variance into accord, or making connections that bridge disjunctions. In terms of this last approach, Beasley draws from Spivak’s (1990) postcolonial feminist position, suggesting ‘strategic essentialism’, according to which the use of a universalised group identity may be at times strategically necessary in practice, whilst gender identity categories must be theoretically unsettled and resisted. In addition to ‘strategic essentialism’, I also follow Walby (2011, p. 103) who, relying on Felski (1997) and Sayer (2000), argues that refusing to stabilise categories makes it difficult to engage in analysis, and, hence, a certain amount of abstraction is necessary. Furthermore, as pointed out by Walby, Armstrong, and Strid (2012), whilst remaining fluid over time, at any one moment, relations involving social inequality enjoy some stability as a consequence of their institutionalisation.

*The way forward is to recognise that concepts need to have their meaning temporarily stabilised at the point of analysis, even while recognising that their social construction is the outcome of changes and interactions over time and to note the historically varied construction of these categories*

*(Walby, Armstrong, & Strid, 2012, p. 236)*

In my study, I primarily follow Whitehead (2002), who (together with Wetherell & Edley, 1999) Beasley (2012) argues serve as examples of CSMM scholars engaged in postmodern lines of enquiry. Whitehead (2002, p. 9) emphasises the multiplicity of masculinities, ‘while also recognising that men’s behaviours have material (often violent) and political actuality, though not one based in biology.’ In *Section 3.4* below, I discuss in greater detail the different approaches to men and masculinities, including those put forth by Connell and Hearn. However, I next turn to a discussion of the structures and practices of

patriarchy, which I find useful in scrutinising FGM/C and its relationship to other patriarchal practices.

### 3.2 STRUCTURES AND PRACTICES OF PATRIARCHY

Explanations of FGM/C relying on patriarchy characterise the practice as ‘an intentional (or subconscious) patriarchal action whose goal or consequence is the oppression of women’ (Gruenbaum, 2001, p. 40). Mackie and LeJeune (2009, p. 5), however, argue that patriarchy as the cause of FGM/C is insufficient, ‘because most, if not all, communities that do not practice FGM/C are also patriarchal.’ They emphasise the importance of distinguishing between the origin of a social practice from factors perpetuating it. Even if FGM/C presumably originated from imperial polygyny and the interests of the male elite, as, for instance, Mackie (1996) suggests, the practice was not necessarily supported for a similar reason by those occupying lower strata or by subsequent generations (Mackie & LeJeune, 2009). But, if FGM/C was established in a community, other forms of patriarchy often encouraged the continuation of the practice, and patriarchy thus became a supporting condition of the practice. In what follows, I present a theoretical discussion on patriarchy, concluding with my own standpoint. In *Section 3.3*, I discuss how FGM/C comprises a patriarchal practice and discuss how it relates to other patriarchal practices and structures.

Millett (1970) introduced the term ‘patriarchy’ into contemporary feminist scholarship. For Millett, ideologies that work through masculinist definitions of gender and sexuality serve as key tools for male oppression. Millett argues that women are pressured to accept inequality vis-à-vis men through sex-role stereotyping and the stigmatisation of women who attempt to challenge socially correct ‘feminine’ behaviour. Whilst Millett stresses ideological forces, other feminists, such as Rich (1976), also emphasise the physical force:

*Patriarchy is the power of fathers: a familial-social, ideological, political system in which men—by force, direct pressure, or through ritual, tradition, law, and language, customs, etiquette, education, and the division of labour—determine what part women shall or shall not play, and in which the female is everywhere subsumed under the male.*

(Rich, 1976, p. 57)

Stressing that patriarchy extends beyond autocratic rule by the male head of a family, Lerner (1986, p. 239), for example, defines patriarchy as ‘the manifestation and institutionalisation of male dominance over women and children in the family and the extension of male dominance over women in society in general.’ According to Lerner, patriarchy implies that men hold power across all important institutions in a society. As such, women are deprived of access to such power, although not completely powerless or

deprived of rights, influence, and resources. Lerner (1986, pp. 239–240) also argues that paternalism describes a particular mode or a subset of patriarchal relations that is based on reciprocity; male protection and economic support is traded for female sexual service and unpaid domestic work.

Walby (1990, p. 20), in turn, defines patriarchy as ‘a system of social structures and practices in which men dominate, oppress, and exploit women.’ She argues that theories of patriarchy that utilise ‘a simple base–superstructure model of causal relations’ do not aid in understanding variation and change (Walby, 1990, p. 16). In Walby’s theorising, the private and the public (1990)—or the domestic and the public (2009, 2011)—comprise the primary forms of patriarchy. The private patriarchy is based upon housework as the main site of women’s oppression, and the expropriation of women’s labour takes place primarily by individual patriarchs within the household. Public patriarchy, by contrast, is based upon employment and the state, where the expropriation of women represents a more collective appropriation (Walby, 1990, p. 24). Furthermore, in the domestic form, the processes of power are primarily *exclusionary*—thereby excluding women from *locations* of power and influence; in the public form, these processes are *segregationary*—that is, segregating women in the public sphere into *positions* of lesser power and influence (Walby, 2011, p. 105). Transformation from the domestic to the public patriarchy is well advanced in the global North, but nearly absent in the global South according to Walby (2011).

In the core of Walby’s (1990) theorising are six primary structures (also referred to as ‘fields’ or ‘sites’) from which patriarchal relations emerge and which form patriarchy. These six structures consist of paid work, housework, sexuality, culture, violence, and the state. Each structure carries causal effects upon the others, by both reinforcing and blocking them, and the interrelationships between structures create different forms of patriarchy (Walby, 1990, pp. 16, 20). In each of the six structures, patriarchal practices vary and develop separately. In her subsequent works, Walby (2009, p. 301; 2011, p. 104) defines the term ‘gender regime’ (which she uses interchangeably with the term ‘patriarchy’) as ‘a set of interconnected gender relations and gendered institutions that constitutes a system’. Instead of the six fields, she outlines four major institutional domains that define the gender regime, which encompass the economy (paid and domestic unpaid work), polity (conventional states, state unions like the EU, and organised religions with the capacity to regulate important aspects of social life), violence, and civil society (including culture, media, knowledge institutions, and sexuality).

Referring to Puleo (1995) and De Miguel (2015), Kaplan et al. (2017, p. 152) claim that every patriarchal system relies on coercion and consent, where the coercive model sanctions what is allowed and what is forbidden to women, whilst the consent-based model ‘builds inequality through binary narratives that leverage gender roles in a rigid way.’ With regards to the latter model, patriarchy is often associated with a patriarchal ideology that justifies male dominance and attributes it to inherent natural differences between men and

women. According to Lerner (1986, p. 240), sexism defines the ideology of male supremacy, superiority, and beliefs that sustain it. In her view, sexism consists of prejudice, stereotyping, or discrimination based on gender and 'stands in the same relation to paternalism as racism does to slavery.' Connell (2005a) points out religion, biology, cultural tradition, and organisational mission (such as that used in the military) as ideologies that are used to justify men's supremacy. Drawing on Gramsci (1971), Lazar (2007) argues that gender ideology is hegemonic in that it often does not appear as domination at all. Instead, she points out, it is often embedded and hidden in everyday routines and interactions and appears as largely consensual and acceptable to most within a community. Gaining consent and perpetuating dominance are thus largely accomplished through discursive means (Lazar, 2007).

According to Hirdman's (1990) theory of a *genus* (a Swedish term referring to both gender and sex) system, *genus* is constructed around the principles of separation and hierarchy. In Hirdman's conception, separation of (or simply difference between) sexes entails both defining feminine and masculine as dichotomous and in opposition to one another, as well as a gendered division of private life and work. Hierarchy, in turn, entails the superiority of the masculine, portraying man as the human norm, and concentrating the material, cultural, and symbolic power in the hands of men. In this study, I borrow from Hirdman, and suggest that the strict separation of the sexes and their hierarchical order comprise central components in patriarchal *ideologies*, which underlie the fields or domains described by Walby (1990, 2009). I expand further on my standpoint at the end of this section.

As, for instance, Whitehead (2002, p. 87) notes, a 'key strength of the concept of patriarchy lies in its ability to describe the ideological material conditions of gender inequalities and oppressions across multiple sites.' However, the concepts of *patriarchy* and *gender system* have been criticised for emphasising structure and stability at the cost of agency and change (Julkunen, 2010, p. 19; Walby, 2011, pp. 103–104). Gender system as a concept has been replaced with *gender order* in, for instance, cultural studies (Julkunen, 2010, p. 19). In Walby's (2011, p. 103) view, however, 'the varied aspects of gender relations are sufficiently interconnected to merit being analysed as a social system.' But, because the term 'patriarchy' is presumed to entail an ahistoric, essentialist, and reductionist approach to the analysis of gender relations, Walby (see, for example, 2009, 2011) replaces the term 'patriarchy' with the term 'gender regime'. She, however, maintains that they refer to the same underlying concept.

Julkunen (2010, p. 19) addresses the critique that 'patriarchy' and a 'gender system' emphasise structure and stability by claiming that, whilst systems tend to uphold themselves, a system based on a strict segregation and hierarchy creates contradictions and incongruities that open up possibilities for agency and renegotiation. Referring to Hirdman's (1990) concept of a 'gender contract', which embeds support for the patriarchal system and comprises the cultural understanding of gendered rights and responsibilities,

representations of gender, and rules for intimate heterosexual relationships, Julkunen (2010) also suggests that oppressive gender systems cannot be upheld without some level of acceptance—and, hence, agency—from women. Thus, she also addresses the critique that the concepts of patriarchy and a gender system promote a Victorian view of women as ‘morally pure victims’ (see Elshtain, 1981).

Walby (1990) notes that essentialism and ahistoricism in socialisation theory (see Belotti, Appignanesi, & Wordsworth, 1975; Comer, 1974; Parsons & Bales, 1956; Sharpe, 1976) and in psychoanalytic theories (see Chodorow, 1979; Irigaray & Gill, 1985; Irigaray, Porter, Burke, & Burke, 1985; Mitchell, 1975) can be overcome through poststructuralist discourse analysis. Whilst the ‘field’ of culture plays a crucial role in constituting patriarchy via socialisation—whereby boys and girls learn the appropriate behaviour for their sex via representations of gender in cultural texts and institutions—notions about masculinity and femininity extend to all areas (‘fields’) of social relations in Walby’s theorising. In other words, whilst socialisation appears to *cause* the differentiation into masculine and feminine, it does not explain where the *content* of these notions originated (Walby, 1990, p. 93).

In this study, following Walby (2009, 2011), I prefer to use the concept of a *patriarchal gender regime* over patriarchy and a patriarchal gender system.<sup>27</sup> Drawing upon Walby (1990) and Lerner (1986), I define the *patriarchal gender regime* as a system of interrelated social structures and practices which manifest and institutionalise men’s domination in all areas of social relations. The patriarchal gender regime—and thereby men’s domination—is upheld and legitimated by *patriarchal interpretations* of ideologies and belief systems, such as a religion, a cultural tradition, or an organisational mission (see Connell, 2005a); nationalism (see, for example, Gutmann, 1996; Nagel, 1998); and science (for example, functionalism<sup>28</sup>). Such patriarchal interpretations often entail gendered stereotypes, roles, norms, and ideals that are used to justify strict separation of the sexes and their hierarchical order (see Hirdman, 1990; Lerner, 1986). Furthermore, these interpretations are reproduced and mediated—but also constantly renegotiated—via institutions such as family, education, and media, as well as through coercive and non-coercive routines and interactions in all areas (‘fields’) of social relations. As Walby (1990) notes, these often hidden, consensual practices can be explored using poststructuralist discourse analysis, which helps to illuminate the ‘content’ that informs, for instance, the socialisation process. Thus, my methodological framework (see *Chapter 4*) draws on Fairclough’s (1992, 1995, 2001) and Lazar’s (2007) critical discourse analytical approaches.

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<sup>27</sup>Whilst ‘gender order’ has replaced the concept of a ‘gender system’ in, for instance, cultural studies (see Julkunen, 2010, p. 19), in this study, a patriarchal gender order refers to the superiority of men and the inferiority of women (drawing on Hirdman’s [1990] concept of ‘hierarchical gender order’).

<sup>28</sup>According to structuralist functionalist thinking, which flourished in the social sciences from the 1940s to the 1970s, the roles of men and women were seen as naturally different but complementary, and the sexual division of labour represented a collective egalitarian decision serving joint interests (see Parsons & Bales, 1956).

Furthermore, to avoid essentialism and reductionism, and viewing women as ‘morally pure victims’ (see Elshtain, 1981), I emphasise that, besides *accepting* the patriarchal gender order (as indicated by Hirdman’s [1990] concept of a ‘gender contract’), women also *actively engage* in patriarchal practices, as, for example, the main perpetrators of FGM/C. I discuss this in greater detail in the following section, illustrating how FGM/C comprises and relates to other patriarchal practices. This section also turns a critical gaze towards the involvement of men in the prevention of violence against women.

### **3.3 PATRIARCHAL VIOLENCE AND MEN’S ANTI-VIOLENCE ACTIVISM**

In this section, I first discuss FGM/C in light of theories on gender-based violence. Inspired by considerations on what is specifically gendered about gender-based violence, I illustrate how FGM/C affects gender and is thus a *gendering practice*, as well as how it (partly) entails performing gendered behaviour and is thus a *practice of gender*. In the latter part of this section, I discuss men’s anti-violence activism and show that efforts to prevent violence against women can sometimes risk reproducing male privilege.

#### **FGM/C AS A GENDERING PRACTICE AND AS A PRACTICE OF GENDER**

Violence against women entered human rights discussions and discourse largely through the women’s movement in the 1990s, almost half a century after the international human rights mechanism was established under *The Charter of the United Nations* (1945) and *The Universal Declaration of Human Rights* (1948) (Nousiainen & Pentikäinen, 2017). The official United Nations definition of gender-based violence was first presented during the 1993 United Nations General Assembly when it passed the *Declaration on the Elimination of Violence Against Women*. According to this definition, “‘violence against women’ means any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion, or arbitrary deprivation of liberty, whether occurring in public or in private life’ (United Nations General Assembly, 1993). According to the declaration, violence against women encompasses, but is not limited to:

a) Physical, sexual, and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation, and other traditional practices harmful to women, non-spousal violence, and violence related to exploitation;

b) Physical, sexual, and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment, and intimidation at work, in educational institutions and elsewhere, trafficking in women, and forced prostitution; and

c) Physical, sexual, and psychological violence perpetrated or condoned by the state, wherever it occurs.

In the *Declaration on the Elimination of Violence Against Women*, 'female genital mutilation' is listed as one of the traditional practices harmful to women, together with battery, the sexual abuse of female children in the household, dowry-related violence, and marital rape (United Nations General Assembly, 1993).

According to Ronkainen (2017), 'violence' is a value-laden term, identifying something as negative, reprehensible, and wrong. She points out that labelling something as violent entails separating legitimate violence (for example, by police for 'due' course) from illegitimate violence, and results from cultural, historical, and social negotiations. Such negotiations justify and account for certain forms of violence, she argues. Gender represents one factor impacting the cultural and social meaning-making of violence, and both gender and violence are connected to power in various ways (Ronkainen, 2017). Bufacchi (2005) suggests that violence can be conceptualised in terms of the verb 'to violate', meaning to infringe, or transgress, or to exceed some limit or norm. Yet, Waldenfels (2005) notes that disagreement exists regarding what exactly is violated when an act of violence occurs. If the answer is a 'violation of women's rights', then something must be said about the nature of those rights that are violated (Opoku, 2017).

'Violence against women' (VAW), 'gender-based violence' (GBV), and 'gendered violence' are often used interchangeably. Anderson (2009) points out that when one assumes that VAW equals GBV without analysing the relation to theories of gender, one fails to analyse the gender–violence nexus in light of theory. She criticises sex parity findings in partner violence studies, according to which male and female partners are equally violent towards one another, and partner violence against women is thus unrelated to gender. Discussions about who hits whom cannot clarify if and how violence is gendered (Anderson, 2009). Bumiller (2010) calls for a focus on the *meaning and purpose* of violent acts and their relation to the performance of gender. Ronkainen (2017) notes that research on GBV should focus on *resources* enabling violence, how violence is *justified* to oneself and others, and the kind of gendered agency attached to it. Stark (2010, p. 209) argues that investigations of the violence–gender nexus should 'identify how violence functions in relationships to preserve and extend gender inequalities' rather than asking who uses violence. Hunnicutt (2009) emphasises that the principal characteristic of GBV lies in that it occurs against women precisely because of their gender. She posits that the concept of patriarchy maintains



the theoretical focus on dominance, gender, and power, and anchors violence against women within social conditions rather than against individual attributes. hooks (2000), in turn, proposed using the term 'patriarchal violence' as a label for the abuse and violence that happens at home due to patriarchal structures, beliefs, and values, since the term 'domestic violence' does not maintain the connection between violence and structures.

Considering FGM/C and Stark's (2010) request to identify how violence functions to preserve and extend gender inequalities and Hunnicutt's (2009) notion that gender-based violence occurs against women precisely because of their gender, I now turn to Mackie and LeJeune (2009), who argue that patriarchy as the cause of FGM/C is insufficient. They emphasise the importance of distinguishing between the origin of a social practice and what causes its perpetuation. To link the current distribution of FGM/C practices to places in which it originated and its diffusion, Mackie (1996) proposes a single-source diffusion theory that situates the origins of the practice in ancient Meroe (present-day Sudan), where infibulation was practiced in the context of extreme resource inequality. He suggests that for highly polygynous wealthy males, the genital cutting of girls and women symbolised controlled fidelity and a certainty of paternity. Mackie hypothesises that the practice was then dispersed across social strata and spread throughout female slave trade routes. Others have argued a dual-source origin, arguing that as infibulation spread from its original core area, it encountered and merged with pre-existing practices. For instance, Dorkenoo (1994) argues that FGM/C developed independently amongst certain ethnic groups in sub-Saharan Africa as a part of puberty rites. Lightfoot-Klein (1989) claims that excision practices date back thousands of years and, at some point, came into being through a preoccupation with virginity and chastity.

By considering FGM/C a gendered practice, it is important to note that communities that practice it do not view it as violence, but as a means of guaranteeing cultural notions of what is best for girls (see Mackie & LeJeune, 2009). Yet, FGM/C corresponds to Hunnicutt's (2009) notion of the principal characteristic of GBV: it occurs against women precisely because of their gender. Wilson (2002) discusses patrilineal property inheritance as a significant feature when considering the effects of patriarchy on current FGM/C prevalence. She points out that families involved in agriculture hand over land to their sons, whilst the daughters are expected to be taken care of by their husband. Illiteracy and weak employment opportunities uphold the patriarchal order assigning women the role of giving birth and carrying out domestic duties, whilst men are assigned the role of providing for their family. Marriage is thus often the (only) way for women to earn a living and status, Wilson argues, whilst virginity and chastity exist as prerequisites to marriage, symbolising the honour of the girl's family. Under these circumstances, FGM/C is carried out to preserve the girls' morality, chastity, and fidelity as well as marriageability and family honour (Gruenbaum, 2006). Mackie and

LeJeune (2009) also emphasise the socioeconomic subordination of women in the continuation of FGM/C practices:

*Patriarchal institutions include socio-economic subordination that makes women dependent on marriage for material well-being and, therefore, unable to risk not undergoing FGM/C. They also include social norms that ensure that women have little voice in matters that affect them, rendering them unable to publicly challenge harmful, threatening, and subordinating practices.*

(Mackie & LeJeune, 2009, p. 6)

Above, both Wilson (2002) and Mackie and LeJeune (2009) reflect on the interrelatedness of FGM/C and patriarchal practices in different structures, putting forth the notion that patriarchy does not cause FGM/C, but represents a supporting condition of the practice (Mackie & LeJeune, 2009). Building upon their views and on Walby's (1990) understanding of the six fields of patriarchy (paid work, housework, sexuality, culture, violence, and the state), I argue that FGM/C comprises patriarchal violence that sustains and is sustained by other patriarchal practices. Crosscutting the fields of sexuality and culture, FGM/C represents a valued tradition often assumed to be mandated by a religious doctrine and linked to understandings of honour, thereby justifying the use of violence to control women's virginity and fidelity. In the fields of paid work and housework, women's socio-economic subordination upholds women's dependency on marriage and, therefore, FGM/C as a prerequisite to marriage in practicing communities. Health problems and child marriages, which often follow FGM/C, further disadvantage women's possibilities of gaining an education and participating in working life. Furthermore, in the field of the state—often dominated by men—the refusal or reluctance to intervene in FGM/C through specific legislation and policy contributes to the perpetuation of the practice.

After illustrating how FGM/C functions to preserve and extend gender inequalities (see Stark, 2010), and occurs against women precisely because of their gender (see Hunnicutt, 2009), I next examine if performing FGM/C implies performing a *practice of gender*. Mainstream feminist research on violence relies on constructions of male perpetrators and female victims, characterised by unequal, gendered positions of power (Jokinen, 2017; Keskinen, 2010). Hearn (2004) argues that gender-based violence involves power imbalances where, most often, men are the perpetrators and women the victims. Radical feminists (for example, Brownmiller, 1976) argue that men's violence against women is indeed the basis of men's control over women. A central question regarding men's violence against women in Walby's (1990, p. 136) view is, 'whether men are violent to women as a consequence of their power over women or in order to gain power over them.' Jakobsen's (2014) study of the meaning of male-to-female partner violence in Tanzania exemplifies how wife-beating is gendered in the sense that it supports and is

supported by the masculine ideal: to be a man is to be in charge, to beat is to be in charge and is masculine in itself:

*To be able to beat is to be in authority, and to be in authority is to be a man. Thus, beating to control is an enactment of being a man, of being the head of the house, of inhabiting the role of control that is a masculine role. In addition to enforcing gender, beating is doing gender: it is not only affecting gender, and thus a 'gendering practice', it is also a practicing of gender, in that it is in itself performing gendered behaviour. [...] Gender is in both the act of beating and in the subordination that results, illustrating the aforementioned duality of gender as a social structure that often eludes the researcher*

(Jakobsen, 2014, p. 15)

Similar mechanisms can be found which relate to intimate partner violence and sexual violence irrespective of the cultural context. Studies on male perpetrators of intimate partner violence in, for instance, Finland show that men's violence often aims at retaining control, controlling women's sexuality, and performing masculinity (Keskinen, 2010).

Female perpetrators and violence in homosexual relationships challenge constructions of male perpetrators and female victims (Keskinen, 2010). Moreover, Ronkainen (2017) writes that femininity is often associated with empathy, care, and the fostering of life, traits which are antithetical to violence. Masculinity, in turn, is attached to power, force, and outbound activity, all of which are compatible with violence. FGM/C, however, is almost always organised by mothers and grandmothers, and 'operated' by women (Fusaschi, 2017), rendering it 'women's business' (Mackie & LeJeune, 2009), and a form of gendered violence, where women comprise both victims and the primary perpetrators. Thus, carrying out FGM/C is not 'practicing masculinity' in the sense that wife-beating represents a practice of masculinity in Jakobsen's (2014) study presented above.

In her study on violence perpetuated by women against women in Tanzania (female genital cutting, widow cleansing rituals, and woman-to-woman marriage<sup>29</sup>), Opoku (2017) explores women's roles in the reproduction of patriarchy by examining how subordinate groups or classes accept and actively participate in their own oppression. Opoku (p. 80) emphasises how 'the immense power of the community in traditional African communities explains why African women have to undergo some of the harmful rituals at the expense of their health.' She also examined why many African women in senior

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<sup>29</sup>According to Opoku (2017), a 'widow cleansing ritual is a cultural practice some women undergo after the death of their husband. It requires the widow to have sex with a village cleanser to be purified from the haunted spirit of her deceased husband. Through this cleansing ritual, the widow is inherited into the deceased homestead and accepted in her community. Woman-to-woman marriage refers to the institution whereby a barren woman or a woman who has only girl children pays a dowry to marry another woman (very often a younger woman) and assumes control over her and her offspring. The younger women in such relationships are frequently treated as "the reproductive instrument" for another woman' (Opoku, 2017, abstract.).

positions pass these rituals on to the next generation despite the physical and psychological harm to the human body. Drawing on Venter (2004), Opoku (2017, p. 78) writes that the individual is born out of and into the community and will always be a part of the community. Ostracising an individual or group who disobeys represents the most severe punishment for many African groups (Ejizu, 2007).

Bicchieri's (2006) theory of the dynamics of social norms describes the circumstances in which parents decide to cut their daughters. First, individuals are aware that the social 'rule' of cutting of girls applies to them. Second, individuals prefer to conform to this rule, because they expect that a large segment of their social group will cut their daughters (empirical expectations) and that a large segment of their social group thinks that they ought to cut their daughters (normative expectations). A social norm like FGM/C is difficult for individual families to stop, Bicchieri argues, since they believe that if they do not conform to community norms, they will pay a price in the form of social exclusion, criticism, ridicule, stigma, and/or an inability to marry their daughters. Moreover, legal and moral norms that regulate behaviours adhering to social norms are often enacted by different sources and stand at odds with one another. For example, legislation that prohibits FGM/C is expected to discourage the practice. But where social norms governing FGM/C remain in place, the fear of social exclusion for not conforming to the norm may outweigh fears of fines and imprisonment (UNICEF, 2013).

Newell-Jones's (2017) investigation in Somaliland reflects the decision-making dilemma that women confront vis-à-vis FGM/C.<sup>30</sup> The vast majority (94%) correctly listed the complications resulting from pharaonic cutting, yet pharaonic cutting persists as the dominant type in Somaliland (see *Section 2.3*). As Newell-Jones argues, this suggests that a lack of knowledge is unlikely to persist as the primary reason for continued cutting. Yet, 95% of female respondents to Ismail et al.'s (2016) study reported that they would perform sunnah cutting on their daughters, whilst less than 5% said they would perform pharaonic cutting. Furthermore, 83% of women in Newell-Jones' (2017) study *hope* for some abandonment of the practice (59% want to abandon only pharaonic cutting, 20% pharaonic and the intermediate type, and 4% all types of cutting).

Yet, the pressure to conform to social norms regarding FGM/C that women experience against their aspirations and hopes is enforced by a lack of communication between men and women, and women's often inaccurate perceptions of men's preferences (Newell-Jones, 2017). Since mothers consider FGM/C as proof of virginity and frame the practice through concern for their daughter's marriageability, the messages men send to women influence the decision-making process (Newell-Jones, 2016). According to Newell-Jones' (2017) study, an overwhelming majority of men (98%) in

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<sup>30</sup>In Somaliland, decisions about whether a girl is cut and the type of cut she undergoes are assumed to be made by the mother alone in a clear majority of cases, by grandmothers in approximately 10% of cases, and jointly by mothers and fathers in less than 10% of cases (Newell-Jones, 2016, Chart 7.2.9A).

Somaliland wish to see some abandonment of the practice (89% want to abandon only the pharaonic cutting, 3% pharaonic and the intermediate type, and 6% all types of cutting). It also seems that men are increasingly participating in dialogues of FGM/C both in their own families and within the community (Bruchhaus, 2013). Furthermore, both men and women exert influence through a preference for either a cut or an uncut daughter-in-law: 80% of community members prefer their sons to marry a cut woman, regardless of the participants' gender, age, and rural or urban location (Newell–Jones, 2016).

In addition to being the primary decision-makers regarding a daughter's FGM/C, across various societies, women are almost always the 'operators' of FGM/C, Fusaschi (2017) wrote. She found that such women are often elderly and responsible for different practices associated with women's and children's bodies and health (such as labour and childbirth), and their knowledge usually passes down from mother to daughter. Being a circumciser can provide a good income and represent one of the very few opportunities for women to gain status within their communities. In Somaliland, for example, circumcisers earn approximately US\$10 per circumcision, a rather significant sum (Lunde, 2012, pp. 65–66).<sup>31</sup> Through the dissemination of information about health risks, parents now increasingly turn to medical practitioners to cut their daughters (UNICEF, 2010). These health professionals (nurses, midwives, and doctors) are also primarily women who may earn significant additional income from performing FGM/C. Newell–Jones's (2017) interviews with healthcare professionals in Somaliland revealed the contradictions they face between their understanding of professional role (which does not entail performing any type of FGM/C) and the pressure they feel to minimise the harm done to an individual girl by performing a cut using medical equipment and their knowledge of anatomy.

To summarise, I posit that FGM/C is a form of patriarchal violence which occurs against women precisely because of their gender and preserves and extends gender inequalities. The practice is sustained by other patriarchal practices, above all the socio-economic subordination that renders women dependent upon marriage for their material well-being and, therefore, parents (specifically mothers) pressured to expose their daughters to FGM/C. Thus, it is important to explore if and how women's socio-economic subordination and violence as a means to control women and girls are discursively justified, normalised, and (re)produced. Furthermore, I suggest that FGM/C is a practice of gender. In deciding to have their daughters cut, mothers perform the gendered role into which they were socialised, which includes perpetuating traditional practices and preparing children, especially girls, for adulthood. In terms of men, practicing FGM/C is not about practicing masculinity since cutting is almost always organised and performed by women. However, I will

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<sup>31</sup>The average wage in 2012 was US\$1.85 per day ('Labour force survey Somaliland, 2012. Report on Borama, Hargeisa & Burao,' 2013). The proportion of the population living below the poverty line (US\$1.90 in 2016) was 52.7% ('Somaliland in Figures 2016', 2018).

discuss men's support for FGM/C as an enactment of masculinity in *Section 3.5*.

After discussing the role of women in the perpetuation of FGM/C, I next discuss men's involvement in the promotion of gender equality in general and in the prevention of gender-based violence in particular.

## **MEN'S ANTI-VIOLENCE ACTIVISM**

Connell (2005a) along with Holmgren and Hearn (2009) claim that gender issues have been widely regarded as women's concerns given how they appeared on the public debate agenda. Men receive a 'patriarchal dividend', a set of material and interpersonal privileges, from gendered structures of inequality (Connell, 1987). Promoting gender equality is thus often viewed as against men's interests, contributing to men and boys' resistance and antifeminist politics (Flood, 2004, pp. 458–461). Connell (2005a) argues that some men accept change in principle, but in practice continue to act in ways that sustain men's dominance of the public sphere and assign domestic labour and childcare to women. In addition to the ideologies that justify men's supremacy on the basis of, for instance, religion, biology, or cultural tradition, men in business and government typically reject government actions in support of equality, favouring the unfettered action of the market (Connell, 2005a).

According to Hearn (2001, p. 10), men's resistance to gender equality also emerges for reasons such as complicity in current arrangements, defining gender equality as 'women's business', preferring men and men's company, and less conscious psychological forms of ambivalence and resistance. The gender norms that boys and men are expected to follow are often rigid and do not include solidarity with women or any other disadvantaged groups (Adams & Coltrane, 2004). Against this background, it is unsurprising that men who advocate for gender equality may face ridicule, contempt, and anger (Connell, 1995; Crooks, Goodall, Hughes, Jaffe, & Baker, 2007; Flood, 2004; Ruxton & van der Gaag, 2013).

Despite challenges and setbacks, men's support for gender equality occurs in various forms, such as through intellectual and public advocacy, organisational and political alliance, campaigns amongst men, youth work, and 'men's work', Connell (2003) describes. In her view, the most extensive social action, combining government and non-government initiatives, has occurred in Scandinavia, and has demonstrated that men can change their behaviours when circumstances favour doing so. According to Flood (2011), men can be motivated to promote equality by appealing to their personal well-being (for example, freedom from the costs of conforming with dominant definitions of masculinity), relational interests (men's care and love for the women and girls in their lives), collective and community interests (the benefits to communities, for example, by diminishing the civil and international violence associated with aggressive constructions of masculinity

and patriarchal nation-states), and principle interests (men's ethical, political, or spiritual commitments).

Flood (2004, pp. 458–461) argues that one of the most significant efforts to alter men's involvement in gender relations centres on men's violence against women (VAW), a key focus of anti-sexist men's groups since the early 1970s. In both developed and developing countries, groups of men have emerged seeking to end men's violence against women and children, he notes. Efforts to prevent VAW now increasingly take as a given that they must engage men as participants in education programmes, as targets of social marketing campaigns, as policy makers and gatekeepers, and as activists and advocates (Casey, Tolman, Carlson, Allen, & Storer, 2017; Flood, 2011; Peretz, 2017, 2018b). Such efforts are often framed in terms of 'ally' development, since they mobilise a group that is socially privileged by their identity to work against one of the outcomes of that very privilege (Casey et al., 2017; Peretz, 2017). Men's engagement in anti-violence work parallels ally development in other social justice causes, such as white antiracists activists and heterosexuals who work for gay rights (Casey & Smith, 2010; Peretz, 2017).

Carlson et al. (2015) suggest that the theoretical framework for men's engagement in VAW prevention continues evolving. Furthermore, findings remain largely descriptive and stem from small qualitative samples, Casey et al. (2017) point out. They further claim that the association between specific reasons for men's anti-violence involvement and successful long-term engagement or between gender equality attitudes, beliefs, and behaviours remains unexamined. Carlson et al. (2015) identified two theory-informed approaches often used when discussing the engagement of men and boys in VAW prevention. First, the pro-feminist rationale of engaging men and boys relies on the argument that if the goal is to end VAW men must be involved, because they are the primary perpetrators (Flood, 2004, 2011). Furthermore, adherence to rigid or traditional notions of appropriate masculinity associates with the greater acceptance of and risk for the perpetration of violence (Flood, 2011; Murnen, Wright, & Kaluzny, 2002). Messner (1997, p. 54), however, claims that 'politics of guilt' is unlikely to produce effective and affective male allies.

Second, the social norms approach posits that correcting individuals' misconceptions of social norms can reduce problem behaviours and increase healthy behaviours (Berkowitz, 2002). In terms of men's VAW, the approach aims to identify misconceptions of men's concurrence with each other's sexist and violence-supportive norms, whilst challenging men's own beliefs and attitudes (Fabiano, Perkins, Berkowitz, Linkenbach, & Stark, 2004). Through role models, education, surveys, and media campaigns, the approach aims to empower the previously quiet majority of men who value respect and non-violence to take a more active stance in promoting these ideals (Carlson et al., 2015).

With regards to men's role in the prevention of FGM/C, the pro-feminist rationale is not well applicable as FGM/C prevention addresses women's

patriarchal violence against other women. Furthermore, FGM/C often does not represent violence in the communities practicing it. Since FGM/C exists as a social norm upheld by biased empirical and normative expectations (Bicchieri, 2006), the social norms approach is better applicable in the prevention of FGM/C. However, since men are not the perpetrators of FGM/C, the rationale for engaging them is not primarily focused on correcting men's misconceptions of norms, but on correcting parents' (mainly mothers') misconceptions of men's preference for cut wives where men are actually turning against FGM/C.

Several frameworks for generating individual men's interest in violence prevention have adopted a 'stages of change' approach. For instance, Casey and Smith (2010), along with Prochaska, Colleen, and Kerry (2002) propose models for men's pathways into anti-violence work assuming a continuum of 'statuses' over time relative to men's awareness, willingness, and ability to act as allies to women. Carlson et al. (2015) argue that men's catalysts for joining anti-violence efforts include making a solid personal connection with the issue of gendered violence. In their study, fatherhood most often represented the reason for becoming engaged. Other reasons included men's desire to give back after they had benefited from a programme, recognising their wealth and privilege, and their relationships to others. According to Carlson et al., men's focus on health behaviours in general also encouraged them to engage in violence prevention. Other catalysts that they identified included tailored invitations highlighting men's strengths and potential, and approaching men as a critical and positive element to solve VAW, as well as messengers or 'ambassadors' reflecting the identities and concerns of the men they hope to involve. In a geographically diverse sample of 392 men, Casey et al. (2017) found that a social justice commitment represented the most often endorsed reason for men's involvement in VAW prevention. Other commonly reported reasons included exposure to the issue of violence through work, hearing a moving story about domestic or sexual violence, and disclosure of abuse from someone close to the participant. They summarise that to encourage men's anti-violence participation, men must feel welcome to work against VAW, to view VAW as an issue that is relevant to them, and to feel as though VAW is inextricably tied to gender inequity and male privilege.

Men's participation can be viewed as a pragmatic means of advancing gender equality and preventing VAW. However, even men active in anti-violence movements carry 'an invisible backpack' of privilege, a taken-for-granted set of unearned benefits and assets (McIntosh, 1989). Ruxton and van der Gaag (2013, p. 170) noted that men's socially condoned leadership roles can lead to encroachment into fields formerly led by women: '[i]f men join in the struggle, they will take over.' In their study on men's motivation to participate in preventing VAW, Casey et al. (2017) found that those same men who demonstrated the highest levels of gender equitable attitudes were also more likely to endorse protecting women and being their voice. Furthermore, when efforts to involve men in building gender equality simultaneously speaks



to men's 'pain', there is a risk of men asserting their interests at the expense of women, denying male privilege, and seeing themselves as victims (Flood, 2004).

Even when not 'taking over', men involved in VAW prevention may be granted a higher status, more power, and further recognition than women who do similar work (Macomber, 2012). That men rise more quickly to leadership positions echoes the 'glass escalator', an effect documented by, for instance, Williams (1995) in nursing and primary school teaching professions. Peretz (2018a), in turn, described a 'pedestal effect', representing the persistence of male privilege in feminist contexts, which manifests as gratuitous acclaim, heightened attention, unearned credibility, career mobility, and romantic attraction (see also Landsberg, 2000; Luxton, 1993). Researchers (see, for example Flood, 2004, p. 463; Hearn & McKie, 2008; Hearn et al., 2013; Sweetman, 2013) also raised concerns that efforts to engage men in VAW prevention may reduce funding for women's organizations and services. Casey et al. (2017) noted that men also draw upon their institutional privilege to attract funding rarely available to women.

To avoid reproducing male privilege, the strategy of involving men in VAW prevention should not diminish the legitimacy of women-only programmes and prompt 'a mistaken belief that all interventions should include men' (Flood, 2015, p. 161). Interventions to engage men in preventing VAW should develop from treating men simply as perpetrators or as the allies of women, consisting of approaches that seek to transform relations, social norms, and systems that sustain gender inequality and violence (Jewkes, Flood, & Lang, 2014). Such interventions should not draw upon ideas often associated with the concept of 'hegemonic masculinity' such as strength, warrior, or leader, or which use the classic male role models such as sports stars, possibly reinforcing the gender-inequitable masculine ideals that need to be changed in order to prevent VAW (Flood, 2015; Jewkes et al., 2014).

Flood (2015) further warns about the risks of 'Real men don't ...' campaigns, aimed at redefining masculinity as nonviolent, but which simultaneously obscure the link between masculinity and VAW by suggesting that men rape or hit women to demonstrate themselves as real men. He posits that men's VAW reproduces authority over women, implying that men, in general, benefit from this violence, and that men 'lose' from progress towards non-violence and gender equality. Thus, Flood suggests:

*Efforts to involve men in violence prevention must acknowledge the costs to men of undermining the patriarchal privileges that underpin men's violence against women. They should also acknowledge the potential costs of involvement in violence prevention itself, given that the men and boys who participate may be ridiculed or harassed for lack of conformity to hegemonic masculine norms.*

*(Flood, 2015, p. 167)*

Another concern with regards to men's pro-feminist and anti-violence activism has been raised by intersectional theorists, who call into question any claims about women and men as a unitary category (see, for example, Messner, Greenberg, & Peretz, 2015; Näre, 2010; Peretz, 2017, 2018b). They would, therefore, disagree with notions that all men carry a (similar) 'backpack' of privilege. Originating from the lives and analyses of women of colour, 'intersectionality is the idea that various social categories of differentiation, such as race, class, gender, and sexuality are co-constitutive, inseparable forces that work to shape human experience' (Peretz, 2017, p. 529; see also Näre, 2013). Despite the demonstrable utility of intersectionality, research on men's engagement in women's rights movements has largely focused on white, heterosexual, middle-class, young men. Thus, intersectionality has failed to attend to the structured differences in men's lives and to promote marginalised men's engagement in gender justice work (Peretz, 2017, 2018b).

In Peretz' (2017) view, the most crucial issue in understanding diverse men as feminist allies lies in how intersectionality and privilege meet. Thus, he calls for research that concentrates on the workings of intersectionality in social locations where people are both privileged and oppressed. Through his research on American male allies who benefit from gender but are marginalised because of their racial, religious, gendered, and sexual identities, Peretz (2017) demonstrates how men's intersecting identities shape men's likelihood of understanding and identifying with women's experiences of sexism and gender-based violence. He found, for instance, that Muslim men's pathways were often dependent upon input from women and were based on their parenting and other life experiences. Gay/queer men's pathways began earlier, did not rely on women's input, did not create a shift in a gendered worldview, and lacked a pathway narrative because they connected to gender justice through their own intersecting identities and experiences (Peretz, 2017). Silberschmidt's (2011) research on East African men who are marginalized by uneven global and local income distribution shows that lacking income-generating activities and economic capabilities to satisfy the needs of their wives and families frustrates men and renders them unlikely to promote gender equality. She suggests that to motivate such men to participate in the struggle for gender justice, men's roles-based identities—what a person does, as opposed to existential identities focused on what a person is—must be strengthened (Silberschmidt, 2011, p 104).

In *Section 3.5*, I discuss the intersectionality in the lives of my study participants, and discuss the socio-economic realities within which masculinities are negotiated in Somaliland. I now move from discussing violence to theoretical conceptions of men and masculinities.

### 3.4 APPROACHES TO MEN AND MASCULINITIES

In the 1970s, conceptualising masculinity and femininity as ‘sex roles’ highlighted the constructed nature of gender, as opposed to seeing gender as innate and inevitable (Berggren, 2014; Whitehead, 2002). The male sex role consisted of distancing oneself from femininity and from being emotional, striving for success through competition, being in control, and acting aggressively (David & Brannon, 1976). Critiques, however, considered the notion of the ‘sex role’ as insufficient in accounting for men’s power and women’s subordination (see, for example, Carrigan, Connell, & Lee, 1985; Connell, 1987, 1995; Hearn, 1987, 1992). Such critiques emphasised men’s structural position of power and strived to render visible men’s oppressive practices across different domains of social life drawing from theories of patriarchy and Gramsci’s (1971) theory of hegemony. In what follows, I briefly present the concept of ‘hegemonic masculinity’, and then proceed to discuss the poststructural and the materialist critiques. I then conclude by describing my own standpoint at the end of this section.

Carrigan, Connell, and Lee (1985) argued that dominant interpretations of being masculine are embedded in and sustained by social institutions, such as the state, education, and family. The concept of ‘hegemonic masculinity’ refers to ‘how particular groups of men inhabit positions of power and wealth and how they legitimate and reproduce the social relations that generate their dominance’ (Carrigan, Connell, & Lee, 1987, p. 179). In other words, hegemonic masculinity refers to ‘the configuration of gender practice which embodies the currently accepted answer to the problem of the legitimacy of patriarchy’ (Connell, 1995, p. 77). The concept of ‘hegemonic masculinity’ does not only take into account power hierarchies between genders, but also between men. At any given time, a particular formation of masculinity is culturally exalted and occupies the top of the ‘gender hierarchy’, imposing its ‘order of play’ on all other forms of masculinity and femininity (Carrigan et al., 1985). In *Masculinities*, Connell (1995) describes three non-hegemonic categories of masculinity: *subordinate* (for example, homosexual men), *complicit* (men who gain from hegemony and obtain a patriarchal dividend even if they do not represent a hegemonic position themselves), and *marginalised* (men who are disqualified due to their class or race/ethnic position).

Whilst highly influential, the theory of hegemonic masculinity has been criticised for, for example, not accounting for the contradictory and inconsistent positioning that occurs in talk and interaction (Wetherell & Edley, 1999); for the contradiction between stressing the openness of hegemonic struggles whilst presuming a fundamental unchanging structure of men’s power over women (Laclau & Mouffe, 2001); for reductionism in positing an intentionality (‘innate desire to dominate and oppress’) behind heterosexual men’s but not women’s and gay men’s practices (Whitehead, 2002); for leading to the classification of traits rather than focusing on processes (Pascoe,

2007); and for allowing little room for researchers to explain how masculinities that do not legitimate patriarchy can emerge and become normative, celebrated, and legitimate (Christensen & Jensen, 2014).

Whilst crediting the concept of hegemonic masculinity for achieving what patriarchy fails to achieve by offering a nuanced account of the processes and relations of femininity and masculinity, and of contested male practices, Whitehead (2002, pp. 90, 93–94) summarises many of the critiques stating that ‘the fundamental inconsistency in the term hegemonic masculinity is that, while it attempts to recognise difference and resistance, its primary underpinning is the notion of a fixed (male) structure.’ Connell and Messerschmidt (2005, pp. 832–833), however, found elements of optimism in the theory of hegemonic masculinity, whereby gender relations and hegemonic masculinities are historical. That is, they came into existence under specific circumstances, and are thus subject to change. In their view, a more humane, less oppressive means of being a man might become hegemonic.

According to Whitehead (2002, p. 84), research on men and masculinities that draws upon the Foucauldian poststructuralist understandings of power brings back the subject, focusing on ‘the discursive subject as a product of, and mitigating factor in, the exercise of power’ and on the ‘regulatory consequences of privileged knowledges’. He writes that discourse refers to both language and practice, and also ‘signals the means by which the subject is enabled and marked as an individual’ (Whitehead, 2002, p. 102). Drawing upon Foucault, he argues:

*Discourses are the means by which we come to ‘know ourselves’; perform our identity work; exercise power (in contrast to ‘holding power’); exercise resistance; pronounce or deny the validity of knowledges and ‘truths’; communicate with others and ‘our selves’ through the reflexive process; and subjectively engage with the world around us.*

*(Whitehead, 2002, pp. 103–104)*

In his attempt to connect a discursive model of power to masculinity, Whitehead (2002) introduces the concept of the *masculine subject*. In doing so, he sees men as ‘discursively informed masculine beings, a state of gender signification enabled, not least, by virtue of gender being the primary identification that holds them (and females) on entry into the social web’ (Whitehead, 2002, p. 111). In his view, the use of the concept ‘masculine subject’ allows one to explore the practices of gendered identity work without reducing men to a prediscursive, essential identity. Hence, it enables the exploration of masculinities as constantly moving configurations of practices, whilst also understanding ‘men’ as a more stable political category.

Whitehead (2002) suggests that the term *masculinism* best illustrates the gendered manifestation, where masculinity exists as a regulatory practice and dominant knowledge form. Brittan (1989, p. 4), who introduced the concept

of 'masculinism', defined it as the masculine ideology that 'justifies and naturalises male domination, as such it is the ideology of patriarchy'. Whitehead, however, calls for understanding masculinism as a *dominant discourse* rather than a dominant ideology. In discussing the dynamism of discourses, Whitehead (2002, p. 108, emphasis added), however, refers to a '*belief system* that exists through discourse' and which serves as 'an anchor from which the contingent subject holds on to particular reality.' He also notes that to understand masculinities as discursive is not to ignore the material actualities of gender inequality and the political dimensions of identity work:

*The individual cannot hold power, but (he) can exercise it through the utilisation of dominant discourses of masculinity. In so doing, the individual contributes, possibly unknowingly, to political categories of gender and to the power regimes that configure them.*

(Whitehead, 2002, pp. 109–110)

Whitehead argues that herein lies the distinction from juridico-discursive models of male power: Foucauldian inspired poststructuralist theorising allows the subject in as a subject to discursive power regimes and as an active player in the social enactment of gender. 'For men, the question is not whether they take up masculine discourses as practices of self-signification, but rather which masculine discourses to engage in' (Whitehead, 2002, p. 110).

One influential poststructuralist approach consists of discursive psychology, which examines how subject positions are constructed and negotiated through discourse (Wetherell & Edley, 2014). As such, discursive psychology recognises that people are both products and producers of discourse (Billig, 1991), and 'aims to examine not only how identities are produced on and for particular occasions but also how, in the form of established repertoires or ways of talking, history or culture both impinge upon and are transformed by those performances' (Wetherell & Edley, 2014, p. 355). Regarding masculinities, the discursive psychology approach draws upon West and Zimmerman (1987, 2009), and focuses on how masculinities are routinely 'done' or accomplished, or actively negotiated in relation to other forms of identity in specific cultural contexts.

In Wetherell and Edley's (1999, 2014) view, the concept of hegemonic masculinity does not explain how the forms Connell (1995) identified actually prescribe or regulate men's lives, and the exact content of the prescriptive social norms that form hegemonic masculinity. They found it difficult to describe their study participants as either 'complicit' or 'resistant'. Thus, Wetherell and Edley (1999) suggest that it is more useful to see complicity and resistance not in either/or terms, but 'as labels to describe the effects of discursive strategies mobilised in contexts as opposed to labels for types of individual men.' Thus, Connell's norms are in fact discursive practices, and identification represents 'a matter of the procedures in action through which men live/talk/do masculinity and [...] these procedures are intensely local

(situationally realised) and global (dependent on broader conditions of intelligibility)' (Wetherell & Edley, 1999, p. 353).

Moreover, Wetherell and Edley (1999) present three contrasting procedures, 'imaginary positions' men adopt to describe themselves in relation to the social position of being a man. In '*heroic* positions', men strongly align themselves with the conventional ideals of the masculine. In '*ordinary* positions', men separate themselves from conventional or ideal notions which become reconstructed as social stereotypes, instead emphasising the self as normal, moderate, or average. In '*rebellious* positions', men define themselves in terms of their unconventionality, flouting social expectations. Wetherell and Edley (1999, p. 350) argue that even the two latter 'imaginary positions' trade on the hegemonic values of autonomy and independence, celebrating 'the courage, strength, and determination of these men as men to engage in these potentially demeaning activities.'

Berggren (2014) argues that all of the major theoretical perspectives on masculinities feature drawbacks regarding subjectivity. He puts forth the possibility of '[having] it both ways and to avoid the false choice between discourse, norms, and power on one hand, and bodies, emotions, and lived experience on the other' (Berggren, 2014, p. 245). In doing so, he aims to bring poststructuralist feminist ideas to critical studies on men and masculinities putting forth gender as nonessential and performed, feminist phenomenological accounts of subjectivity, and the impact of sex and gender on experiences and understandings of the world. Berggren claims that a cultural attribution of masculinity applies to bodies read as 'men'. The masculinity discourse(s) shape, direct, and orient the bodies encountered as 'men', but they are not the only discourses positioning 'men'. A conflict can emerge, for instance, between the manhood discourse and an egalitarian discourse that refuses the positioning offered by the manhood discourse that often prescribes hierarchy between men and women. Instead of automatic incorporation of masculinity by men, there is a history of experiences of living with and acquiring masculinity, Berggren claims.

Whilst the poststructural critique of the theory of hegemonic masculinity focuses on the notion of a fixed (male) structure and the lack of a connection to men's lives, in Hearn's (1996b, p. 208) view, the anti-materialist assumptions from many versions of the concept of masculinity 'divert attention away from material practices, whether in work, sexuality, violence, or elsewhere, and away from a materialist or materially based analysis of gendered power relations.' Hearn, thus, argues for a movement from 'masculinities' back to 'men', 'men's' practices', 'men's social relations', and so on, which has been criticised for representing a modernist frame of reference and a fixed conception of gender (see *Section 3.1*). According to Hearn (2004, 2012), however, 'men' as a social category is embodied, instead of representing a slippery and merely theoretical concept. Thus, 'men' stands as a significant concept in the consideration of, for example, interpersonal violence against women.

Hearn (2004) posits that a basic question in the social analysis of men focuses on whether men's domination is understood as primarily related to the economic system and the formation of the nation-state, or to the gender system (patriarchy). Through the concept of hegemonic masculinity, the latter has been pursued, Hearn claims, and acknowledges the concept as identifying different forms of domination by men, both over women and over other men. However, instead of focusing on (hegemonic) masculinity, Hearn suggests that the *hegemony of men* in relation to women, children, and other men needs to be addressed more directly. As Hearn (2004, p. 61) notes, 'Hegemony is not so much, or at least not only, a matter of the social contestation and reproduction of particular forms of hegemonic masculinities as the contestation and reproduction of the hegemony of men in a particular society or combination of globalising societies [see Hearn, 1996a], both as a social category and in men's practices.' Aligned with the ideas of Puleo (1995), De Miguel (2015), and Kaplan et al. (2017) discussed above in *Section 3.2*, there is room for men's domination with and through force and men's domination without force (with consent) within patriarchies, Hearn (2004) writes:

*Men's domination with force can be formally organised (for example, with corporate violence, military violence) or individualised and interpersonal (for example, with men's violence to known women and children in the home). Men's domination without force can also be formally organised (for example, men's supposedly 'peaceful' domination of managerial positions) or individualised and interpersonal (for example, with men's social status as fathers, husbands).*

(Hearn, 2004, p. 65)

The place of consent represents the place in which the concept of hegemony can be employed: '[t]he notion of hegemony provides a way of talking about overarching ideologies at the level of everyday, taken-for-granted ideas and practice performed "with consent", "without coercion"' (Hearn, 2004, p. 53). The concept of hegemony can provide further assistance for engagement with both material and discursive gender power relations, Hearn (2004) notes. Summarising his efforts in developing a materialist–discursive analysis of men, Hearn (2014, p. 7, original emphasis) claims that materiality can be understood 'as both reproduction of the social relations of production, *and* the reproduction of society through ideas, ideology and discourse.' Hearn (2014, p. 6) borrows from feminist materialism's 'recognition of bodily materialism and sexuality as material (what people do rather than what people are or think)'. Furthermore, for Hearn, materialism includes (productive) labour/work, biological reproduction, housework, violence, sexuality, bodily generativity/degeneration, and culture/ideology/discourse. In terms of the simultaneity of materialism and discourse in the 'arena' of violence central to my study, Hearn (2014, p. 9) argues that violence is 'both a matter of

experience of change in bodily matter, and a matter of change in discursive constructions.’ Thus, violence is understood as historically, socially, and culturally constructed. Therefore, (men’s) talk about violence does not just represent norms, but creates reality, Hearn argues.

Coming to my own standpoint, I do not understand patriarchy or masculinity/masculinism as an ideology per se (unlike, for example, Brittan, 1989). Referring back to *Section 3.2*, I define a patriarchal gender regime as a system of interrelated social structures and practices which manifest and institutionalise men’s domination across all areas of social relations. This domination is upheld and legitimated by *patriarchal interpretations* of ideologies and belief systems such as religion, cultural traditions, or nationalism. Such patriarchal interpretations often emphasise a strict separation of sexes and their hierarchical order (see Hirdman, 1990). Hence, they shape and orient bodies encountered as ‘men’ or ‘women’ differently. However, whilst ideologies serve as ‘an anchor from which the contingent subject holds on to particular reality’ (Whitehead, 2002, p. 108), they are also continuously negotiated and alternative interpretations occur.

Masculinities, in this study, are understood as plural and multiple. That is, ‘they differ over space, time, and context, are rooted only in the cultural and social moment, and are, thus, inevitably entwined with other powerful and influential variables such as sexuality, class, age and ethnicity’ (Whitehead, 2002, p. 34). Masculinities are understood as both norms/ideals and practices—they are ‘both illusion and reality’ (Whitehead, 2002, p. 42). When specifically pointing to the masculine norms, I use the terms *prevailing masculinities* or *idealised manhood*. Regarding masculinities as practice, I follow Fairclough (1992, 1995, 2001), whose approach to discourse analysis I employ (see *Chapter 4*). He posits that social practice and linguistic practice inform one another, but are not identical. Hence, masculinities herein are not understood as merely discursive practice. Instead, masculinities<sup>32</sup> are understood as configurations of *materialist and discursive* practices used to enact and (re)negotiate the norms and ideals that orient bodies encountered as ‘men’. Drawing upon Hearn (2014), *materialist practices* are understood as (productive) labour/work, biological reproduction, housework, violence, sexuality, and bodily generativity/degeneration. The *discursive practices*, in turn, are discussed in greater detail in *Chapter 4*.

Accordingly, *hegemonic masculinities* (in the plural; several hegemonic masculinities with different informing ideologies and/or with different derived practices can exist simultaneously) are here understood as configurations of materialist and discursive practices, which draw from, legitimate, and reproduce the patriarchal interpretations of prevailing ideologies. It is worth noting here that the dominant masculinities are not

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<sup>32</sup>Respectively, femininities are understood as configurations of materialist and discursive practices used to enact and (re)negotiate the norms and ideals that orient bodies encountered as ‘women’. Furthermore, prevailing femininities or idealised womanhood is used to specifically point to such gendered norms.



necessarily hegemonic, as shown by, for example, Christensen and Jensen (2014) and Groes-Green (2011).

Whilst drawing from scholars who have been subjected to the poststructuralist critique, my definitions above honour the notion of masculinities in the plural and allow the subject in as a subject to materialist–discursive power regimes. The interpretations of ideologies and belief systems are not just ‘befalling’ upon actors, but are continuously negotiated—reproduced and challenged—through materialist and discursive practices. In the next section, I discuss the prevailing masculinities in Somaliland given my theoretical framework presented above.

### **3.5 PREVAILING MASCULINITIES IN SOMALILAND**

The shape of Somali culture is affected by the interaction between nomadic pastoral traditions and norms with Islamic teaching (APD, 2002). In what follows, therefore, I focus on studies regarding Muslim masculinities and notions of Somali gender norms. Since the local patterns of masculinity are shaped by globalisation, imperialism, colonialism, and international migration (Connell, 2005b), I conclude this section by briefly discussing the socio-economic realities within which masculinities are negotiated in Somaliland.

Ouzgane (2006, p. 1) argues that whilst numerous masculinities studies are emerging in the West, scholarly attention to gender issues in, for instance, the Middle East and North Africa continue to focus almost exclusively on understanding women—specifically related to Muslim women’s oppression, the question of the hijab, and FGM/C receiving most of the scrutiny. Ouzgane maintains that only a few studies render Muslim men visible as gendered subjects or show that masculinities are embedded in a history and form a part of gender relations in Muslim cultures. Gerami (2005) claims that the recognition of masculinity studies in the South are hampered by the marginal attention given to colonised masculinities as opposed to Western hegemonic masculinity (or the ethnic masculinities in Western societies). In her view, this is less a failure of Western gender studies than of the cultural context of the gender debate in the South. Furthermore, Gerami (2005, p. 450) forecasted that, in the Islamic societies grappling with the ‘crosscurrents of globalisation, cultural liberalisation, Islamic fundamentalism, and democracy’, the gender discourse will revolve around women’s rights and roles for the foreseeable future. Thus, she posits, the gender discourse in the West should consider colonised masculinities, in the hope that organic studies will emerge at some point.

According to DeSondy (2013, p. 3), ‘discussions on Muslim men are limited to the essentialised form of masculinity related to Islamic patriarchal society’, similar to understanding Muslim women as a single figure stereotypically related to Islamic oppression. He claims that many Muslim men cannot

identify themselves in the most codified image of Muslim manhood coalescing since the time of the Prophet Mohammed. Aligned with my own understanding of the role of different ideologies and belief systems in shaping, directing, and orienting bodies encountered as ‘men’, DeSondy argues that the Qur’an is only one source informing the construction of Muslim masculinities, which are also informed by other expressions fostered in various local and cultural contexts. Ouzgane (2006, p. 2) posits that masculinities in Islamic contexts ‘emerge as a set of distinctive practices defined by men’s positionings within a variety of religious and social structures.’

Arat and Hasan (2017, p. 11) claim that ‘[t]here seems to be a disconnect between the characteristics of a “good man” prescribed in the Qur’an and those of the “real man” that are displayed or aspired to by many.’ Drawing on these notions, I shed light on the construction of masculinities in Somaliland by first introducing Arat and Hasan’s findings. They argue that the texts in the Qur’an promote multiple masculinities because the Qur’an ultimately aimed to establish and spread monotheism, and beyond that, the message becomes conditional and complex: “[m]asculinity” in the Qur’an, therefore, is embedded within and constructed in relation to a series of institutions, resulting in fluid and multidimensional masculinities’ (Arat & Hasan, 2017, p. 11).

Arat and Hasan (2017) outline five overlapping yet contradictory salient character traits that may be taken as prescriptions of masculinities. *Submissiveness*, taken as the opposite of domination and defiance, is the most exalted trait of the believer, since Islam means surrendering or submitting to God (see, also, DeSondy, 2013, p. 5). Defiance is, however, valued at times: the Qur’an, for instance, approves prophets’ acts of defiance against communities in favour of monotheism. The most frequent expression in the Qur’an of the second trait, *altruism*, is the duty of a charitable act. One of the five pillars (basic acts) of Islam, *zakat*, requires all adult Muslims to annually give about 2.5% of their wealth to those in need. Altruism also involves compassion towards the vulnerable or those deserving protection.

The third trait identified by Arat and Hasan (2017), *righteousness*, is defined as morally correct behaviour and thinking, transecting all other desirable character traits and offering the most uniform characterisation of ideal masculine traits regardless of context or individual identity. The righteous husband tends to his wife’s needs with care and commitment, and the righteous parents guide their children towards good and virtuous lives preventing them from committing sin. Samuel (2011) notes that whilst the Qur’an aims to protect women and assert their rights, it explicitly outlines men’s authority over women. Commitment to the faith characterises the principle expression of the fourth trait identified by Arat and Hasan (2017), *steadfastness*, which also prescribes a man’s devotion to his wife and refraining from adulterous relationships and sinful desires. Some verses encourage believers to fight, although *combat*, the fifth trait, only legitimises

fighting when defending the faith against those ‘who disbelieve in the signs of Allah’ (Arat & Hasan, 2017).

Arat and Hasan (2017, p. 11) conclude that the diverse and contradictory prescriptions of Muslim masculinities converge in a resounding message: ‘men should use their judgement and act according to the situations. Each situation merits a unique combination of masculine ideals. These ideals do not establish hierarchal masculinities with one serving as the hegemonic one.’ Like many studies drawing upon the concept ‘hegemonic masculinity’, Arat and Hasan’s (2017) study can be criticised for providing only a classification of traits (see Pascoe, 2007). In addition, as they note themselves, Qur’anic prescriptions may not always depend on the believer’s gender. Hence, the question remains to what extent the salient character traits identified by Arat and Hasan specifically address men. The following quote, for example, implies that similar ideals apply to both men and women:

*For Muslim men and women and for believing men and women, for devout men and women, for true men and women, for men and women who are patient and constant, for men and women who humble themselves, for men and women who give in charity, for men and women who fast (and deny themselves), for men and women who guard their chastity, and for men and women who engage much in Allah's remembrance for them has Allah prepared Forgiveness and great reward.*

*(Qur'an 33:35, referred to and translated in APD, 2002, p. 11)*

However, I adopt Arat and Hasan’s (2017) notion that Qur’an promotes multiple Muslim masculinities. I also follow their notion that the application of the Qur’anic message is challenged by alternative discourses, material conditions, and structural factors guiding Muslim boys and men, as well as the women who raise them. Accordingly, I now turn to notions of Somali gender norms and ideals, which provide a set of alternative discourses orienting bodies encountered as ‘men’ in Somaliland.

Helander (1987, p. 6) wrote that Somali men are considered strong and hard, and as such bring all the ‘hard parts’ of the body to the baby, whereas women are considered soft and bring all of the ‘soft parts’. Accordingly, he argues, relations between the male members of a lineage are thought to be hard and matrilinear relations are thought to be soft. Kleist (2010) points out that the complementary gender ideals are not uniform, but hailed by some and contested by others in Somaliland. The introduction of Islam, colonisation, independence, and civil war all resulted in changes to gender relations, and ‘there is and was not one singular way of “doing” Somali masculinity or femininity’, Kleist (p. 190) argues.

In their analysis of Somali men’s masculinities and gender relations, El-Bushra and Gardner (2016) note that the core ideals of ‘Somali manhood’—responsibility, self-discipline, courage, humanity, and generosity—are widely

held amongst both older and younger generations, as well as by men and by women, educated and illiterate, urban and rural, across all regions and subcultures. These ideals are (partly) reflected in the concept of ‘*raganimo*’, the local notion of a ‘real man’. According to Hansen (2008), the ‘real man’ is characterised as being tough and brave, but also helpful and generous as well as oratorically skilled, capable of speaking eloquently and loudly. Echoing the tenets of the precarious manhood thesis, which implies that attaining and maintaining manhood requires a man to repeatedly prove himself (Vandello & Bosson, 2013), El-Bushra and Gardner (2016) refer to a Somali proverb which states that ‘*raganimo* is like your footprints which are wiped out by the rain.’

El-Bushra and Gardner (2016) highlight that young Somali men should be useful and reliable, contribute to society through their labour, and accept the authority of older men. Transitioning to adulthood is marked by marriage and fatherhood. A Somali man’s reputation, status, and power depend upon how well others judge that he fulfils his familial and clan obligations, being ‘ordained by God as responsible for the family, its leader, manager, and shield’—that is, the protection between the family and the outside world (El-Bushra & Gardner, 2016, p. 448). A boy is expected to learn his role from his father so that he can replace him, thereby ensuring the security and well-being of his mother and younger siblings, as well as the wider clan. In addition, the ideal husband nurtures a harmonious relationship with his wife, being ‘emotionally sensitive to his wife’s needs, caring, kind, and responsible’ (El-Bushra & Gardner, 2016, pp. 448–449). His fathering skills depend upon his capacity to educate his children on religion, ethics, and culture, and he should gain the loyalty of his children through kindness.

In *Table 2*, I summarise Arat and Hasan’s (2017) findings on the salient character traits conveyed in the Qur’an and the core ideals of ‘Somali manhood’ as described by El-Bushra and Gardner (2016) and Hansen (2008). I suggest that these idealised masculinities are largely compatible.

**Table 2.** *Prevailing masculinities in Somaliland.*

<b>Salient character traits in the Qur’an</b> (Arat & Hasan, 2018)	<b>Core ideals of Somali manhood</b> (El-Bushra & Gardner, 2016; Hansen, 2008)
Righteousness	Responsibility
Steadfastness	Self-discipline
Altruism	Humanity, generosity, helpfulness
Combativeness	Courage, toughness, bravery
Submissiveness to God	Submissiveness to (male) elders

Examining the nexus of FGM/C and idealised masculinities in Somaliland, I argue that men’s support for the perpetuation of FGM/C can be viewed as an enactment of religiously and/or culturally idealised masculinities. In Somaliland, as discussed in *Section 2.3*, FGM/C is often framed as a ‘religious tradition’. In particular, this applies to sunnah cutting, which is widely understood as mandated by Islam. Accordingly, supporting sunnah cutting aligns with the submissiveness norm—surrendering or submitting to God—

and the righteousness norm—morally correct behaviour and thinking (see Arat and Hasan, 2017). Furthermore, those supporting FGM/C—including pharaonic cutting—assume that it serves as an effective means of safeguarding girls against premarital sex, rape, stigma, and ostracism. Given that Somali men's fathering skills are judged based on their capacity to educate their children on religion and ethics, and on their capacity to guarantee the safety of their family, I argue that men's support for FGM/C aligns with the masculine responsibility norm (see El-Bushra and Gardner, 2016).

In terms of the gender order, I suggest that both Islam and Somali culture provide patriarchal interpretations that emphasise men's superiority. The idealised 'Somali manhood' (El-Bushra & Gardner, 2016), for instance, reflects Young's (2003) concept of masculinist protection—the heavy responsibility of the masculinist leader as the head of the family and society. According to Young, the masculinist leader must protect others and take risks. He is not evil and does not subordinate women for his own pleasure. Instead, the well-intentioned patriarch sacrifices himself to protect weaker individuals (such as women and children) from 'other' men, often represented as selfish, aggressive, and malicious (Young, 2003). The 'price' women pay for this 'protection' the idealised form of masculinity offers them is their minor legal status, dependency upon men, a limited agency, and no publicly visible participation in decision-making outside the home (El-Bushra & Gardner, 2016).

The core ideals of 'Somali manhood', however, remain largely unachievable in the current economic and political climate characterising southern Somalia, Puntland, and Somaliland (El-Bushra & Gardner, 2016). The collapse of the state and, hence, employment have wiped out individuals' status, as well as the self-respect, security, and income of many men. This collapse, El-Bushra and Gardner argue, has been experienced as an existential catastrophe for many men, who view themselves as dispensable with no meaningful role and no stake in the future. Numerous fathers and husbands are absent or present but idle, depend on their wives and children, contribute little or nothing to the household income, and neglect their children (El-Bushra & Gardner, 2016). Luedke (2018, p. 20) described how 'efforts to preserve the remaining elements of some idealized past version of Somali masculinity' leads many men to chew *khat* (a mild amphetamine) and sit idly rather than maintain their family by taking advantage of economic opportunities in the informal sector. She argues that because of the fear of stigma men 'continue to see themselves as part and parcel of a divine and "all-encompassing responsibility" but are reluctant to compromise when it comes to taking jobs that exist at the margins of society' (Luedke, 2018, p. 20).

El-Bushra and Gardner (2016) argue that such tensions contribute to stress and vulnerabilities within families. The capacity of many fathers to serve as the gatekeeper to their son's relationship with the clan, to serve as the role model and as the source of cultural knowledge has been affected. The impossibility of men to fulfil their responsibilities may open up spaces for a

renegotiation in gender relations, roles, and expectations. El-Bushra and Gardner see signs of these renegotiations, although limited merely to the younger age groups. Considering that many elderly men do not want their sons to marry an uncut woman, because they think that FGM/C is a religious obligation and/or part of the Somali culture (NAFIS, 2014), the weakening influence of fathers as a source of cultural knowledge may contribute to the eradication of the practice if more young men ignore the pressure to marry cut women and to expose their daughters to FGM/C.

Yet, as I discussed in *Section 3.3* in relation to men's anti-violence activism and intersectionality, lacking income-generating opportunities and the economic capabilities necessary to satisfy the needs of their families—and, hence, to enact the idealised manhood—often frustrates men and renders them unlikely to promote gender equality (Silberschmidt, 2011). In Somaliland, the youth unemployment rate reaches 84% (Luedke, 2018). Young men are not only marginalised by uneven global and local income distribution, but also because of their age. One of the core ideals of Somali masculinity implies submissiveness to older men, whose authority young men are expected to accept. Attitudes towards youth—that they are immature and volatile, and that they lack leadership skills and knowledge—represent major barriers to youth involvement in, for instance, decision-making (SONYO, 2016, p. 8).

In the next chapter, I present my methodology, including poststructuralist discourse analysis, which I employ to explore the interpretations of Islam and Somali culture/tradition, which my study participants (re)produce.

## 4. RESEARCH METHODS AND DATA

In this chapter, I describe the methods I applied to my data collection and analysis. I first present the discourse analytical approach in general, and Fairclough's (1992, 1995, 2001) critical discourse analytical approach in particular. I then proceed to document each step from gaining access to the field, identifying study participants, conducting interviews, transcribing the interview responses, organising and analysing the data, through to identifying the discourses.

Similar to the feminist approach, the critical studies on men and masculinities (CSMM) framework my study draws upon emphasises self-reflection and power relations, recognises the localisation of both the topic and the researcher, and serves to enhance women's and men's emancipation and gender equality (Jokinen, 2010). Thus, I conclude this chapter by discussing my position as well as that of the research participants, and the context in which the discourses were produced and interpreted. I also discuss the risks my research poses to the research participants and the Somali community in general.

### 4.1 CRITICAL DISCOURSE ANALYSIS

Discourse analysis does not necessitate employing separate techniques to employ, but rather is based upon a profound theoretical premise of social reality constructed through language, which, in turn is a product of the social reality (see Potter & Wetherell, 1998). As I wrote in *Chapter 3*, drawing on Walby (1990), poststructuralist discourse analysis provides a tool to overcome essentialism and ahistoricism when scrutinising systems, in my case a patriarchal gender regime. Borrowing from Derrida (1976), a deconstructionist emphasis to patriarchal gender regimes aims to break down a unified notion of 'women', and explores how the category of women is constructed. The discourse tradition, based on the work of Foucault (1981, 1987), examines the implications of such dialogues on gender inequality, and analyses how patriarchal discourses are created and maintained. Thus, Walby (1990, pp. 100, 104) claims, the discourse tradition shares similarities with radical feminist theorists and the *dominant ideology thesis* that views the ideological constructs of patriarchy as critical to women's subordination. She refers, for instance, to Daly (1978), who claims that patriarchal beliefs and practices stand at the core of all world religions, including the contemporary Western equivalent of medical science. They all include 'practices of sado-rituals against women which are authoritatively justified within that system of thought as good for the woman, so that she might marry, be healthy or pure' (Walby, 1990, p. 101, referring to Daly, 1978).

Critical discourse analysis (CDA) is an approach to the study of discourse, which highlights issues of power asymmetries, manipulation, exploitation, and structural inequities in different domains (Blommaert & Buecan, 2000). Scholars who exemplify the CDA approach (for example, Fairclough, 1992, 1995, 2001; Gee, 1999; van Dijk, 1993; Wodak & Meyer, 2001) view language as a form of social practice and posit that (non-linguistic) social practices and linguistic practices constitute one another. Thus, CDA approaches social inequality by focusing on the role of discourse in the (re)production of and challenges to dominance (van Dijk, 1993). Language connects with the social context as the primary domain of ideology, and as a site of and a stake in struggles for power (Fairclough, 1995). Accordingly, social changes do not simply involve language, but are significantly constituted by changes in language practices (Fairclough, 1992).

My methodological framework is inspired by Fairclough's (1992, 1995, 2001) CDA approach, which emphasises the interrelation between discourse and social change. Fairclough (1992, p. 36) builds upon whilst simultaneously criticising linguistically oriented discourse analysis and the social theory approach to discourse analysis. In his view, these approaches do not deal satisfactorily with how discourse contributes to the reproduction and the transformation of societies. For Fairclough (1992, p. 3), 'discourses do not just reflect or represent social entities and relations, they construct or "constitute" them; different discourses constitute key entities in different ways, and position people in different ways as social subjects'. He distinguishes between three constructive effects of discourse, in light of which I explore the discourses I identify in my data. First, discourse contributes to 'social identities' and 'subject positions' ('*identity*' function); second, it constructs social relationships between people ('*relational*' function); and, third, it contributes to the construction of systems of knowledge and belief ('*ideational*' function) (Fairclough, 1992, p. 64).

Fairclough's (1992, p. 3) focus lies on the social effects of discourse, as well as on historical change, that is, 'how different discourses combine under particular social conditions to produce a new, complex discourse'. This focus makes his approach well-suited for my study, which explores the discursive practices of young, urban, educated men who occupy the intersection of different ideologies, knowledge, and belief systems (such as religion, tradition, and science). For Fairclough, discourse represents a mode of action and a mode of representation, with a dialectical relationship between discourse and social structure:

*Discourse contributes to the constitution of all those dimensions of social structure which directly or indirectly shape and constrain it: its own norms and conventions, as well as the relations, identities, and institutions which lie behind them.*

(Fairclough, 1992, p. 64)



Fairclough (1992) developed a three-dimensional framework for studying discourse, aiming to map the micro-, meso-, and macro-level analysis onto one another. First, Fairclough (1992, p. 75) sees any discursive ‘event’ as a piece of text, a written or spoken ‘product’ of text production. This *text dimension* attends to a close linguistic analysis of text, which pays attention to vocabulary, grammar, cohesion, and text structure. Since those interviewed in this study did not use their native language during the interviews (and some required translation assistance), a fine-grained analysis of these elements does not lie at the centre of my analysis. Second, Fairclough (1992, p. 75) sees any discursive ‘event’ as an instance of *discursive practice*. This dimension specifies the nature of the processes of text production, distribution, and consumption, and directs attention towards the force of utterance (for example, promises, requests, threats, etc.), the coherence of texts, and the intertextuality of texts. The ‘core’ of this discursive practice dimension lies in exploring how text production and interpretation is constrained by members’ resources (internalised social structures, norms, and conventions), and by the specific nature of the social practice of which they are a part (Fairclough, 1992, p. 80). The latter constraint determines from which elements members’ resources are drawn and how. In *Section 4.4* below, I discuss the specific nature of the social practice in which the discourses I identified were produced. The discursive practice dimension is relevant for the analysis I present in Chapters 5 and 6.

In my analysis in Chapters 5 and 6, I focus on the internalised social structures, norms, and conventions that constrain the actors (*discursive practice dimension*), as well as on Fairclough’s (1992, pp. 3–4) third dimension, the *social practice dimension*, implying that any discursive ‘event’ represents an instance of social practice. This dimension attends to the institutional and organisational circumstances of the discursive event, and to the constructive/constitutive effects of discourse. Fairclough focuses on the concepts of ideology and hegemony, suggesting that all types of discourse are to varying extent open to ideological investment. He thereby takes a dialectical position: ‘subjects are ideologically positioned, but they are also capable of acting creatively to make their own connections between the diverse practices and ideologies to which they are exposed’ (Fairclough, 1992, p. 91). I find this dialectical position quite plausible, since it opens up to social change, whilst recognising the ideological constructs as critical to social inequality. Furthermore, Fairclough’s emphasis on the constraints of the discursive ‘event’ is relevant for my study, given the complicated positions of myself and the study participants, discussed in greater detail in *Section 4.4*. In keeping with Fairclough (1992, pp. 3–4), I use the term ‘discourse’ (without an article) to refer to language use in the above-mentioned three-dimensional way, and ‘a discourse’ (with an article) for a particular class of discourse types or conventions.

My analysis is also inspired by Lazar’s (2007) feminist perspective on CDA, which maintains that many social practices, far from being neutral, are

gendered, as well as embedded and hidden in everyday routines and interactions. According to Lazar (p. 150), the interest in feminist CDA lies in 'how gender ideology and gendered relations of power get (re)produced, negotiated, and contested in representations of social practices, in social relationships between people, and in people's social and personal identities in texts and talk.' As such, feminist CDA highlights the complex and subtle ways in which taken-for-granted gendered assumptions and hegemonic power relations are discursively produced and sustained as commonsensical and natural, as well as challenged, Lazar (p. 147) writes.

## **4.2 ACCESS TO THE FIELD AND THE RECRUITMENT OF PARTICIPANTS**

In 2014, I opened discussion with an international non-governmental organisation (NGO) that supported various local civil society organisations (CSOs) in Somaliland in, for instance, their efforts to prevent FGM/C. Initially, I also aimed to interview members of the Somali diaspora in Finland. In 2015, I thus had two consultative interviews with experts from a Finnish NGO that works towards preventing FGM/C amongst people living in Finland originating from regions where girls are traditionally cut. The purpose of those consultative interviews was to gather information regarding Somali men's anti-FGM/C activism in Finland, and to understand how to gain access to the field in Finland. In May 2015 and May 2016, I contacted 13 organisations who work with Somalis in Finland. Only a few replied, most of which informed me that they do not address FGM/C. A common viewpoint these organisations held was that members of the Somali diaspora have been overwhelmed by the numerous studies conducted amongst and on them in recent years. I was also told that without existing connections to the Somali community in Finland, I would not be easily trusted on a sensitive issue like FGM/C. In spring 2016, I tried to recruit a research assistant from amongst the Finnish Somali community in order to carry out interviews. But that was unsuccessful, and I had to abandon the idea of interviewing Somalis in Finland.

Simultaneously, arrangements with the international NGO operating in Somaliland moved forward. A fieldwork visit to Somalia was organised to take place in September through October 2016. In Somaliland, community support for research must be obtained by sharing the overall objectives with community leaders. The local CSO informed the Ministry of Social and Labour Affairs of my research in August 2016. At the Ministry's request, I submitted a letter of request (see Appendix 1) together with a letter of invitation from the international NGO (Appendix 2) and a detailed work plan (Appendix 3). In August 2016, I drafted a memorandum of understanding with the international NGO, defining our respective mutual roles and responsibilities (Appendix 4). The international NGO then helped to arrange a visa so that I could enter Somaliland.

My personal safety in the field was taken into consideration during preparations, and I regularly followed travel bulletins issued by the Finnish Ministry of Foreign Affairs (MFA). Whilst Somaliland remained relatively stable despite continual violence affecting southern Somalia, MFA did not recommend that Finnish citizens travel to Somalia (including Somaliland) in 2015 and 2016 when I was preparing my fieldwork. In spring 2016, a few months before travelling to Somaliland, the MFA bulletin was updated stating that 'all travel to Somalia (including Somaliland) should be avoided'. I consulted MFA and representatives of international NGOs working in Somaliland about the situation. Their recommendation was that I could follow my travel plan if I strictly adhered to safety protocols and stayed in the capital city of Hargeisa. A mere three days before my scheduled departure, the University of Helsinki sent me a letter, where I was advised against travelling to Hargeisa, referring to the MFA bulletin. At that time, however, I did not consider cancelling my fieldwork trip. Thankfully, during the weeks I was in Hargeisa, I experienced no security-related issues. In keeping with the MFA guidelines, I submitted a notification of travel to MFA for use in case of an emergency. I secured special travel insurance and booked accommodation in a hotel known for its security arrangements. Once in Hargeisa, I only left the hotel area with a driver and trusted local companion. Furthermore, I followed the local dress code (covering my hair with a scarf and wearing a long dress) so as not to draw attention.

In order to identify potential key informants, schedule interviews, enhance interviewee confidence, and secure assistance with translations, I required local research assistance. A colleague at the University of Helsinki who had conducted research in Somaliland connected me to an assistant and a driver with whom she had cooperated. They were willing to assist me, and I hired them in spring 2016. The research assistant was a 29-year-old man, who had studied pharmacy in Sudan. He completed his secondary education partially in English and was, thus, fluent in English. We maintained contact via email and social media, and sorted all of the practicalities well before my trip. However, four days before my departure to Somaliland, the research assistant informed me that his employer was sending him to a duty station remote from Hargeisa. He, thus, quickly recruited his colleague to assist me during the interviews. This new research assistant had a Bachelor's degree in Economics from the University of Hargeisa, and he, too, was fluent in English.

The student interviewees volunteered in an anti-FGM/C project supported by the international NGO, and implemented by the local CSO. That project, which began in 2015 and was completed by the end of 2017, aimed at raising awareness of the negative health and social consequences of FGM/C. The project activities included establishing groups of parents, youth, and religious leaders in rural villages, and mobilising journalists and university students to advocate against FGM/C. Student participants were nominated by the respective university management in accordance with the criteria set by the local CSO. Those criteria consisted of interest in the subject matter;

preliminary awareness of the negative health consequences of FGM/C; willingness to volunteer for anti-FGM/C campaigns; capability to influence through social/print/broadcast/digital media, blogs, newsletters, and any other means; capability to confidently debate and talk about FGM/C in public; and knowledge of Qur'anic verses and the Hadiths (testimonies about the sayings and doings of the Prophet Mohammed) regarding FGM/C. Senior students were given priority, and selection aimed at a balance between both men and women from different faculties.

Between January and September 2016, a total of 30 students (15 men and 15 women from different faculties) participated in training sessions covering the history, health and social effects of FGM/C, as well as human rights perspectives. Following the training, students were expected to write and share Facebook updates, raise awareness amongst their family members and in their neighbourhoods, and participate in anti-FGM/C activities in project villages. In September 2016, the research assistant contacted 20 of these students via phone and invited them to a meeting on the premises of the local CSO, during which he introduced my research project. All of the invited students agreed to an interview, and the research assistant scheduled interviews with 15 men and 5 women. Interviewees received a reminder of the interview a day before it was scheduled. All except for two women arrived as agreed. The two women had confirmed the same morning that they were coming, but could not be reached via phone at the time of the agreed upon interview, nor at a later time during my fieldwork visit. One extra interview was arranged, such that a total of four interviews with women were completed.

Based on the data in the background information forms interviewees completed (Appendix 5), the average age of participants was 23 years old (range, 21 to 27 years). None of the interviewees was married or had children. Nine were born in Hargeisa, seven in other urban areas, and three in rural areas. Only one participant had lived abroad for a brief period of time during childhood. In total, 13 participants reported that some of their female family members were cut, three that all of their female family members were cut, and two that none of their female family members were cut. One participant did not know or chose not to answer. *Table 3* summarises the socio-economic background of the student interviewees.

**Table 3.** *Socio-economic background of student interviewees.*

	Year of birth	Place of birth		Have family members undergone FGM/C?			
		urban	rural	all	some	none	N/A
<b>Men (15)</b>	1989–1995	12	3	3	10	1	1
<b>Women (4)</b>	1991–1995	4	0	0	3	1	0

We should note that at the time of the interviews the students had just finished their training. Since only a few had prior experience on advocating against

FGM/C, their accounts mostly addressed expectations rather than experiences of preventing FGM/C.

### **4.3 DATA COLLECTION AND ANALYSIS**

Before travelling to Somaliland, I familiarised myself with the context by reading as much as possible about Somaliland, and by following a few English-language social media accounts that provided updated news on Somaliland. In addition, I scheduled a Skype conversation with an employee of the international NGO stationed in Somaliland. I also had two meetings with a researcher from the University of Helsinki with extensive experience in Somaliland.

During my first two days in Hargeisa, I met with the research assistants (the original assistant and his replacement) and with an employee of the international NGO to discuss schedules, interview strategies, and other practicalities. On the third working day, I conducted pre-planned interviews with employees from two local CSOs engaging men in anti-FGM/C activities. These background interviews were intended to elicit updated information on FGM/C and efforts to prevent it in Somaliland. During one of the interviews with the CSOs, I met an employee from a third CSO involved in FGM/C prevention, and spontaneously agreed to interview them as well. I was also invited to attend an FGM/C coordination meeting organised by the Ministry of Labour and Social Affairs. During that meeting, I agreed to interview employees from two more local CSOs.

The five interviews with CSO employees relied on a semi-structured interview guide (Appendix 6), which included open-ended questions designed to elicit information about the prevention efforts they use, the challenges they face, the role of gender in recruiting participants, the experiences of engaging boys and men, and the relationship between FGM/C and gender equality and/or women's rights. I conducted these interviews at their respective offices in English without translation assistance. During two of the interviews, two employees were interviewed simultaneously, whilst during three interviews, one employee was interviewed. In total, I interviewed four men and three women from five local CSOs. The interviews lasted on average for one hour, ranging from 35 to 90 minutes. I voice-recorded all interviews and took additional notes during the interviews. I also asked for reports, booklets, and materials in order to gain a better understanding of how FGM/C is currently perceived in Somaliland.

Interviews with students were carried out at the hotel where I was staying, in small garden huts that served as meeting rooms. Since the students were busy with their courses during the day, the interviews were conducted between 4 p.m. and 8 p.m. (two each evening). I paid for the interviewees' ride to the hotel. The first student to arrive and the last to leave were often accompanied by the research assistant, who shared a ride with those interviewed. The

assistant reported that, in the car, some interviewees called one another, and discussed the topics and questions raised during the interview, potentially diminishing the spontaneity of responses and possibly reducing any hesitations during the interviews. Privacy and soundproofing during the interviews proved adequate, and the interviews mostly continued without interruptions except when servers occasionally brought in refreshments that I offered to the interviewees. We stopped the interview for approximately 20 to 30 minutes on a few occasions when the interviewee and the research assistant participated in evening prayers on the hotel premises.

At the beginning of the interviews, I introduced myself and my assistant. I read aloud the English consent letter (Appendix 7) and my assistant read aloud the Somali consent letter (Appendix 8) for those who needed translation. I then asked for oral consent, because I was advised by the local CSO that, in the Somaliland context, asking for written consent often limits the willingness of the participants to share information. Subsequently, however, I think it would have been more systematic to ask for written consent. In reading the consent letter, I emphasised that participation in the interview was voluntary and that the interviewee had the right to withdraw from the interview at any time or to skip any questions. I shared my contact information and asked for permission to contact the interviewee in case I needed to check on anything later. I then clarified the focus of the research as well as the terminology used during the interview. I emphasised that by 'FGC' or 'FGM' I referred to both pharaonic and sunnah cutting; and by 'uncut' to women who had not undergone any type of cutting. Yet, respondents often used the term 'FGM' to refer to pharaonic cutting only. Accordingly, some informants used 'uncut' or 'untouched' to refer to women who underwent sunnah cutting. In many cases, I could not clarify which type of cutting respondents referred to unless this was individually specified.

Because I did not expect to gather exceptionally rich accounts given the sensitivity of the topic, I used a semi-structured interview scheme (Appendix 9) with the students, containing open-ended questions. Before the interviews, I discussed the order and wording of the questions with the international NGO employee and with my research assistants. I made minor adjustments to the wording and the order of the questions several times during the data collection, removed and added some questions. Since I was interviewing people who volunteered to publicly speak against FGM/C, I included quite straightforward and direct questions about their attitudes and priorities. I began the interview with a 'warm-up' topic (practical questions about their anti-FGM/C training) and proceeded to topics that specifically addressed FGM/C practices, FGM/C prevention strategies, gendered roles and ideals, and gender equality. I did not follow the scheme in a strictly disciplined manner. The order of topics remained the same, although the order of specific questions depended on the flow of the discussion.

In general, respondents engaged in the interview discussion and provided nuanced accounts, often giving rise to improvised additional questions. Some

students provided quite short and concise replies, and then through specific probing questions I enticed them to expand upon their accounts. Only a few students had a tight schedule, such that I could not raise so many additional questions. The richness of the accounts clearly correlated with their English-language skills. I encouraged interviewees to rely upon the research assistant for translation assistance if they did not fully understand the question or could not fully express themselves in English. In my view, translation would have been useful during several interviews, but most of the interviewees did not ask for assistance. Even if the interviewee did not ask for translation him/herself, I sometimes asked the assistant to translate and elaborate upon my questions if it seemed appropriate or helpful. During most interviews, translation was used for individual words or sentences. In five interviews during which most or all questions and replies were translated, the interviewees seemed capable of following and, thus, controlling the translations of their accounts. Since I do not have skills in Somali language, however, I could not similarly control how my questions and the respective replies translated. Ultimately, the translations excluded some more nuanced information.

The student interviews lasted on average one hour, ranging from 30 to 75 minutes. Taken together with the background interviews with the 7 CSO employees, the final data consists of 24 interviews with 26 individuals (19 students and 7 CSO employees), comprising 1394 minutes (nearly 24 hours) of speech transcribed into text. During the interviews, I also took notes regarding my reactions and thoughts, the interviewees' reactions, surprising or recurrent views expressed, and emerging ideas amongst other issues. In addition, descriptions of and reflections about the informal conversations with research assistants or random people at the hotel were recorded in the field notes. As described above, practical issues, such as access to the field, financial limitations, the timeframe, and security limited the data collection period and opportunities. The data and my contextual understanding would have been more extensive if I had had an opportunity to stay in Somaliland longer, and if the security situation allowed me to move around more freely.

The research assistants (one of whom participated in all interviews) undertook transcription of the student interviews verbatim from the digital voice-recordings, whilst I transcribed the CSO interviews. Since this research focuses not on the fine detail of the discursive and rhetorical work, only some implied meanings as well as interruptions, laughter, or other explicit emotions were marked in the transcripts. Due to the deficient English skills of some interviewees, most accounts, even those understandable in terms of content, contained grammatical and lexical errors that the assistants transcribed verbatim. When entering the data into the ATLAS.ti software, I left those 'authentic' errors in the transcripts. I listened through the original recordings to spot-check the transcripts for accuracy. To improve the readability of the transcripts, I corrected any major grammatical or lexical errors in the quotes I present in *Chapters 5 and 6* below.

Before employing a discourse analytical approach, I approached the data using a *thematic content analysis* to familiarise myself with the data, and to complete as nuanced analysis as possible. In this initial phase, I aimed to identify all of the relevant issues, ideas, concepts, and perspectives that emerged in the data. After familiarising myself with the transcribed data once printed, I imported the data into ATLAS.ti, the qualitative analysis tool I used in the thematic content analysis. I carried out a preliminary analysis of all 24 transcripts and categorised the data into coded segments based on my preliminary understanding, theoretical framework, and research questions, as well as looking at issues and patterns that emerged from the data. I organised these *initial codes* into code families, merging or splitting them into subcodes where necessary. For example, I divided the code 'Motive' into the subcodes 'Motive/altruistic', 'Motive/professional', and 'Motive/selfish'. Next, I printed out the transcripts and employed an inductive approach. I aimed to open-mindedly identify key issues and patterns that emerged, without trying to fit the data into any pre-existing frames or codes. After identifying and reviewing meaningful issues and patterns, I systematically compared them with the initial codes, and adjusted and reorganised the initial codes accordingly. The data in ATLAS.ti was then categorised into segments according to the *final codes* and subcodes listed in Appendix 10. Appendix 11 summarises the correspondence between the initial codes and the final codes and related issues.

I then turned to the discourse-analytical approach, which is not simply a method of analysis, but simultaneously serves as the theoretical and methodological framework of my research. As described above in *Section 4.1*, my methodological framework relies on the work of Fairclough's (1992, 1995, 2001) critical discourse analysis (CDA) which emphasises the interrelation between discourse and social change. I also drawn on Lazar's (2007) feminist CDA which aims to understand the complex workings of power and ideology in discourse by sustaining gendered social arrangements. With a relatively large dataset, I identified the most significant 'traces' in the data. Informed by Fairclough (1992, p. 135), however, I avoided making too coherent interpretations when making connections across elements of the data. Whilst I focused the analysis on the male students' interviews, I systematically cross-checked the female students' interviews to identify deviances and similarities.

To first examine how violence against women is (re)negotiated and (de)legitimated, I analysed how the meanings and consequences of different FGM/C practices, as well as the subject positions in perpetuating and preventing the practice are negotiated in the data. Second, I examined how masculinities and gender order are negotiated. I investigated notions of men's and women's 'natural' characteristics and roles, notions of gendered rights and responsibilities, as well as understandings of gender equality in Somaliland and the concept of 'gender equality' itself. Throughout the analysis, I paid attention to the assumptions made, causalities suggested, as well as to the systems of knowledge and belief from which participants drew. I paid special



attention to the taken-for-granted ideas and justifications granted to, for instance, the current state of gender (in)equality, as well as to the identification of the ‘root causes’ of some harmful practices. I also explored whose stance was taken and whose was forgotten, and whose interests were promoted or ignored.

#### **4.4 RESEARCH ETHICS AND RESEARCHER POSITIONING**

Because my study focuses on a particularly sensitive topic, I have carefully considered ethical issues at all phases—from research design to analysis and reporting. The ethical questions in this study relate to the aim and theoretical framework of the research at both the ideological and political level, and to the research methods at a more practical level. In terms of my underlying aim to contribute to preventing FGM/C, I discussed the justification and problems associated with applying a (Western) liberal feminist agenda and human rights approach to the global South in general, and to FGM/C in particular in *Section 2.1*. In terms of my focus on the engagement of men in preventing FGM/C, men’s anti-violence activism and feminist concerns about reproducing male privilege were discussed in *Section 3.3*. In this section, I first discuss the safety and anonymity of my research participants and the potential consequences of the study for the Somali community at large. I, then, discuss dilemmas in applying theories developed in the global North to the contexts of the global South, as well as my researcher position, and its implications on data collection, interpretation, and analysis.

In terms of safeguarding the anonymity of the research participants, I only collected personal data that I considered relevant and that the participants voluntarily shared through an anonymous form they were asked to complete after the interview (Appendix 5). I use pseudonyms to refer to all interviewees and anonymise the NGOs and the CSOs attached to the project. Distinctions in the background information solicited were minor and, thus, are not reported in the text except with regards to gender. I did not ask students about their field of study, although that emerged during many interviews. The field of study seemed to correlate to some extent with certain values and meanings students expressed. Since there were only a few students from each field, reporting the field would jeopardise the anonymity of these informants and, thus, I do not report it. The university management members, as well as the employees of the local CSO who implemented the project, however, know who the interviewees are collectively.

Both research assistants and the driver signed a declaration of confidentiality (Appendix 12), in which they agreed that all information would remain confidential and would not be shared with anyone except me. After finalising this thesis, I destroyed the voice recordings in which the speakers were identifiable. In the transcripts, no identifiers appear, and all transcripts

are stored electronically on a password-protected flash drive. The anonymity of the interviewees is, thus, carefully guarded, and these precautions follow the ethical instructions outlined by the National Advisory Board on Research Ethics (TENK, 2009) and the University of Helsinki. The only document (interview schedule) with any names or email addresses is stored as a hard copy for any future communication with the interviewees and is intended for my use alone.

I must note that all of the interviewees were engaged in publicly advocating against FGM/C, either as volunteers or as paid employees, prior to participating in my research. Participants were, therefore, not exposed to any significant additional 'risk' by participating in this study. However, being seen with a Western woman, ultimately known to be discussing FGM/C, might not be advantageous for the interviewees and/or their anti-FGM/C efforts, since such activities are sometimes regarded as foreign intrusions into the local culture. The interviews with students were thus carried out at the hotel where I stayed, in garden huts with adequate privacy and soundproofing. Some hotel staff, of course, understood what was taking place. It seemed, however, that the topic was not as sensitive as I had anticipated. For instance, many hotel employees and guests, as well as locals who visited the hotel, asked about the purpose of my stay, and were encouraging when I explained my research. People spontaneously shared their views on why the practice perpetuates as well as the best prevention strategies. When I visited Hargeisa in October 2018, I invited the student participants to discuss my initial results. Seven men and one woman promised to attend, but in the end only five men attended the meeting. I presented the main elements of the four discourses. The participants to whom I presented my findings expressed no objections, and their reflections did not result in changes to the analysis.

Publishing results can carry harmful consequences for not only direct research participants, but also for the wider community they represent, particularly when results are presented as judgmental, in a prejudiced way or disrespectfully, painting a negative picture not based on comprehensive data or a systematic analysis. Keskinen (2017) argues that 'culture' easily becomes an all-compassing explanation represented as monolithic and an homogenising entity that encompasses the minds and practices of all those from a specific country. That often leads to polarising accounts of, for instance, the 'equal' Finnish 'us' as opposed to the 'patriarchal' immigrant 'them' (Keskinen, 2017).

A considerable Somali minority population lives in Finland, and this study could risk stigmatising Somalis as carriers of FGM/C, particularly since FGM/C has remained in the headlines in Finland throughout the years I have been working on my research. For example, on 5 January 2014, just after I began my doctoral studies, the leading Finnish newspaper *Helsingin Sanomat* published a photo reportage on young Masai girls before, during, and after their genitals were cut (see Nousiainen, 2014). That reporting and the accompanying photographs lead to a heated debate on the ethics of publishing

'brutalising' images of young girls who can be identified from the pictures. In 2017, Annika Saarikko, the Minister of Family Affairs and Social Services, suggested that the government should consider legislation that specifically forbids FGM/C, following actions in other Nordic countries ('Minister: Finland should consider ban on female genital mutilation', 2017). In 2018, a Finnish textile company Finlayson launched a citizen's initiative<sup>33</sup> to enact a law explicitly prohibiting FGM/C (see 'Seis Silpomiselle', 2018). With 60,582 signatures, the initiative met the threshold (50,000), whereby Parliament must put the item on its agenda ('Citizens' initiative to ban FGM set for parliamentary consideration', 2018).

Another risk related to this research involves entrenching the association between FGM/C and Islam. Whilst FGM/C is intertwined with Islam in my research context, it is not practised in an overwhelming majority of Muslim societies, nor in Saudi Arabia, where Islam had its origin in the 7th century (Johnsdotter Carlbon, 2002, p. 54). Akar and Tiilikainen (2009) point out that female circumcision has a longer history than Islam, and is also practiced by Christians, Jews, and animists in countries and regions where FGM/C is common. For instance, in Niger and Nigeria, the prevalence is significantly higher amongst Christians than amongst Muslims (UNICEF, 2013, Statistical Table 1). By focusing on advocacy *against* FGM/C in Somaliland—a Muslim society—I hope to mitigate such risks. I want to deconstruct the understanding that individuals embedded in predominantly patriarchal structures are uniformly and passively socialised by religiosity (see Glas, Spierings, & Scheepers, 2018). Furthermore, by focusing on Somali *men's* activism against FGM/C, my study challenges the common misunderstanding that all men actively support the continuation of FGM/C in communities that practice FGM/C, or that all Somali (or other African) and/or Muslim men behave in violently patriarchal ways (Hopkins, 2006, p. 338; Johnsdotter et al., 2000, p. 32).

To explore a community that is not my 'own', to apply theories and methodologies that are mostly produced in the global North, and to not undertake the research in collaboration with local or native scholars carries the danger of re-enacting historical imperialism. Mohanty (1984, p. 335), in her famous article, draws attention to the hegemony of Western scholarship, and blames Western feminism for 'assumptions of privilege and ethnocentric universality on the one hand, and inadequate self-consciousness about the

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<sup>33</sup>Sections from the penal code and several laws on assault can all be interpreted as already criminalising FGM/C in Finland ('Citizens' initiative to ban FGM set for parliamentary consideration', 2018). Supporters of the initiative claim that a specific law would make Finland's stance clear, whilst others posited that the current legislation is sufficient to ban FGM/C (see, for example, 'Oikeusministeri Häkkinen: Suomi ei tarvitse tyttöjen sukuelinten silpomista kieltävää erillislakia', 2018; 'Oikeusoppineet USU:ssa tyttöjen silpomisesta: "Ei tarpeellista kriminalisoida rikoslaissa"', 2017). Debates also emerged as to whether the actual bottleneck in FGM/C prevention in Finland stems from the skills and resources of social and health professionals towards discussing FGM/C with risk groups (see, for example, Latvala & Teshome, 2017). There are also voices warning that immigrant girls and women can be stigmatised due to the continuous public FGM/C debate, and due to the victimising discourses and pictures used by some NGOs in their private fundraising campaigns (Latvala, Teshome, & Ahmed, 2018).

effect of Western scholarship on the “third world” in the context of a world system dominated by the West on the other.’ By producing a reductive and homogeneous notion of ‘Third World Difference’ through a monolithic notion of patriarchy, Western feminists ‘colonise the fundamental complexities and conflicts which characterise the lives of women of different classes, religions, cultures, races, and castes in these countries’ Mohanty (1984, p. 335) claimed.

In studies on gender and masculinity in particular, Connell (2014) argued that imported intellectual frameworks applied across the global South create a discontinuity in the intellectual culture, creating specific challenges in, for instance, applying the concept of masculinity. Ouzgane (2006, p. 6), in turn, notes that although critical studies on men and masculinities can be productively deployed to understand Islamic masculinities, one should bear in mind that the Muslim world is diverse and ever-changing. Local realities, religious and political agendas, the consequences of Western colonialism, and globalisation must be considered, he claims. Gerami (2005) points out that, whilst gender as socially constructed, gender power differentials as societal (and not natural), and the intersection of race, class, gender and other social distinctions have been widely accepted in the academic and intellectual gender discourses in many Muslim countries, sexuality, in particular, as socially constructed, remains highly contested.

In contrast, Jakobsen (2014) builds upon postcolonial work that questions the notion that theory developed in the North should not be used in the South. She points out that fixating on ‘difference’ and the widespread acceptance in the North that social theory, particularly gender theory, is inapplicable to Africa undermines the possibilities for critical gender research in Africa. Narayan (2009), in turn, argues that framing Africa as primarily different from the global North is as ethnocentric and imperialist as assuming a sameness. I align with Jakobsen, adding that the eventual inapplicability of theories developed in the North to the Southern context provides an opportunity for revising theories. One should, however, remain sensible to the fact that applying ‘imported intellectual frameworks’ (Connell, 2014) often implies that certain issues are illuminated, and perspectives highlighted, whilst issues and perspectives that people living in a study context consider most relevant remain unexamined. Lazar (2007) claims that the structural imbalance in knowledge production between the global centre and margin is problematic, particularly if the researcher’s position remains inexplicitly defined. Thus, in what follows I discuss my own position relative to this research.

As described in *Section 4.1*, Fairclough’s (1992, pp. 3, 80) discursive practice dimension specifies the nature of text production, distribution, and consumption in order to explore how text production and interpretation is constrained by members’ resources (internalised social structures, norms, and conventions), and by the specific nature of the social practice of which they are a part. Instead of, for example, *observing* ‘real life’ anti-FGM/C advocacy activities or exploring students’ social media updates, I collected data via semi-structured individual interviews, as described in *Section 4.3*. Thus, instead of

discourses that students (re)produce during face-to-face interactions within their 'target groups' or via social media, my data consists of discourses produced 'for me'. Kvale (1996) emphasises that interviews are first and foremost an interaction, and the knowledge produced during this interaction represents a product of that exchange and the production of views. What interviewees choose to share reflects the condition of their relationship and the interview situation, he writes. Thus, it is important to consider how I as the interviewer and the interview context in general were perceived by research participants.

As a non-Muslim Western woman, I was likely offered different accounts on FGM/C, gender norms and gender order than would be offered to, for instance, an elderly and/or Muslim and/or Somali man. Also, the presence of the research assistant, a local Somali man, eventually impacted the interviews. Contrary to my expectations, however, sensitive issues such as sexuality were discussed quite openly—particularly by male students and male CSO employees. That these aspects arose is, to some extent, due to the interview topics and questions that guided the interviewees to consider certain aspects over others. Given that even sensitive issues were discussed quite openly with me implies that my sex was not considered a (very) significant factor amongst those interviewed. As a non-Muslim, in turn, those interviewed perhaps seldom explained the deeper meanings and connotations related to Islam. Such explanations were perhaps left out, based on the assumption that, as a non-Muslim, I would not understand or find them relevant.

At the outset of each interview, I emphasised that my assistant and I were neither attached to the international NGO supporting nor to the local CSO implementing the anti-FGM/C project, and that my research aim was not to evaluate the training or the local CSO. I explicitly asked the interviewees to be open about any eventual challenges rather than 'glorifying' their experiences and expectations. Yet, I understood that some of interviewees viewed the interview as a 'test', whereby their knowledge on FGM/C was being evaluated, and they struggled to provide the 'right' answers based on the information they received during the training. Such positioning can be understood against the fact that the students were nominated for participation in the FGM/C training by their respective university's management in accordance with the project's criteria (see *Section 4.2*). Furthermore, I sometimes felt that I was viewed as a representative of the international NGO, and hence, potential employer. Viewing the interview as a 'test' or as an opportunity to advance one's career may incentivise providing socially desirable accounts, for instance, by emphasising and reproducing themes (such as the health and social effects of FGM/C or a human rights perspective to FGM/C) that were central to the training. Interestingly, the latter part of the interview which addressed gender roles, gender ideals, and gender equality seemed less predictable to the interviewees. Thus, it seemed as though they did not 'know' how I 'expected' them to respond and provided more intuitive accounts.

Finally, I briefly reflect on the resources upon which I draw in the data collection and analysis, and in interpreting the discourses I identified from the responses. Ellsberg and Heise (2005, pp. 214–215) wrote that whilst quantitative researchers attempt to avoid letting their feelings or subjective views influence data collection or analysis, qualitative researchers argue that subjectivity in data collection and analysis is unavoidable. In qualitative research, they point out, neutrality in the data rather than in the researcher is sought. As I discussed in *Section 2.1*, the central premise guiding my research is the understanding of all FGM/C practices as problematic and as human rights violations, even if the human rights premise is not completely devoid of problems. During the interviews, however, I avoided expressing my personal views and attempted to create a non-judgemental and affirming atmosphere. To minimise exercising my position of power in the analysis and to tackle Mohanty's (1984, p. 336) critical viewpoint that 'any discourse that sets up its own authorial subjects as the implicit referent, i.e., the yardstick by which to encode and represent cultural Others', I avoided challenging participants' means of constituting knowledge. On the other hand, these approaches and theories equipped me with the ability to critically view my data. My interpretations of the data were also affected by the fact that I have not studied Islam. Thus, I was careful to focus on describing if and how informants referred to and interpreted Islam, without assessing how such interpretations relate to 'official' doctrines or alternative interpretations.

In *Chapters 5* and *6* which follow, I introduce the four discourses that emerged from the data, namely, the *righteousness discourse* (*Section 5.1*), the *health discourse* (*Section 5.2*), the *hierarchical difference discourse* (*Section 6.1*), and the *masculine responsibility discourse* (*Section 6.2*). In the *righteousness discourse*, sunnah cutting is represented as not required and not harmful, whilst women's religious purity (that is, virginity and abstinence from premarital sex) is decoupled from FGM/C. In the *health discourse*, pharaonic cutting represents a risk to women's health and a hindrance to marital sex. In the *hierarchical difference discourse*, a strict gender segregation and men's superiority are justified through Islam and gender difference. Gender inequality is disputed, and women are partially blamed for their marginalisation. In the *masculine responsibility discourse*, men's superiority is, in turn, legitimated through physical and economic protection that men (are expected to) offer women, whilst (elderly) men are blamed as irresponsible since they neglect anti-FGM/C efforts.

The quotes presented in *Chapters 5* and *6* are primarily from the male students, although quotes from female students (and CSO employees) are also used, especially where I describe interesting and surprising differences or similarities between the male students' accounts. Each quote begins with a pseudonym that refers to the interviewee (typically a male student unless otherwise indicated). I use brackets to indicate missing words that I filled in to render the quotes more readable. Brackets with three dots [...] indicate sentences or words that were extracted from the quotes to shorten them. Sighs,

laughter, or other utterances are indicated in brackets if I considered them relevant to the context. Italics are used to emphasise certain words or phrases in the quotes. If the quote is based on the research assistant's English translation from Somali, it is indicated at the end of the quote.

## 5. DISCURSIVELY NEGOTIATING THE ESSENCE OF FEMALE GENITAL MUTILATION/CUTTING PRACTICES

In this chapter, I present two interlinked discourses—the *righteousness discourse* and the *health discourse*—which construct the meaning, religious status, and health consequences of different FGM/C practices, as well as the subject positions in perpetuating and preventing the practice. These discourses formulate the understanding of violence against women by representing sunnah cutting as not required by Islam, on the one hand, but not harmful and, hence, acceptable, on the other. Pharaonic cutting, in turn, is represented as forbidden by Islam, a risk to women's health, a violation against women's rights, and a hindrance to marital sex. Furthermore, idealised womanhood is renegotiated by decoupling women's religious purity (that is, virginity and abstinence from premarital sex) from all types of FGM/C.

At the outset, I must note that the interviews and, thus, the data reflect confusion over the terminology around the cutting of female genitalia, described in greater detail in *Section 1.1*. Amongst most English-language speakers, FGC, FGM and FGM/C are assumed to refer to all types of female genital mutilation and cutting. In Somaliland, however, most people—including most of my interviewees—use these acronyms to refer to the most severe types of cutting only (also known as pharaonic cutting), whilst the term 'sunnah cutting' is used to refer to any type of cutting, which people believe Islam requires or recommends.

*Sections 5.1* and *5.2*, which describe the two discourses, are divided into subsections indicating the primary constructive elements of the respective discourse. In *Section 5.3*, I summarise the discourses and discuss how they reproduce or challenge the local gender regime and prevailing masculinities.<sup>34</sup>

### 5.1 THE RIGHTEOUSNESS DISCOURSE

Aligned with Fairclough (1992, p. 91), who argues that all types of discourse remain open to ideological investment, I suggest that religion—in this case Islam—serves as an underlying element in all four of the discourses I identified in my data. I argue that this religious investment is quite explicit in the *righteousness discourse*, which is firmly attached to and reproduces the righteousness ideal, the most uniform characterisation of the salient Muslim character traits applied to both men and women (see Arat & Hasan, 2018). This discourse builds upon what the interviewees define as morally correct (or

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<sup>34</sup>*Table 4* in concluding *Chapter 7* summarises the constructive elements of the identified discourses, and consequences for the local gender regime and prevailing masculinities.



not incorrect) behaviour and thinking, and constructs what is (not) considered violence or a violation against women. The primary elements of this discourse consist of the negotiation of the religious status of sunnah cutting and the negotiation of women's religious purity. The *righteousness discourse* constructs sunnah cutting as 'not required' by Islam, but also as not harmful or violent and, hence, acceptable. Simultaneously, in this discourse, all types of FGM/C are decoupled from a woman's religious purity (that is, virginity and abstinence from premarital sex).

## REPRESENTING SUNNAH CUTTING AS NOT REQUIRED AND NOT HARMFUL

In the *righteousness discourse*, the men I interviewed categorised FGM/C practices according to their understanding on religious guidance. In Somaliland, religious scholars mostly condemn the more severe pharaonic cutting. According to Newell–Jones (2016), 87% of religious leaders considered pharaonic cutting as 'not required' (see footnote 21 for an explanation of these categories). Accordingly, my interviewees unanimously opposed pharaonic cutting, which, hence, appeared as the primary 'target' of their anti-FGM/C activism. Respectively, religious leaders' varying interpretations of the status of sunnah cutting were mirrored in my interviews. Agreeing with the minority of religious leaders (approximately 5% according to Newell–Jones, 2016) who consider sunnah cutting 'obligatory', a minority of my interviewees claimed that sunnah cutting is required by Islam, and thus women *must* undergo it:

**Farah:** *My idea is based on the religion, what the religion mentions. So sunnah is acceptable and I believe sunnah is perfect. But a woman with nothing [uncut] is a problem. So, women must undergo sunnah.*

Farah's quote reflects Lunde and Sagbakken's (2014) notion that Somalilanders do not see a contradiction in stating that they would not let their daughters undergo pharaonic cutting, yet consider it important for their daughters to undergo sunnah cutting. In Farah's understanding, religion 'mentions' sunnah cutting, rendering it 'acceptable', 'perfect' and also mandatory. He argued that women 'must' undergo sunnah cutting, because it is mentioned in the Hadith, becoming valuable as such:

**Maria:** *Would you describe why exactly it is important in religion. What value does it add to the girl to have sunnah?*

**Farah:** *Of course, there is Hadith [oral tradition], in which the Prophet Mohamed mentioned that to make sunnah and everything in this society is based on religion.*

**Maria:** *Yeah, I understand that.*

**Farah:** *The religion is a limitation and the Hadith is a limitation, then what they mentioned and what the Prophet Mohamed mentioned we must use that. That is the important thing.*

**Maria:** *Yeah, but in the Hadith, is there some explanation for why the Prophet Mohamed said that sunnah is needed?*

**Farah:** *Every activity the Prophet Mohamed mentioned we must do.*

Whilst 79% of religious leaders considered sunnah cutting as ‘honourable’ (recommended) according to Newell–Jones (2016), this view of sunnah cutting did not emerge clearly in my data. In contrast to a few interviewees, such as Farah above who considered sunnah cutting as required, the majority of my interviewees viewed sunnah cutting as ‘not required’, in agreement with 5% of religious leaders in Newell–Jones’ report. However, not considering sunnah cutting as ‘required’ or ‘recommended’ resulted in my interviewees interpreting the practice as ‘permitted’ rather than ‘disapproved’ or ‘forbidden’ (see footnote 21 for an explanation of these categories). Aweys’ quote exemplifies this attitude to sunnah cutting:

**Aweys:** *You are free to do [sunnah cutting]. It is not an obligation. You can do it, or you can let it go and not do it, so it is your attitude.*

Aweys’ wording creates a bit of ambiguity, with regards to whom he refers when saying that ‘you can do it, or you can let it go’. If he means that a girl can decide for herself, then he ignores the role of parents in making the decision. Typically, the girls themselves are involved in less than 0.5% of the decision-making processes (Newell–Jones, 2017, p. 34).

Najib’s quote below implies that he does not view sunnah cutting as serving any significant purpose. He thinks that nothing is lost if sunnah cutting is also abolished.

**Najib:** *I thought that sunnah FGM was applicable in our society, or acceptable in our society, but when I got this chance [to participate in the anti-FGM/C training], I came to know that sunnah is just a cultural issue. So, if we eliminate sunnah, we lose nothing. I would eradicate all of them [all types of FGM/C].*

Najib distinguishes between what is ‘applicable’ or ‘acceptable’ in the society from what is ‘just cultural’. In other words, for him, ‘applicable’ and ‘acceptable’ are defined by religion, but not by culture. Yet, as Najib further elaborates below, viewing sunnah cutting as not required by Islam and ‘just a cultural issue’ does *not* imply intolerance for it. Whilst above he states that nothing would be ‘lost’ if sunnah cutting was eradicated, he continues to accept the practice as ‘not a big problem’:

***Najib:** They [religious leaders] are taking a Qur'anic verse which says: 'Human being is created into its best form' as evidence. So, the two forms of FGM, the pharaonic type is totally forbidden and the sunnah type is mildly invasive, so it is not a big problem if it is done or left. So, if the woman is exposed to something that is not allowed in the religion that means her right is violated.*

Najib suggests that an 'invasion' or violation against a woman's body is acceptable if it is 'mild'. Simultaneously, he indicates that women can be exposed to anything that is not *specifically forbidden* by religion. Religion, therefore, determines not only what is considered 'right' and 'wrong', but also what is labelled as 'violence' and 'harmful' amongst others. What is understood to be required or not specifically forbidden by religion cannot be viewed as (totally) 'wrong', 'harmful' or 'violent'. Such an understanding was also identified in Newell–Jones' (2016, p. 42) data where the Head of the Department of Islamic Propagation, the Ministry of Religious Affairs said: '[S]unna, well that is Islamic, you must understand that Islam would never permit anything which brings harm to a woman, that would be non-Islamic. So, sunnah cutting does not harm at all if performed properly.'

## **DECOUPLING RELIGIOUS PURITY FROM FGM/C**

According to Dirie and Lindmark (1991), in Somalia, pharaonic cutting (tradition) appears to create a barrier that *preserves* virginity, which Muslims consider the will of God and, therefore, religious. Talle (1993), in turn, wrote that instead of virginity being indicated by a preserved hymen, a Somali girl *becomes* virgin through infibulation (pharaonic cutting).

As described above, some interviewees framed sunnah cutting as required by Islam, and, hence, supported it as a religious obligation. None of the interviewees, however, argued that sunnah or pharaonic cutting is a necessary means by which to guarantee a woman's religious purity (defined here as virginity and abstinence from premarital sex; see *Section 2.3*). The interviewees, thus, deconstruct the link between women's religious purity and cutting female genitals. Instead, the interviewees equate a woman's religious purity with chastity—such as by covering her body, behaving 'modestly', and keeping away from men:

***Omar:** The religious girls always wear the hijabs. They wear the hijab, they may not talk to a man much unless they have something necessary for them. But someone who is not religious may wear Western kinds of clothes and they may go everywhere, and they may have a big party like Westerners. So, you can identify easily someone who is more religious and someone who is not.*

The *hijab*, Akar and Tiilikainen (2009, p. 41) explain, not only refers to physically covering one's body, but also to 'modest' conduct with regards to

women's ways of talking, moving, and using cosmetics, as well as by avoiding shaking hands with the opposite sex. Habiba elaborated on the double meaning of covering oneself:

**Habiba** (woman): *Covering, like I mean we cover our body, then I just mean to cover her body with what we call a scarf. There is another meaning of coverage, coverage means that she doesn't go out with other men, she keeps herself so that men do not chase her. She needs to protect her dignity and not lose her virginity.*

Jama emphasised how a religious woman 'keeps her distance' from a man also during the courtship period:

**Jama:** *In terms of courtship, there is a way of doing it. A woman who is more religious will not allow you to shake her hand. You will sit a bit far away. The place that you will court her will be in her house. So, it's a bit like you keep your distance during courtship (translated).*

The three quotes above illustrate how important it remains for an unmarried Somali girl 'to show that she cherishes her own virginity and always refuses to let herself into sexual activities' (Johnsdotter Carlbom, 2002, p. 161). But, whereas in earlier accounts from the Somali community, a virgin girl referred to a 'sewn' (pharaonically cut) girl (Talle, 1993), in my data chastity—covering oneself physically (with clothes) and 'socially' (with modest behaviour and by keeping away from men)—indicates virginity and abstinence from premarital sex. Furthermore, being *not* 'sewn' (pharaonically cut) is represented as part of the idealised womanhood—at least amongst urban and educated people. This is illustrated in Muuse's quote, where he describes his wishes regarding his future wife as follows:

**Muuse:** *She [bride] must be zero tolerant [uncut] or at least she must be sunnah, not pharaonic you know. That is the first point. The next thing is that she must be educated, at least a degree level or secondary education. [...] The third thing is that she must cover her body because she, is you know, if she covers her body, she has been protecting herself for [a] long time.*

I argue that, by 'protecting herself for [a] long time', Muuse indicates that a woman should refuse sexual activities, and, hence, safeguard her virginity. Thus, Muuse expresses a preference for both a virgin and a woman who is *not* cut (at least not pharaonically), and clearly decouples religious purity from FGM/C. This finding aligns with Johnsdotter et al. (2000, p. 38), who found that Somali men in exile in Sweden preferred 'natural' virgins instead of virgins created through infibulation. Johnsdotter et al. (p. 39) claim that, for Somali men, virginity is important primarily in signalling that a woman is morally flawless. My interviewees do not refer to 'natural' virgins as such, but they use paraphrases such as 'protecting herself' to signify virginity and

abstinence from premarital sex. Additionally, for them, virginity seems not to primarily indicate controlling women's sexuality, but to signal a woman's morality and religiosity. However, the persistent emphasis on women's virginity risks upholding FGM/C, which is considered by many a culturally valued means of safeguarding virginity.

To summarise, whilst the *righteousness discourse* constructs chastity as a sufficient indication of women's *religious purity* (meaning virginity and abstinence from premarital sex), amongst a minority of interviewees, women's *religious righteousness* also requires sunnah cutting, which they consider a religious practice (without connecting it to virginity or other religious virtues). Others view a woman's religiosity/righteousness as parallel to her chastity (religious purity) and/or even view uncut women as an ideal. Accounts that decouple women's virginity and religiosity from all types of FGM/C renegotiate women's agency by representing women as capable of controlling their own premarital sexuality and safeguarding their virginity without 'external' control (that is, via FGM/C). Such accounts clearly contrast understandings that consider pharaonic cutting as necessary because 'women are held to be easily affected by visual impressions and emotions and, thus, prone to be led astray by forces beyond their control' (Talle, 1993, p. 91).

## 5.2 THE HEALTH DISCOURSE

The second discourse constructing FGM/C reflects the biomedical discourse on FGM/C, identified by, for instance, Toubia and Sharief (2003), Talle (2010), and Lunde (2012). The biomedical discourse has made populations that practice FGM/C aware of the medical and health-related consequences of FGM/C. Whereas the *righteousness discourse* draws upon Islam, the *health discourse* draws upon medical 'facts'. As Whitehead (2002, p. 43) points out, science is not neutral. Its practices and assumptions are invested in discursive properties in a similar way to other systems of knowledge and belief. In my data, the biomedical 'scientific' discourse also associated with the consequences for marital sex—that is, effects beyond strictly medical consequences. Thus, I label this discourse the *health discourse* instead of the biomedical discourse.

The *health discourse* represents pharaonic cutting as a harmful *cultural* practice causing women severe health-related problems. Accordingly, pharaonic cutting is unanimously understood as standing against Islam. As discussed in relation to the *righteousness discourse* above, sunnah cutting does not associate with health-related problems in my data, *because* it is viewed as *not* specifically forbidden by Islam; sometimes it is also viewed as required by Islam. Even if pharaonic cutting is presented as harmful to women in both the short-and long-term, it is not framed as *violence* (that is, as a violent act or act of force). It is, however, represented as a *violation* of women's

rights to health, to bodily integrity, and to marriage. The negative effects of pharaonic cutting to men associate with marital sex.

## **REPRESENTING PHARAONIC CUTTING AS A RISK TO WOMEN'S HEALTH**

The *health discourse* represents pharaonic cutting as a harmful practice causing women various health problems. Problems associated with menstruation, sexual intercourse, and childbirth are emphasised, as Abdi summarised:

**Abdi:** *When you see someone who cannot give birth and may have to undergo a caesarean section, when you see some girls who have menstrual problems, when you see someone who cannot urinate normally, when you can see those people who are affected from feeling sensation during sexual intercourse. When you are an educated person who has this country, those things I mentioned motivate you to take part in eradicating FGM.*

According to Boddy (2016), the realization that FGM/C-related healthcare expenses also deplete family resources can contribute to men's opposition to the practice given the escalating cost of living in many practicing communities. This idea gained support in some accounts, exemplified by Omar, who considers FGM/C a 'financial burden':

**Omar:** *It is a burden, financial burden, yeah. He [the husband] is always taking [his wife] to the hospital and paying some money for her [FGM/C-related] medication. So that is what he is experiencing, I think.*

Whereas pharaonic cutting was seen to carry several negative health consequences, sunnah cutting was not connected to any significant health-related problems. Mahad's quote illustrates this clearly:

**Mahad:** *When they become married, women with FGM [pharaonic cutting] experience more complications, for example, fistula or other related diseases, but a woman with sunnah cannot acquire any diseases related to FGM [pharaonic cutting].*

Women echoed this view. In her quote, Naima, for instance, labels sunnah cutting as 'not a big deal'. Her quote also clearly illustrates how the term 'FGM' is used to refer only to pharaonic cutting, when she claims that FGM has been eradicated and women nowadays undergo sunnah cutting:

**Naima** (woman): *Nowadays, FGM has been eradicated. And nowadays women undergo the sunnah type; so, it is less damaging than pharaonic. So, many years ago it [FGM/C] came with many*

*problems like bleeding and fistula, but nowadays these problems have been eradicated. I do not think it is a big deal for women nowadays, but before it carried many damages or complications, both haemorrhaging, bleeding, fistula, pain during dysmenorrhoea and pain during sexual intercourse.*

As described in Section 2.3, evidence indeed exists indicating a shift in the type of cutting in Somaliland. For example, in the first cohort (2002-2006) from The Edna Adan University Hospital (Ismail et al., 2016) studies, 1% underwent sunnah cutting; in the second cohort (2006-2013), that share reached 17.8%. Contrary to Naima's view, however, pharaonic cutting appears far from eradicated, since the remaining 82.2% of women and girls have quite likely undergone pharaonic or intermediate cutting.

Clearly distinguishing between sunnah and pharaonic acts of cutting, Amina paralleled the former with pricking and labelled the latter as 'cruel' and 'totally illegal'. Yet, rather than being criminalised (which FGM/C is not, as explained in Section 2.3), by 'illegal' Amina presumably refers to pharaonic cutting being forbidden by Islam and/or becoming something only practiced by 'ignorant' people. That is, pharaonic cutting represents something that contradicts 'modern' ideas of acceptable practices in Somaliland, thereby reflecting Lunde's<sup>35</sup> (2012) findings on perceptions of female genital cutting in Somaliland.

**Amina** (woman): *The sheik [a man with extended knowledge of Islamic theology] differentiated between sunnah and pharaonic. Sunnah is simply like pricking the girls or cutting very slightly. So sunnah is something that you can do or not. But the pharaonic type which involves cruel cutting is totally illegal (translated).*

Amina's thinking aligns with those rather indifferent attitudes to sunnah cutting demonstrated through the *righteousness discourse*, as well as Newell-Jones' (2017, p. 18) study where the interviewees were of the opinion that only cutting which involves stitches (intermediate or pharaonic cutting, see Table 1) carries major health consequences. She found that only 4% suggested that pharaonic cutting carries *no* harmful effects. Simultaneously, most women (80%) and men (68%) considered sunnah cutting to not cause health-related problems. In reality, sunnah cutting may be close or equivalent to pharaonic cutting, since traditional cutters who primarily perform the practice are often unaware of the differences between practices (see, for example, Akar & Tiilikainen, 2009; Lunde, 2012; Vestbøstad & Blystad, 2014). Leila was the only student who explicitly mentioned this:

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<sup>35</sup>Lunde (2012, p. 85) suggests that in urban areas of Somaliland, pharaonic cutting is increasingly associated with the past, classified as harmful, and viewed as something practiced only by ignorant people as well as a practice that does not correspond to 'modern' ideas. Sunnah cutting, in turn, was characterised as a recent and milder practice or as the prevailing 'normal' practice.

**Leila** (woman): *I have zero tolerance for FGM, and I prefer all forms of FGM to be stopped since women will experience the same consequences and the same problems. So, I would prefer no cutting at all.*

Even when represented as harmful to women in both the short- and long-term, pharaonic cutting was not framed as violence (meaning a violent act or act of force) in this discourse. Rather, it was framed as a violation against women's health or infringing their 'freedom to have good health', as formulated by Yusuf:

**Yusuf:** *So, if all people need to have freedom, to have freedom means freedom to live and freedom to have good health and wellbeing in society, then why should we practice FGM on girls?*

In contrast, what is understood as violence, particularly gender-based violence, is illustrated in Yusuf's subsequent reflection, in which he attributes the 'vice' of sexual violence and abuse to idling young men juxtaposed against the idealised manhood. Yusuf's quote illustrates Hogan's (2009, p. 9) suggestion that marginalised groups within a nation are often constructed as 'internal Others', who represent 'threats' against the social order:

**Yusuf:** *Men really prefer to be responsible for families. But nowadays there are some exceptions, such as gender-based violence including rape. Those young men who drop out of school, who have no other social resources, who have no playgrounds and other entertainment, usually undertake this gender-based violence. They usually rape, they create some emotional abuse, as in the sexual abuse of women.*

That FGM/C—unlike rape and sexual abuse—was not labelled as violence by the interviewees illustrates how labelling something as violence results from cultural, historical, and social negotiations, where gender plays a major role (see Ronkainen, 2017). In the legislative framework in Somaliland, neither rape nor FGM/C is currently criminalised, although rape offences—unlike FGM/C offences—are reported in criminal statistics and criminalisation is further along in the process than the criminalisation of FGM/C (see *Chapter 2*). In her investigation in Somaliland, Newell-Jones (2016, p. 31) asked people to clarify how they see the right to freedom from violence against women and girls in relation to FGM/C. 94% of women and 88% of men connected such violence to pharaonic cutting, whereas only 24% of women and 7% of men connected it to sunnah cutting.

When disseminating information on the physical health-related consequences, students represented themselves as both competent and legitimate. Aweys, for example, described how rural people 'easily' receive anti-FGM/C messages from medical students because they simultaneously deliver much-needed health services to the communities:



**Aweys:** *Yeah, we [students in health-related fields] are very respected in the rural areas because we do programmes called community medicine. We go there and treat them, so they are going to take that [anti-FGM/C] message from us easily.*

Since FGM/C remains a taboo topic between men and women in Somaliland, men should be targeted by male activists, particularly in rural areas, Gele, Bø, and Sundby (2013) argue. Amina, in turn, highlighted that women activists have an advantage due to their shared experiences when they address other women:

**Amina** (woman): *Yes, there is a difference. This problem [FGM/C] does not affect men and women equally. It affects women more. So, if girls share with other girls, they are connected (translated).*

Contrary to Gele, Bø, and Sundby's (2013) claim, Aydarus argued that activist women can carry more credibility and more easily access male audiences, since FGM/C primarily impacts women, who thereby gain legitimacy. The last sentence in Aydarus' quote implies that it is exceptional that in some instances women do *not* listen to men:

**Aydarus** (CSO employee/man): *Because we are specifically working in rural areas, it is better if we go as one male and one female, so men can talk to men, and women to women. But sometimes women can more easily talk to both, because this [FGM/C] has primarily impacted women. So, women can more easily have the same feelings about this as those affected. So sometimes if a man tries to talk, they are not listening, even the women.*

Whilst the interviewees recognised that FGM/C clearly impacts women directly, it *also* impacts men. As I will discuss later in this section, the effects on men primarily relate to marital sex, a taboo topic for discussion. Thus, the 'subjective experience' of FGM/C-related problems associated with marital sex does not allow men a similar legitimacy to openly share their experiences with other men. Aside from lacking subjective experiences, some men revealed that they had been questioned for intervening in 'women's issues'. In these accounts, mothers appeared upset:

**Abas:** *Maybe they will ask you, 'Aren't you a man? Why are you talking about FGM?' In the Somali context, they believe women can only talk about FGM because they will say it's a special issue associated with women. [...] Mothers are more sensitive than fathers, I think.*

This corresponds with Johnsdotter Carlbom's (2002) findings among Somalis living in exile in Sweden. She found that several men felt powerless in terms of influencing their wives' decisions to cut their daughters. Some of her male informants recounted how their effort to stop the practice was met with 'strong

resistance' from women, who stated that 'men should stay out of women's business, that this [FGM/C] was a matter concerning the mother and her daughter' (Johnsdotter Carlbom, 2002, p. 143). These men also stated that their daughters were cut without their knowledge, despite their efforts to encourage their wives to refrain from the practice.

In this discourse, however, men represent the natural leaders. NGOs and CSOs increasingly engage men in their efforts against FGM/C, given the 'fact' that most leaders are men. Representing this 'fact' as natural and the argument for engaging men as commonsensical, men's domination in leadership positions is discursively reproduced.

***Ismail*** (CSO employee/man): *But then we also work with adult men. Because we realise adult men are the decision-makers in this society, politically, socially, and spiritually. Most religious leaders are men, most politicians are men, clan leaders and all those are men, predominantly, if not all. So, we try to engage with the opinion makers and the young men at the school youth clubs.*

Engaging men in FGM/C prevention was also represented as empowering to women, who then get the opportunity to realise that men care about women's health. For instance, Habiba stated that she was positively surprised that men condemn the practice and are willing to prevent it:

***Habiba*** (woman): *I was so surprised, but it is nice they [male participants in the activist training] said it [FGM/C] is not beautiful for women to be circumcised because it is not good for their health. They were more active than us [female participants].*

Yet, some interviewees believed that female participants hesitated to speak up during the anti-FGM/C training in a mixed group, because the topic addressed female genitals. Mixed group sessions also carry the risk that men's judgemental or shocked reactions to FGM/C awareness-raising material caused anxiety amongst women who were cut.

## **REPRESENTING PHARAONIC CUTTING AS A VIOLATION AGAINST WOMEN'S 'RIGHT TO MARRY' AND RIGHT TO BODILY INTEGRITY**

The *health discourse* also reveals that no universal understanding of human rights and women's rights exists. For instance, Muuse's quote illustrates that FGM/C is seen as a violation of women's *rights* to health, and, thus, a violation of her 'right to marry':

***Muuse:*** *FGM is part of an injustice or injuring their [women's] rights because women are in competition with other women from neighbouring countries like Ethiopia or other nations. So, if the woman*

*is circumcised, she may have poor health. At that point, her right is violated.*

Muuse suggests that FGM/C-related health problems decrease women's marital prospects since they 'compete' with women from neighbouring countries like Ethiopia.<sup>36</sup> Muuse also refers to a female family member, to demonstrate that cut women fear marrying due to FGM/C-related complications:

***Muuse:*** *She [a family member] is in Europe now and she said she will never marry. I asked her why and she said because she was very afraid of marriage. It is not something else, it is FGM. So, I think there is a direct relationship between these two [women's rights and FGM/C].*

In addition, Habiba, referring to her friend, constructed FGM/C as a violation of women's rights because it hampers their opportunity to marry. In Habiba's words, her friend cannot marry because she is afraid of FGM/C-related problems. She is likely referring to problems and pain associated with sexual intercourse, even if not explicitly stating so.

***Habiba (woman):*** *Like one of my friends, she was subjected to FGM when she was younger. Now she said her rights are neglected because she knows she cannot marry because she knows she will face a lot of problems. She says her mother, she knew that she would face problems, but [her mother] did it to her.*

Rather ambivalently, even if FGM/C frequently occurs to *secure* a girl's marriageability, the practice to Muuse and Habiba's minds *violates* a woman's 'right to marry'. Constructing marriage as a 'woman's right' reflects the importance of marriage as a guarantee for social security amongst women in Somaliland.

In this discourse, 'ignorant' mothers are represented as the primary perpetrators of pharaonic cutting and, therefore, the main violators of their daughters' right to health and 'right to marry'. In, for example, Habiba's narrative above, her friend blames her mother for neglecting her rights and subjecting her to FGM/C despite the health risks. Habiba and the friend to whom she refers are not questioning the freedom of the mother to choose in making the decision or who else is involved in the decision-making. CSO employee Halima, in turn, appears more understanding of mothers, most of whom in her view perpetuate FGM/C because they think it is in the best interests of their daughters:

***Halima (CSO employee/woman):*** *In general, women believe if they cut their daughter, they protect her. They believe if they do not do*

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<sup>36</sup>In Ethiopia, approximately 74% of women have undergone FGM/C, although the prevalence of the most severe types of cutting are significantly lower (UNICEF, 2016).

*[FGM/C], she [the daughter] will have to go underground. So, they protect her, and the tradition.*

Halima refers to the cultural and social norms and beliefs that guide mothers in their decision-making. As I argued in *Section 3.3*, mothers and other women in the family who often assume responsibility for decisions to cut daughters, perform the gendered role into which they were socialised, including perpetuating traditional practices and preparing daughters for adulthood. Newell–Jones (2017) describes the dilemma not only faced by mothers, but also by female health professionals, regarding their role in perpetuating FGM/C practices:

*Mothers, the key decision-makers, are balancing wanting not to harm their daughters with their perceived expectations of religious leaders, the father, and the wider community. Midwives and other [female] health professionals are faced with the contradiction between their personal preference, their understanding of their professional role, and the pressure they feel under to minimise the harm done to an individual girl.*

*(Newell–Jones, 2017, p. 36)*

Newell–Jones (2017) states that health professionals and mothers blame each other, particularly with regards to who is responsible for continuing the use of stitches (related to the more severe types of cutting), whereby both claim it is the wish of the other.

Whereas the interviewees' opposition to pharaonic cutting firmly links to the associated health problems in this discourse, small hints also suggest that a more principal opposition to all FGM/C practices exists. In these accounts, FGM/C practices are condemned regardless of their short- and long-term health consequences. Such views belonged to the male interviewees, whereas women (except Leila as shown above) regarded sunnah cutting as 'not a big deal' and something not requiring intervention. For example, Abdulle emphasised that FGM/C violates a woman's bodily integrity and right to self-determination since it is carried out without her consent.

**Abdulle:** *They should not face a risk, so the right they have is to keep their body, all its parts, the 360 organs, you know, of their body, so they have that fundamental right. And women should be given consent about FGM, you know, the thing is that when Mum and Dad or those who are performing FGM, they do not [ask for] consent.*

Hussein addressed all types of cutting as 'crimes against a human being', regardless of how severe the effects were. He simultaneously repeated the Western FGM/C typology and connected these 'crimes' to Islam, saying that 'Islam cannot encourage' such 'crimes':

**Hussein:** [...] Somehow, they are not so dangerous, type 1 and type 2. But type 3 and 4 are unacceptable. For example, type 1 is the cutting of the clitoris. That has an effect, but it is somehow better than others. Also, type 2, type 3 and type 4 are unacceptable and crimes against a human being. Even type 1 and type 2 are crimes against a human being. And Islam cannot encourage, human rights cannot encourage, and any human being can not encourage [FGM/C].

In Section 3.3, I referred to the discussion regarding what is violated when an act of violence takes place (Waldenfels, 2005). In addition, I referred to Opoku's (2017) notion that something ought to be said about the nature of rights violated if violence is viewed as a violation of rights. This discourse represents women's rights to health and 'right to marry' being violated by FGM/C. A few interviewees also emphasised the violation of women's rights to bodily integrity and self-determination. However, the interviewees claimed that rights-based arguments are not easily applicable to campaigning against FGM/C in Somaliland. Specifically, religious leaders and 'ordinary people' are represented as backwards, paralleling human rights with Western values, and, thus, despising them.

**Fadumo** (CSO employee/woman): *But everything that is related to human rights is very sensitive. So, we prefer to bring it up so that they will listen. But when we are discussing the line ministers with whom we are working, we always talk about how FGM violates girls' rights. But, when we go to religious leaders or communities, we just cannot talk about rights. Because they believe it [human rights] is something from Western society.*

Not only do interviewees, thus, question the applicability, but also the legitimacy of human rights arguments in this discourse. For example, Kadra stated that FGM/C opposition 'should not be dictated from above'. In her view, it is not meaningful to appeal to human rights declarations that originate from a country or countries that the (often illiterate and uneducated) target audience does not even know of or which carries no legitimacy in guiding decisions about FGM/C. Lunde (2012) suggested that the legitimacy of a human rights approach is further weakened in Somaliland since the region's sovereignty remains unrecognised by states that promote a human rights approach. Kadra also claimed that the language used by international NGOs as well as by local CSOs has alienated the local community from the FGM/C discourse:<sup>37</sup>

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<sup>37</sup>During my field work, I was invited to join a meeting on FGM/C prevention at the Ministry of Labour and Social Affairs. Approximately ten local and international NGOs attended the meeting, which was conducted in Somali. Without speaking Somali, I managed to follow the agenda most of the time since so many English words and phrases were used.

**Kadra** (CSO employee/woman): *And the community is well aware, they see it as an NGO issue. So, this has created barriers. We need to use the language that is used in our communities and households.*

Kadra's view echoes Koomen (2014), who warns that particular campaign strategies (such as demands for the criminalisation of FGM/C) and language (including rights-based terminologies) may position anti-FGM/C advocates as outsiders and even 'enemies' in the eyes of their own communities, even when they view themselves as grassroots insiders. In this context, FGM/C may gain new significance as a reified symbol with an insider identity, Koomen notes. Similarly, Prazak (2007) found in her research in Kenya that some of the hostility towards FGM/C prevention efforts within the community stemmed from the fact that the leaders of alternative rite rituals used the language of international NGOs in their rhetoric.

## **REPRESENTING PHARAONIC CUTTING AS A HINDRANCE TO MARITAL SEX**

In the *health discourse*, accounts regarding the effects of FGM/C on men constructed pharaonic cutting as a hindrance to marital sex. Men's accounts addressed problems related to penetration (especially on the wedding night), a wife's pain and related reluctance to have sex, and a wife's sexual 'insensitivity'. The physical effects on men's genitals resulting from FGM/C, such as wounds to or infections on the penis reported by, for example, Sudanese men (Almroth et al., 2001), were not mentioned during my interviews.

Marital sex is discursively constructed as a male 'performance', complicated by the seal covering the pharaonically cut vagina, and the pain following the re-opening of the vagina. In Ahmed's quote below, the husband pays attention to his wife's pain, yet, it is *he* who takes the decision to continue the intercourse or to 'give up'.

**Ahmed:** *The first night [after the wedding] that they come together and try to engage in sexual intercourse, you know, there is injury and it is reopened, the place or area that was circumcised, sealed, and cut, you know. That night, when they try to engage in sexual intercourse, you know, that place or area is injured, she may be bleeding. She may be feeling severe pain, she may feel you know a lot of pain, she may get seriously sick and then if he gives up and does not engage in sexual intercourse, it is sealed again. So, even if they engage in sexual intercourse you cannot imagine how much pain she is suffering.*

Ahmed gives the impression that the husband opens the sealed vagina through penetration. This contradicts with Ismail et al.'s (2016) notion that, in Somaliland, the reopening is primarily performed by a senior female member of the community, a traditional birth attendant, or by a medical staff member

in a hospital. Farah, in turn, suggests that the reopening of the sealed vagina (which Farah referred to as an incision) takes place in a hospital, insinuating that this reopening causes damage to the female genitals, and, hence, makes intercourse 'problematic to the men'.

**Maria:** *So, do you think that female genital cutting can affect men's life somehow?*

**Farah:** *When marriage comes, the women must go to the hospital. Then, the doctor must create an incision and then there is damage to the women, such that sexual intercourse is problematic to men.*

The men interviewed shared the view that FGM/C constrains women's willingness to engage in marital sex. In agreement with recent studies in Somaliland (Bruchhaus, 2013; Warsame & Talle, 2011), they viewed this as a disadvantage:

**Muuse:** *It is a little bit of a sensitive [topic] but a woman who is untouched is more active sexually and more preferred by a man than the one who has undergone FGM [pharaonic] or sunnah. [...] A woman who has not been circumcised, if you touch her body, or if she sees a man, her feelings will change because of some biological you know, hormones or you know. But the woman who has been you know, circumcised she may, you know, she may never accept a man to touch her hand, or she may not change her feeling. Even if she needs to engage in sexual intercourse, she may be afraid and she may not do this [intercourse], you know.*

The majority of respondents in Warsame and Talle's (2011) study in Somaliland also stated that men are beginning to prefer uncut women or women who are mildly cut due to the diminished sexual drive men associate with infibulated (pharaonically cut) women. In addition, Bruchhaus (2013) identified an emerging trend in urban areas of Somaliland and amongst educated young men to marry 'untouched' girls, also known as 'digital' girls (meaning 'modern' and 'sensitive'). In my data, the focus remained on men's sexual pleasure, and women's sexual willingness, although women's sexual pleasure was also mentioned, referred to as a 'sensation' by Abdi below:

**Abdi:** *I think they are much better, women or girls who had no FGM compared to those who have undergone FGM. Simply from the side of sensation or feeling sensation, I think, when the women's clitoris is cut, they may not feel sensation, or their sensation is reduced.*

It is not completely clear from Abdi's account whether being able to 'feel' is 'better' for the woman herself, for the male partner, or for both. At this point, we were, however, discussing the effects of FGM/C on men. Thus, I assume he means 'better' primarily for the male partner. The 'fundamental Islamic value

of women's rights to sexual satisfaction in marriage', which, according to Johnsdotter Carlbom (2002, p. 57) is sometimes mentioned when advocating for the eradication of female circumcision, does not emerge in my data. However, a man's sexual pleasure appeared to depend upon a woman's sexual pleasure, as in Ismail's narrative:

**Ismail** (CSO employee/man): *One challenge in this society is that we do not talk about romantic sexuality. I think that if that was in the discussions, people talked about how it affects the sexual relationship. Because if all the sensitive parts have been removed, and there is a scar, pain or anything, then definitely that person will not enjoy it. And then the partner may not enjoy it either.*

Whilst religious purity (that is, virginity and abstinence from premarital sex) remains the norm and girls are thus expected to strictly control their premarital sexuality, when women marry men expect them to willingly engage in marital sex and prefer that their wives enjoy marital sex. In the *righteousness discourse*, men described women as capable of controlling their premarital sexuality without undergoing FGM/C, thereby undermining 'demand' for cutting female genitals. In the *health discourse* it remains unclear to what extent men's opposition to pharaonic cutting results from the understanding that the practice has impact on *women's* willingness to and/or pleasure from marital sex. The marital sex 'element' expands the local FGM/C discourse and contributes to making FGM/C a men's issue as well. However, it primarily contributes to opposition to pharaonic cutting which is associated with health problems and marital sex problems. Furthermore, the consequences of FGM/C to men should not be emphasised at the cost of the risks to women.

### **5.3 SUMMARY AND DISCUSSION OF THE RIGHTEOUSNESS DISCOURSE AND THE HEALTH DISCOURSE**

In my data, the essence of FGM/C practices were discursively constructed and negotiated through the *righteousness discourse* and the *health discourse*. In both discourses, a clear distinction is made between pharaonic cutting as a harmful cultural practice—and, thus, the primary 'target' of anti-FGM/C activism—and sunnah cutting as a 'harmless' practice with some religious grounds. Through the *righteousness discourse*, my interviewees negotiate the religious status of the main types of FGM/C in Somaliland, on the one hand, and genital cutting as a means to prove women's religious purity (that is, virginity and abstinence from premarital sex), on the other. Sunnah cutting primarily emerges as not required by Islam, but also contradictory views emerge. This tension reflects the disagreement amongst local religious scholars regarding how to advise communities on sunnah cutting, a majority



of whom consider sunnah cutting as ‘honourable’ (that is, recommended). Even those student interviewees who construct sunnah cutting as not required by Islam appear to consider it as permitted by Islam and, hence, remain indifferent to it. They construct sunnah cutting as ‘not a big deal’—neither bringing any benefit, nor causing health problems. Accepting what is understood as ‘just pricking’ or ‘a mild invasion’ undermines women’s rights to bodily integrity. In light of my data, it remains unclear whether ignorance regarding the sunnah cutting results from a lack of information on the varying sunnah procedures (see *Table 1*) and related health consequences or due to the understanding that sunnah cutting cannot be harmful *because* it is not specifically disapproved or forbidden in Islam.

The *righteousness discourse* is firmly attached to and reproduces the righteousness ideal, the most uniform characterisation of the salient Muslim character traits which addresses both men and women (see Arat & Hasan, 2018). Whilst renegotiating women’s righteousness by challenging the dominant religious interpretations regarding sunnah cutting as ‘honourable’, religious purity (that is, virginity and abstinence from premarital sex) remains a central norm that specifically addresses women. Traditionally, pharaonic cutting was carried out to symbolise virginity in Somali society (Talle, 1993). In my data, virginity and abstinence from premarital sex are detached from all types of FGM/C and attached to chastity—covering one’s body, behaving ‘modestly’, and keeping away from men. The continued emphasis on safeguarding a woman’s premarital virginity, however, risks perpetuating FGM/C, since many people in Somaliland still consider FGM/C a culturally approved and efficient means of guaranteeing it.

The *health discourse* represents pharaonic cutting as a harmful cultural practice that causes women various health problems in both the short- and long-term. It is, however not framed as *violence* (that is, representing a violent act or act of force), but rather as a *violation* of women’s rights to health. This is problematic first, since talk about violence does not just represent norms: ‘it is (a creation of) reality in its own right’ (Hearn, 2014, p. 9). Labelling and *not* labelling something as violence entails separating legitimate violence from illegitimate violence (see Ronkainen, 2017). Second, a health approach to violence against women frames violence as a contributor to women’s poor health, whereas feminist approaches frame violence against women as a symptom of gender inequality and oppression (Flood, 2015). Furthermore, most interviewees represented pharaonic cutting as a threat only to women’s *physical* health, bypassing the long-term *psychological* and *social* effects that maintain women’s subordination. As the only student to address these issues, Yusuf described how FGM/C-related physical problems could lead a girl to drop out of school and to marry young. Later in life, as an uneducated mother, she will be unable to support her children. This sustains poverty across generations and maintains women’s dependence on marriage for their socio-economic security.

In the *health discourse*, students represented themselves as competent and legitimate. Female activists were viewed as advantaged, because a majority of people see FGM/C as a 'women's issue', which is both inappropriate for men to intervene in and a taboo topic for discussions between men and women. Furthermore, female activists are assumed to have subjective experiences with FGM/C, which grants them legitimacy. Such accounts renegotiate women's public agency and their role in preventing FGM/C instead of being viewed as victims of FGM/C alone. Yet, because positions of power are currently held by men, it appears 'rational' to engage men in anti-FGM/C efforts, thus reproducing men's domination.

In addition to women's rights to health, pharaonic cutting also represented a violation against women's 'right to marry' in the *health discourse*. Such understanding is problematic as it does not challenge women's socio-economic subordination and dependency on marriage. The emerging—yet weak—emphasis on a woman's right to bodily integrity, in turn, opens the possibility for opposition to all types of FGM/C, since it is less focused on the severity of the health consequences. This emerging support also challenges the relativist view, in which communities that practice FGM/C do not see it as violation of the body or girls' dignity. Instead, this weak *human rights discourse* supports Donnelly's (2007, p. 291) notion that '[n]o culture or comprehensive doctrine is "by nature", or in any given or fixed way, either compatible or incompatible with human rights.' The interviewees, however, highlighted the difficulty in invoking human rights arguments, particularly amongst 'ordinary people' and religious leaders.

In addition to the effects on women's health, 'right to marry', and right to bodily integrity, the *health discourse* included accounts of how pharaonic cutting complicates marital sex, particularly for men who represent the primary 'performers' of the intercourse. Uncut or sunnah cut women were portrayed as more 'sensitive' and thus more willing to engage in marital sex. This relates to idealised womanhood renegotiated through the *righteousness discourse*. The thin—yet gleaming—*sexuality discourse* together with the nascent *human rights discourse* illuminate how discursive 'codes and elements' can be combined in new ways (see Fairclough, 1992, pp. 96–97). These references also illuminate how ideologically positioned subjects can act creatively forming their own connections between diverse ideologies to which they are exposed (see Fairclough, 1992, pp. 91, 97).

## 6. DISCURSIVELY NEGOTIATING GENDER NORMS AND GENDER ORDER

As I discussed in *Chapter 3*, FGM/C is sustained by other patriarchal practices, such as women's socio-economic subordination, which renders them dependent upon marriage and, therefore, parents (specifically, mothers) feel pressured to expose their daughters to FGM/C. Thus, it is important to explore how different patriarchal structures and practices are discursively justified, normalised, and (re)produced. Whilst *Chapter 5* examined how violence against women is discursively (re)negotiated and (de)legitimated, this chapter turns to analysing how gender norms and the gender order are discursively negotiated. Here, I present the *hierarchical difference discourse* and the *masculine responsibility discourse*, which construct gendered stereotypes, roles<sup>38</sup>, norms, and ideals, as well as gender power relations. In these discourses, men assume a 'heroic position' (see Wetherell & Edley, 1999) towards religiously and culturally idealised masculinities. These discourses formulate the understandings of gender norms and the gender order by justifying rigid gender norms and a strict gender segregation through Islam and through 'natural' differences between men and women. A hierarchical gender order (men's superiority) is also legitimated through masculinist protection.

In what follows, *Sections 6.1* and *6.2* describing the two discourses are divided by subsections indicating the main constructive elements of the respective discourses. In *Section 6.3*, I summarise the discourses and discuss how they reproduce or challenge the local gender regime and prevailing masculinities.<sup>39</sup>

### 6.1 THE HIERARCHICAL DIFFERENCE DISCOURSE

Similar to the *righteousness discourse* in *Chapter 5*, I argue that religious 'investment' is quite explicit in the *hierarchical difference discourse*. In this discourse, strict gender segregation represents a 'balance', justified by Islam and emphasized gender *difference*, which entails both defining feminine and masculine as dichotomous and in opposition to one another, as well as a

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<sup>38</sup>In this study, 'gendered roles' refer primarily to gendered division of private life and work. On the contrary, 'sex roles' were employed to conceptualise masculinity and femininity in the 1970s (the male sex role consisting of distancing oneself from femininity and emotionality, striving for success through competition, being in control, and acting aggressively; see David & Brannon, 1976). The 'sex roles' approach has been criticised as insufficient in accounting for men's structural position of power and women's subordination (see *Chapter 3*).

<sup>39</sup>*Table 4* in the concluding *Chapter 7* summarises the constructive elements of the identified discourses, and the consequences for the local gender regime and prevailing masculinities.

gendered division of private life and work (see Hirdman, 1990). Furthermore, men's superiority is also justified through Islam. Women comprise not just the distinct 'other', but the 'second' in rank. Thus, I label this discourse the *hierarchical difference* discourse. In this discourse, Somaliland is characterised as a gender equal society, where violations against women's rights remain rare and are based on individual misinterpretations or non-compliance with the Qur'an. Women are blamed for jeopardising the 'balance' if they assume 'men's' (public) roles, but also for 'marginalising themselves' if they maintain the traditional (private) roles.

### **JUSTIFYING SEGREGATION AND MEN'S SUPERIORITY THROUGH ISLAM, GENDER DIFFERENCE, AND 'BALANCE'**

In this discourse, the roles of women and men are characterised as strictly separate. Women's roles remain predominantly in the private sphere where women assume responsibility for the household and the children. The public and leadership roles are reserved for men.

**Liban:** *As a Muslim community, the role of a man and the role of a woman are quite separate. The man usually goes to work. Men usually take part in politics and occupy that sector. They are usually responsible of all that is happening in the family. They are the ones who are responsible for the family. They also take part in the administration. And children, as a Muslim community, mothers are always at home raising children and at the same time doing the household work and that stuff. So, in Islam, as I believe, women stay at home whilst men work.*

Gender segregation is justified through Islam, as illustrated by Liban's explanation, where he situates his stance by referring to Somaliland 'as a Muslim community'. Most interviewees, however, agreed that changes to gender roles have taken place. In particular, women's role in the labour market and in public life in general, is expanding, as described by Guled, who noted that women's 'primary role' remains in the home:

**Guled:** *Because we are a Muslim community, there are different roles for women and men. As such, the primary role for women is to maintain everything related to the home and raising children and taking them to the school and all that is related to the house. Also, nowadays, many women participate in community issues.*

Women increasingly assume an economic role, which the interviewees associated with girls' increasing level of education, the impact of the Somali diaspora on the gendered roles, but also with high unemployment that has wiped out the income-generating potential of many men. Whilst recognising this reality, respondents disagreed as to whether the diminishing gender

segregation is welcomed. Three different positions emerged. First, some interviewees supported women's increasing economic involvement for practical reasons, such as women's contribution to income resilience:

**Yusuf:** *This is a good change, because, earlier, it was the man who was supposed to get everything for the family. But, now, there are multiple sources of income. Mothers are really there and if something goes wrong, or if some disaster happens overnight, women can go and solve it.*

Yet, those supporting women's increasing economic involvement struggled to argue their stance. Below, Aweys aims to consolidate Islam and globalisation, stating that Islam is unchangeable; but, due to globalisation, *interpretations* of Islam change, enabling social change:

**Aweys:** *Islam, our religion, tells us the role that a woman has to play and the role a man has to play in the community. So it is quite different from European culture. Two or three decades ago, it was so shameful to see a girl talking in a public place; but, right now, they love to do so, and they do not face any problems doing so. That is a development on that issue.*

**Maria:** *So, does that mean that this interpretation of Islam has changed?*

**Aweys:** *Yeah, there have been some change.*

**Maria:** *So, people somehow interpret the roles of women and men a bit differently now?*

**Aweys:** *Yeah, I think that those are the effects of globalisation. Yeah, we know the roles that women can assume in Europe and other societies, but Somalis, we just take lessons from that. In the past, we did not know about that, but right now we know. Still, Islam is as it was, but people change their attitudes.*

Second, some interviewees appeared hesitant about accepting the loosening of gender segregation, continuing to weigh the pros and cons. In keeping with El Feki, Heilman, and Barker's (2017) study on masculinities in the Middle East and North Africa, and Levto et al.'s (2014) study on men's attitudes and practices towards gender equality in low- and middle-income countries, the men I interviewed expressed a mixture of equitable and inequitable attitudes. They supported women's education and economic involvement, but remained overtly critical of women assuming a leadership role:

**Maria:** *Do you think that the change [in women's roles] that you mentioned and described, do you think it is good or bad?*

**Muuse:** *In my opinion, it is somehow good, somehow not good. It is good when women learn something and when they come outside. It is good for the family, the fathers or the husbands of all Somali families. Most of them [families], their daily income is increased by women, because she works outside [the home]. So, at that part, it [women's extended role] is good. And regarding learning, it is good. But when it comes to leadership, it is not good for a woman to lead the nation. I do not know if you heard that there was a woman who tried to launch a political party. She was refused, and I agree with that because if she becomes, you know, president, you know, it is not good. In our Somali society, we do not encourage woman to lead the nation. So, in that sense, [women's extended role] is not good.*

Muuse's account reflects NAGAAD's (2019, p. 7) findings that, despite progress in girls' school enrolment and retention rates in Somaliland, 'the value of girls' education is persistently linked to their reproductive role, with the expectation that educated mothers will raise educated children.' Few focus group participants in the NAGAAD study linked girls' education to the increased potential of an educated woman to enter the labour market and pursue self-fulfilment. Moreover, NAGAAD's results suggest that, whilst women who work outside the home are admired for shouldering the double burden of housework and livelihood activities, their employment is largely viewed as a substitute for the male head of household's capacity to provide. Supporting women's rights to education as 'it is good for the family and the husband' is problematic, since it reproduces women's traditional role at home and represents women's education as a means to prepare girls for marriage and motherhood instead of responsibilities associated with paid work. Thus, society loses the competence and skills of many women that could be otherwise available in the public and organisational spheres, including in management and leadership positions (see McKie, Biese, & Jyrkinen, 2013).

Whereas women's rights to health and bodily integrity (that emerged as a part of the *health discourse* in Chapter 5) was not attached to the Qur'an, the *hierarchical difference discourse* attaches women's rights to the gendered roles prescribed by the Qur'an. Women are, thus, viewed as enjoying comprehensive rights, and asking for further rights (or roles) is unacceptable:

**Hussein:** *In Somaliland, we believe that the rights of women are already granted by the Qur'an or religion. Every person believes that it is unacceptable for women to fight for additional rights. [...] If the woman says that she is going to be the president of this country, it cannot be accepted. Ministers, MPs, or the head of a department or other high positions that can interfere with domestic work [are not acceptable]. So, most of the community prefer mothers to work in the home [...]. And, the men work outside the house. So, gender inequality only exists when the Somali community does not apply what their religion dictated to them.*

That women's access to higher positions appears highly restricted whilst there is some loosening of the exclusionary strategies (that is, excluding women from *locations* of power) signifies a transformation from the domestic form of patriarchy to public patriarchy, where patriarchal strategies are collectively held and aligned to segregate women into *positions* of less power and influence (Walby, 2011, p. 105).

Above, Hussein's reference to consensus ('every person believes') and to Islam exemplify how taken-for-granted gendered assumptions and hegemonic power relations are discursively reproduced as commonsensical and natural (see Lazar, 2007, p. 147). Such arguments serve as a powerful means to defend and reproduce the status quo, which excludes women from positions of power, including the power to (re)interpret religious texts, and thus reconstruct the prevailing gender norms and gender order.

Both in Hussein's narrative above and in Omar's below, concern for housework and childcare also serve to justify women's exclusion from public activities. Omar associates women's work outside the home to the neglect of children and the destruction of homes:

**Omar:** *Every change has its good and bad sides. It is good, I think, for women who are participating in community activities, who are participating and contributing to the economy, to have new roles and status in the community. But it may also have a bad impact. When women go out, the children may not get the care they need. The families may be destructed somehow, I think.*

Third, some interviewees expressed support for the perpetuation of a rigid gender segregation, which they justified through religion. In Muslim societies, husbands traditionally assume the roles and responsibility related to economically supporting their families, whilst wives assume the roles and responsibilities of raising children and housework (Akar & Tiilikainen, p. 18). Guled and Leila reproduced such understandings:

**Guled:** *Women's life is not like in the past. They are entering into community life. Earlier, all [women's] roles concerned the home, but now they are in public. And, as Muslims, we do not support this culture.*

Leila also represents women and men as fundamentally different and assigns them different roles, whilst considering them equal. Segregation parallels 'balance':

**Leila (woman):** *As a Muslim community there is, there is a difference between a man and a woman. So, a woman and a man cannot be the same. Each one has his own role and they cannot be the same. But there is no inequality (translated).*

In the *hierarchical difference discourse*, not only gender segregation but also men's superiority is justified through Islam. As Connell (2005a) argued, many ideologies justify men's supremacy on the grounds of, for example, religion, biology, cultural tradition, or an organisational mission. In the interviewees' accounts, women comprise not just the distinct 'other', but the 'second' in rank:

**Naima** (woman): *Gender equality, it is, it is different. When we say gender, we mean male and female, so in our Islamic [society] male is first.*

By claiming that gender equality is 'different' in Somaliland, Naima suggests that a strict gender segregation and men's superiority do not jeopardise gender equality; they just render it 'different'. Naima's explanation also illustrates how gender equality parallels the 'balance' between those separate roles and exemplifies the local 'gender contract' (Hirdman, 1990), which women support even if it positions them as inferior.

Representing gender equality as a 'zero-sum game' was also used to justify strict gender segregation. Some of the men interviewed presented the improvements to women's labour market status as simultaneously weakening men's positions. Muuse, for instance, complained that some employers favour women and discriminate against men through their recruitment policies:

**Muuse:** *The job has qualifications and conditions. These qualifications include knowledge level, experience, and similar things. Finally, they said you know, women are especially encouraged to apply. So, that means, if the job needs one person and, in the end, there remain two persons—a man and a woman—it is common that the woman will succeed, because she is already mentioned. So, in that way, there is gender inequality.*

The norm of the man as the single breadwinner along with the current situation in Somaliland, featuring record-high unemployment (see *Section 2.2*), contribute to men's fears of losing their 'patriarchal dividend' (Connell, 1987). If international organisations offering lucrative contracts adhere to affirmative action supporting women's careers, men have even more 'to lose'. Thereby, the lack of support for expanding gender equality in the labour market amongst academically educated young men may *stem from*—not despite—their relatively solid employment prospects compared with many other young people in Somaliland.

## **DENYING INEQUALITY AND BLAMING THE VICTIM**

In the *hierarchical difference discourse*, gender segregation does not imply gender inequality. Quite the contrary, as Liban demonstrates. Unsettling the



‘gender balance’ appears to *lead* to gender inequality. Accordingly, women are accused of taking over ‘men’s roles’ and, thus, causing inequality:

**Liban:** *There is not that much inequality in Somaliland. Everybody has a role and inequality happens when men assume the role of women and women assume the role of men. And if there is inequality, it is the women who take over some of the roles of men. For example, women moving from their role in the house and going to work leads to slight inequality (translated).*

In the global North, Walby (1990, p. 108) claims the ideologies of femininity and masculinity have shifted from the justification of difference through a naturalising ideology to an approach that denies the extent of inequality. Furthermore, ‘the patriarchal ideology shifts from the open exclusion of women as “naturally” different, to one of denying the extent of women’s disadvantages and denying that women’s slight “underachievement” is a result of discrimination’ (Walby, 1990, p. 108). In the *hierarchical difference discourse*, the justification of difference and denial of inequality emerge simultaneously.

Women’s exclusion from leadership positions is further downplayed by representing them as ‘important change makers in society’, working behind the scenes and making their husbands ‘more of a man’, as Naima argues:

**Naima (woman):** *Women are the only ones who can change the society at large. They have the power to make a man more of a man or less of a man.*

**Maria:** *I would like to hear more about that. How does it happen? How can a wife make somebody more of a man?*

**Naima:** *Simply by sharing information, telling something, helping with what he is doing and giving some support. They [wives] can do many things for him [husband]. They can do many things at home, change community and workplaces. Women can do everything in their power, so women are the main changers in society.*

Naima’s view reflects El-Bushra and Gardner’s (2016) findings that, in Somaliland, women prepare their husbands for important clan meetings by feeding them properly, by counselling them, sharing ideas with them, and advising them on the issues under consideration. NAGAAD (2019) found that women are perceived as supporting but not leading in Somaliland. Women are known, for instance, for advocating for a certain male representative, whilst opportunities to exert their constitutional right to political participation remain ‘slim to non-existent’ (NAGAAD, 2019, p. 7). Representing women as content with their unofficial power positions echoes the concept of a gender contract (see Hirdman, 1990), which women support even if it positions them as inferior.

Whilst Somaliland was discursively constructed as gender equal, examples of gender inequality consisted of women assuming 'men's' roles (see above) and women being denied the 'rights' (roles) assigned to them by Islam. In the latter case, gender inequalities or violations against women's 'rights' were constructed as individual failures and ascribed to misinterpretations or non-compliance with Islam. Such complaints primarily centred around women's rights to education, exemplified by parents who encourage their sons to study, whilst daughters are married off; and 'wasted' husbands who do not allow their wives to leave the private sphere:

**Jama:** *In terms of education, women are usually asked [by their parents] to marry when they finish secondary-level education or when they finish their Bachelor degree. They are discouraged to continue their studies. That is inequality (translated).*

**Muuse:** *Some husbands, you know, they are wasted, and ask their wives to stay at home and go nowhere, to stop their education. And some of them allow her to study, but when she finishes, she has to stay at home. And, there are even, you know, a majority of men do not allow their women to go outside. A majority of men in our society do not allow her to go outside.*

Somewhat contradictory, women were also accused of marginalising themselves and just 'waiting for marriage', as we see in Muuse's narrative below. Here, he suggests that women enjoy equal opportunities to study and work, but they *choose* to stay at home:

**Muuse:** *In our society, girls believe that education is not good for them. They only go to school and universities to pass time. [...] We can prove that when the woman gets married, she stops education. For example, if she was at the middle of the university and gets married, she stops. That shows that she was staying only for marriage. She was waiting for marriage. And men believe that they have to lead the country and the nation. They have to proceed [with] their education even to a PhD level.*

'Blaming the victim' ideology (Ryan, 1976) places the blame on women for the injustice that befalls them. Muuse's account also echoes what Hopkins' (2006) labels as 'a form of sexist equality' amongst young Muslim men of Pakistani heritage in Scotland. These men express sexist stereotypes about women's natural place remaining in the home, whereby they attempt to justify that Muslim men are expected to work, earn wages, and provide for the family. In their view, Muslim women are not victims of an oppressive culture nor marginalised by their religion, but responsible for their subordinate position because 'they will not engage in any form of employment' (Hopkins, 2006, p. 341).

## 6.2 THE MASCULINE RESPONSIBILITY DISCOURSE

In the *masculine responsibility discourse*, men's superiority is justified through men's 'heavy responsibilities'. Women are characterised as needing men's protection. This discourse is firmly attached to and reproduces the idealised 'Somali manhood' (El-Bushra & Gardner, 2016) geared towards a man's responsibility for his family (see *Section 3.5*). The interviewed young men claimed to possess unique power as anti-FGM/C advocates through their impact on marriageability preferences, the content of which they renegotiated in the *righteousness discourse*. However, these men also complained that they have insufficient resources for campaigning against FGM/C, and that they lack authority and support from other men, particularly those well-positioned to fight against FGM/C.

### JUSTIFYING MEN'S SUPERIORITY THROUGH MASCULINE PROTECTION

In the hierarchical difference discourse the normative grounds for men's superiority were derived from interpretations of Islam. In the masculine responsibility discourse, men's superiority is derived from a man's extensive responsibilities prescribed by religion and supported by the cultural notion of a good man 'ordained by God as responsible for the family, its leader, manager, and shield' (El-Bushra & Gardner, 2016, p. 448). In this discourse, men extend the 'shield' to protect women from FGM/C, assigning such responsibility to each man, whether he is engaged in spheres related to culture, religion, politics, or academia:

**Ahmed:** *The role of young men in this [anti-FGM/C] campaign is to first start from themselves, raise awareness, then convince the community, make society understand that this is a wrong action and came from the wrong place. The men, you know, have more roles as cultural leaders, religious leaders, students, you know, as government politicians, all this. Every man is responsible for his place, for his unique area.*

Similar understandings were put forth by Johnsdotter Carlbom (2002, p. 146) amongst Somalis in exile in Sweden. Amongst her informants, there were both men and women who talked about men's 'moral obligation to take part in the decision-making concerning daughters [and FGM/C]' and about men's responsibility to work against the harmful tradition, even if the practice was understood as belonging to the 'sphere of women'.

Sexist accounts that represent women as in need of protection and special treatment—camouflaged as ways to show women 'respect'—feed masculinist protection. Abdi, for instance, explains how handing over one's chair to a woman in a classroom or giving way to women on the street shows respect for women, and comprises 'sacrifices' not granted to other men:

**Abdi:** *If you take a car while you are on the road, if you see some girl standing at the corner of the road. If you see a majority of people, they can stop. If you are a man or standing like that, they may pass. [...] When you are in class, if a girl enters the class late and all of the chairs were full, you [as a man] may stand and give her your seat. It is a kind of respect.*

Sexism serves to justify paternalism and masculinist protection by a benign and virtuous man who safeguards those in subordinate positions needing protection (see Young, 2003). Simultaneously, 'masculinist protection works to elevate the protector to a position of superior authority and to demote the rest of us to a position of grateful dependency' (Young, 2003, p. 13). Accordingly, men's superiority is justified by a man's substantial responsibility for his family. Omar summarises this succinctly:

**Omar:** *In the family, the man is considered as the top of the ladder. Yeah, he is the one who is responsible for the family. And the mother comes second.*

In addition to physical protection, paternalism and masculinist protection also imply economic support. As I showed in the *hierarchical difference* discourse, the norm of male breadwinner remains strong: men alone are expected to provide for their families. Sharing responsibility for the subsistence of the family does not increase women's status. Instead, it primarily adds to their responsibilities, whilst the husband may be accused of neglecting his family, as Abas describes below.

**Abas:** *If you go to the market, Hargeisa market, you will see some or many women working in the market. So, we can assume that their men are irresponsible or that they neglect their responsibility [to support the family].*

The male 'work norm' reflects the female 'purity' norm, in that the honour of the individual man as well his whole family is at stake. Abas posits this here:

**Abas:** *I think everything that is needed in the family, he [husband] must provide as I think or as I believe. [...] If the man is not working, even his family will not be respected, or they will say you are neglecting [your family].*

El-Bushra and Gardner (2016) point out that a man's economic standing is also important, because he must fulfil his clan obligations. They note that men and boys embody clan honour and prestige, and if they constantly fail to contribute their clan dues or bring about dishonour, their access to clan-based resources and security are likely to diminish. Furthermore, a man's economic standing is important, as the male students believed, since that is women's first priority regarding their future husband.

**Muuse:** *So, the first thing that most women, not all of them but 90% of women now in Somaliland, their first preference is money. The next thing is knowledge. They respect a knowledgeable person. The third thing is a handsome boy. These three are their preferences. And the fourth one is the tribe.*

Whilst the female interviewees partially confirmed the importance of a man's economic standing as a marriageability criterium for young women, they also presented childcare and household chores as part of the husband's responsibilities. Farah labelled men's neglect of household chores as a violation against women:

**Farah:** *For example, women do everything in the home. She cooks the food and does the housework, but men are a bit too proud to do the housework. So that is a violation against them [women] (translated).*

In Habiba's understanding, (some) younger men are beginning to see household chores as a shared responsibility between spouses:

**Habiba** (woman): *In our community, most of the fathers say [to their wives]: 'This is your children, raise them.' They do not take responsibility in raising them [children]. So even when he talks to his children, he says go and call for your mother.*

**Maria:** *Are there any changes that you expect now with the younger generations or do you think that will remain the same?*

**Habiba:** *No, there is a little change lately, like those parents who have young children. I think they have changed their mind about responsibility and fathers now raise children with the mothers. But, old fathers, they prefer not to interrupt [participate in] their children's life.*

Thus, the female interviewees attempted to renegotiate the concept of masculine responsibility. Yet, contradictory accounts also existed, whereby, for instance, Guled showed no interest in expanding a man's role, stating that 'a man's role at home is to give money to the wife and check their children's education.'

## **BLAMING 'OTHER' MEN FOR IRRESPONSIBILITY**

In the *masculine responsibility discourse*, men represent themselves as highly responsible and dutiful, thereby aligning strongly with the idealised 'Somali manhood' (El-Bushra & Gardner, 2016). Ahmed, for instance, described how he could not 'keep silent' about the harm FGM/C causes society:

**Ahmed:** *I am one [member] of society and the community, you know, I feel its pain and its problem, and I see how it [FGM/C] affects society and the problems it causes. There is no way that I can watch it and not say something about it. There is no way that I can keep silent. I must do whatever I can to contribute to the fight.*

From a practical perspective, men's public declarations regarding their marital preferences—the approach that inspired my thesis (see *Chapter 1*)—could be leveraged to challenge FGM/C. In Somaliland, where women largely depend on marriage for their social security and status, and parents thereby aim to ensure that their daughters are marriageable (see Luedke, 2018), informing the parents that young men no longer expect their brides to be cut can contribute to parents rejecting the practice. This opportunity was identified by the men I interviewed, who characterised marrying an uncut or sunnah cut woman as the 'responsible choice'. Mahad and Hussein, for instance, declared that after receiving information on the health effects of FGM/C, they stopped dating girls who had undergone FGM/C. They argued that if parents were informed about such preferences, those parents would stop cutting their daughters:

**Mahad:** *Before we attended the training, we used to date some girls who had undergone FGM. But since we now understand the problems of FGM and we learned new information about FGM, we no longer date women who have undergone FGM.*

**Hussein:** *Some people believe that if [they] arrange FGM for their daughter, she will marry. So, if now any woman or any young girl who undergoes FGM will not be married, they [parents] will stop [cutting their daughters].*

Muuse goes further by suggesting that the 'rejected' girl could herself deliver the message to her parents, who would then leave the younger daughters uncut:

**Muuse:** *What I can also do is that when, you know, for example, we have a courtship or conversation with girls before marriage. So, we always have to ask the woman if she has been circumcised or not. If she is circumcised, I stop the conversation with her. So, I always tell her that the main reason I have left her is that [she underwent FGM/C]. So, when she realises the reason that I left her, she may take the information and go back to her house and she may, you know, deliver the message. And thus they [the parents] should not perform [FGM/C] on her sisters, because the sisters will be left as I left her.*

These quotes highlight the unscrupulousness of emphasising young men's preference to marry uncut girls, raising ethical concerns about the double victimisation of women who underwent FGM/C. Beyond the eventual lifelong

health problems caused by FGM/C, (pharaonically) cut women risk remaining unmarried because of the very procedure that was supposed to guarantee their marriageability. The quotes above echo Castelino's (2013) arguments regarding men involved in violence prevention who position themselves as 'good men'. Such men may place their own relationships with women beyond critical assessments and neglect the privileges that men in general receive in patriarchal contexts. Similarly, Flood (2015) noted that when men involved in violence prevention frame themselves as virtuous (that is, strong, or courageous, or bold), that framing may foster anti-patriarchal masculine identities. It may also exclude women and discourage critical self-examination.

Furthermore, beyond emphasising their 'unique' position as anti-FGM/C advocates through their impact on the marriageability criteria, men also emphasised their responsibility compared to other men who were believed to have competence and authority in promoting the eradication of FGM/C. First, medical and public health professionals were characterised as well-positioned to educate the community about the negative health effects of FGM/C. Participating in FGM/C prevention represented not only a masculine, but also a professional obligation. Accordingly, the students I interviewed disapproved of medical students and medical professionals who promoted their careers ahead of community interests:

***Abdi:** Our problem really when we are finished with our studies, we always place the priority at getting a job with a high salary. [...] they forget their responsibility for their people and for their country, which is why you cannot see any students who make a collective effort as volunteers and talk about FGM.*

As in Abdi's account, raising awareness on FGM/C represents an altruistic 'responsibility for one's people and country' that should be prioritised over selfish career pursuits. My informants, however, accused medical professionals of avoiding their 'duty' to raise awareness:

***Aweys:** [Medical] doctors that are present in Hargeisa right now, they can do it [advocacy against FGM/C] more easily than any other people, but they do not take that into consideration. They just treat [their patient] and leave and go and treat people, so they do not engage in public awareness.*

Second, religious scholars were also accused of 'not having enough knowledge of the religion' and, thereby, misinterpreting the status of FGM/C in Islam:

***Omar:** And some scholars, I think the older sheiks [men with extended knowledge of Islamic theology] and religious scholars believe that it [FGM/C] is part of the religion, because they do not have enough knowledge of the religion. They have only the basics; they do not have*

*extensive knowledge of the religion. So, they may say it [FGM/C] is part of the religion, but it is not a part of it.*

Here, Omar presumably points at the minority of religious leaders who promote pharaonic cutting.<sup>40</sup> Religious scholars were also represented as lacking the courage to publicly declare their opposition to FGM/C. This is reflected in Fadumo's narrative, where she suggests that religious leaders face social pressure to confirm other religious scholars and, thus, provide different advice in private consultations compared to their public statements:

**Fadumo** (CSO employee/woman): *If you go to any religious leader, they tell you it is a family decision, to cut or not, but they cannot speak it publicly because of the other religious leaders.*

Third, traditional leaders and the elderly represented important gatekeepers in the prevention of FGM/C in Somaliland:

**Omar:** *Yeah, they [young activists] may face some difficulties about that [FGM/C] issue and people do not respect young people in the same way that they respect old people and the elderly in the community. So, young leaders, young activists who work on this issue always use religious leaders and community elders to open the discussion.*

Along a similar vein to health professionals and religious leaders, the parents' generation and the 'elders' (the most respected seniors) were accused of selfishness and of 'not giving a hand to the youth' in their efforts to prevent FGM/C, as Ahmed accuses:

**Ahmed:** *[I]f the generation of this time, the youth, if they get the ability or the power or, you know, gain power and share in the fight to stop or eradicate FGM, you know, there is an obstacle which they face. You know, it is elders or parents, if they are, you know, politicians, government officials, traders, you know, every sector of the society, you know. They are not lending a hand to the youth regarding how to fight it [FGM]. Everybody is thinking about his interest but is not giving more attention to this.*

Cooney (2014), in a study of family honour, suggests that gerontocracy (elderly rule) represents one of the three entrenched forms of stratification in addition to patriarchy (male rule) and corporateness (group rule). Aligned with his concept of gerontocracy, 'age is equated with wisdom and power is correspondingly placed in the hands of older people' (Cooney, 2014, p. 95) in Somaliland. Young men are expected to accept the authority of older men (El-

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<sup>40</sup>According to Newell-Jones' (2016, p. 42) investigation, amongst the 18% of religious leaders who considered pharaonic cutting as 'honourable', most were older men from rural communities. Newell-Jones' (p. 43) investigation also revealed that religious leaders are not particularly knowledgeable about the current legal status of FGM/C: only 8% were aware that there are no laws on FGM/C in Somaliland.



Bushra & Gardner, 2016), illustrating the different (power) position where men, too, are located within patriarchies. Likely frustrated about their position in relation to older men, NAFIS (2014) found that men and male youth posited that ‘intelligent’ and ‘knowledgeable’ people should take the lead in challenging FGM/C in Somaliland (in contrast to the majority of respondents who called for religious leaders, medical doctors, political leaders, and clan leaders/elders to take the lead).

Fourth, the individuals I interviewed questioned the sincerity of the NGO and CSO employees working against FGM/C. These employees were blamed for being paid for their efforts. In contrast, volunteering for the same purpose signified proof of good will and credibility, as exemplified by Abdi:

**Abdi:** *Really these people who are talking about FGM, a majority who are from NGOs, those who have a large interest in FGM. They get a huge benefit, they are working like that, but you cannot see someone who is working as a volunteer. The people are surprised if you say you are working as a volunteer.*

In the eyes of the target communities, (international) NGOs often lack good will in the sense of sharing similar interests or sharing descriptive characteristics (see Mackie and LeJeune, 2009). However, many communities are prepared to welcome collaborative assistance from outsiders who address issues that communities themselves consider priorities (see Prazak, 2007). In many communities in Somaliland, inadequate access to water and health services are considered ‘real’ problems (unlike FGM/C), the mitigation of which permits credibility and legitimacy to actors, including NGOs and CSOs, who deliver solutions to such problems. Students, however, lack such leverage, Abdulle claimed:

**Abdulle:** *The thing is that they [target audience] will ask you what you have, what can you do for them [FGM/C victims] right now. You can stand in front of Mansoor [popular conference venue in Hargeisa] and then you can take a microphone and say something about the girls. Some of them will think about you positively, while others will think about you negatively. Then, they say this man is crazy or he is getting mad. Some people may think that, while others will come and ask, ‘Do you have anything for girls to pursue?’ Then, it will be a challenge for you.*

**Maria:** *Do you mean that people ask for concrete improvement suggestions?*

**Abdulle:** *Absolutely, and if you do not have any power to give girls something, you cannot just continue anything.*

Young men advocating against FGM/C also presented themselves as lacking respect, even if they find themselves ‘at the height of responsibility.’ They

argue that the local community supports and respects people who address issues considered 'real problems', such as a lack of water, corruption, and health problems.

**Hussein:** *[E]very person who does a good deed or issue will have support from the community. Every person who prevents harmful issues is respected, not those like this [FGM/C] that are sensitive and based on religion and culture, but others like campaigning for water or campaigning against bad health and corruption.*

Lack of respect towards anti-FGM/C activists reflects Shell–Duncan and Hernlund's (2000, p. 24) notion that anti-FGM/C activists and advocates often campaign against a practice that is fully legitimate amongst local people. Accordingly, in the *masculine responsibility discourse*, the students described how their good will was questioned and they have been accused of adapting Western values whilst they themselves see (pharaonic) FGM/C as a national health concern and their activism as an act of responsibility:

**Guled:** *Many people believe that there is an under the table purpose to eradicating FGM. [...] like this project is from the West or this project has another purpose like supporting women to move far from religion.*

The response from the community that Guled describes is quite similar to, for example, that illustrated by Hernlund (2000, p. 245), who writes about Gambia and argues that campaigns to eradicate FGM/C are often seen by proponents as rooted in outside influences, and campaigners accused of trying to get money or destroy the local culture. Such questioning—sometimes even by their family members—contrasts with the responsibility that anti-FGM/C activists themselves attach to their campaigning. Whereas the interviewees accused medical professionals, and religious and traditional leaders of betraying their 'duty' to protect women from FGM/C, the activists themselves were accused of betraying their culture or religion or both.

### **6.3 SUMMARY AND DISCUSSION OF THE HIERARCHICAL DIFFERENCE DISCOURSE AND THE MASCULINE RESPONSIBILITY DISCOURSE**

In my data, prevailing gender norms and hierarchical gender order were reproduced in many ways through the *hierarchical difference discourse* and the *masculine responsibility discourse*. The *hierarchical difference discourse* locates women and men in strictly separate 'roles' and spheres: women in the private sphere and men in the public sphere, a separation justified through Islam, 'natural' differences between men and women, and 'balanced' gendered rights and responsibilities as understood to be prescribed by Islam. Interviewees, however, claimed that changes have occurred, particularly

regarding women's expanding economic roles. In addition, some flexibility emerged in how they interpreted gender roles. Some of the young men accepted women's increasing economic role, explaining that women are now more educated and thus capable of and 'entitled' to enter new fields, and since women's participation in the income generation strengthens family resilience. Others were hesitant, appealing to the roles prescribed by Islam. There was, however, conformity vis-à-vis restricting women's access to higher positions, signifying a transformation from domestic patriarchy to public patriarchy. The former relies on exclusionary strategies, whilst the latter uses strategies that segregate women in the public sphere into positions with less power and influence (see Walby, 2011). Such a transformation—supported by, for example, gendered ageism and notions of men as 'natural' leaders—persists in other parts of the world. In, for example, Finland, which enjoys an international reputation for gender equality, many women's careers stall in middle management (see Jyrkinen, 2014; McKie et al., 2013).

In some of the accounts in my data, Islam and globalisation were discursively consolidated to justify the change in gender roles, signalling how subjects are 'capable of acting creatively to make their own connections between the diverse practices and ideologies to which they are exposed' (Fairclough, 1992, p. 91). In other accounts, women's education and economic roles were only supported as 'good for the husband and the family'. Such an understanding risks reproducing women's traditional roles in the private sphere, and therefore, dependence on marriage. Yet, employing such instrumental arguments can be interpreted to imply that men attempt to comply with the righteousness ideal, and thus use religiously acceptable arguments when supporting women's extended rights and roles.

Representing gender equality as a 'zero-sum game' also justifies strict gender segregation. In these accounts, improvements in women's labour market status—in particular, through affirmative action enhancing women's careers—appear to discriminate *against men*. However, affirmative action that supports women's employment is justified in Somaliland, where women are at an impasse between two forms of 'expropriation' (see Hartmann, 1979, 1981): within the field of paid work, occupational segregation maintains their access to the best-paid jobs; and within the household, women do more labour than men, even if they also engage in paid employment. Hartmann argues that these two forms of expropriation reinforce each other, since women's disadvantaged position in paid work renders them vulnerable in arranging marriage, whilst their position within the family disadvantages them in paid work.

In the *hierarchical difference discourse*, Somaliland is presented as a gender equal society, given the 'equal' rights and responsibilities prescribed by Islam. Women appear as powerful change agents 'behind the scenes', which downplays the need to promote women's formal decision-making power. In some accounts, women are blamed for disrupting the 'gender balance' through claiming rights (or roles) which are not understood to be prescribed to them

by Islam. Women are also blamed for marginalising themselves and 'preferring to stay at home' instead of pursuing work outside the home. In general, women's discrimination in education and paid work is, however, attributed to 'ignorant' parents and husbands instead of structures and practices that favour men.

Hirdman (1990) claims that a gender system based on strict segregation and the oppression of women inevitably creates incongruities and provides opportunities for agency. Similar to such notions, Glas, Spierings, and Scheepers' (2018) study on patriarchal socialisation in Muslim Middle Eastern and North African countries shows that, whilst people are embedded in dominantly patriarchal religious structures, they are not solely or uniformly passively socialised by religiosity. Instead, people reinterpret their religion and, thus, actively deviate from patriarchal interpretations. Often, women and highly educated citizens are at the forefront of renegotiating any religiosity–gender inequality coupling (Glas et al., 2018). In my data, examples of this type of renegotiation emerged from women's accounts, which presented childcare and household chores as responsibilities spouses share.

However, the embeddedness of the 'gender contract' and 'gender ideology' in religion makes them particularly stable in Somaliland, concentrating the power to interpret and renegotiate in the hands of those who possess religious authority—that is, primarily men. Viewing men's domination as divinely ordained provides men with 'invisible power', which is more potent as deeply internalised rather than explicit power (El-Bushra & Gardner, 2016). Therefore, the masculine responsibility ideal at best produces masculinist protection instead of supporting women's increasing decision-making power over their own bodies, and over private, nonetheless public affairs. This emerged in the other discourse that constructs gender norms and gender order in my data, the *masculine responsibility discourse*, whereby men's superiority was justified through men's wider responsibilities towards their nation and family—especially the masculinist protection and economic support that men (are expected to) offer women.

In the *masculine responsibility discourse*, men represented their activism as fulfilling their responsibility—as men and as professionals—thereby strongly aligning with the idealised 'Somali manhood' which emphasises responsibility, protection, and care for one's family and country (El-Bushra & Gardner, 2016). Men emphasise the 'leverage' that nubile men possess in anti-FGM/C work through their impact on marriageability criteria. They thus represent themselves as in a unique role with special responsibility in preventing FGM/C. Utilising this leverage, however, entails the risk of double victimising (pharaonically) cut women if they are left unmarried and thus socially ostracised because of the very procedure aimed at securing their marriageability and social status. Furthermore, to only change the content of women's marriageability prerequisites does not challenge women's socio-economic subordination and dependency on marriage.

In the *masculine responsibility discourse*, ‘other’ men with power and legitimacy (often older men) were characterised as not fulfilling their responsibility to challenge FGM/C. In complying with the responsibility ideal that for my interviewees implies challenging a practice valued by many older men, young men renegotiate the submissiveness ideal that guides young Somali men to accept the authority of older men (El-Bushra & Gardner, 2016). The men I interviewed also identified a controversy between their ‘responsibility’ to prevent FGM/C and the community that questions their motives. Another controversy facing men engaged in FGM/C prevention appears to lie between the religious righteousness ideal (Aarat & Hasan, 2018), which guides men to follow religious prescriptions—or religious scholars’ interpretations of them—and the responsibility ideal (El-Bushra & Gardner, 2016), which guides men to protect women and children. In my data, young men seemed to handle the dissonance by categorically labelling any practice understood as required or not specifically disapproved/forbidden by religion (here, sunnah cutting) as not harmful, as I showed in the *righteousness discourse*. There is also a controversy in that men’s domination is discursively reproduced by people aiming to prevent FGM/C, a practice maintained by hegemonic power relations. I argue that this is due to the understanding of Somaliland as a gender equal society with ‘well-balanced’ gender roles and responsibilities, and framing of FGM/C as primarily a health issue—not a gender equality issue or an issue related to gendered violence. Furthermore, young people’s agency in negotiating gender norms and power relations remains quite restricted.

## 7. CONCLUSIONS

My research interest was to gain a deeper understanding and problematising of the engagement of young men in the prevention of FGM/C. Focusing on discursive practices, this study examined how young men engaged in preventing FGM/C in Somaliland discursively negotiate violence against women, gender norms, and the gender order. Secondly, I examined whether these negotiations are consistent with the goals related to deconstructing the patriarchal gender regime, on the one hand, and with the prevailing masculinities, on the other. Data were collected through semi-structured individual interviews and analysed using critical discourse analysis, attempting to illuminate the complex workings of power and ideology in discourse sustaining (hierarchically) gendered social arrangements.

In the first section of this concluding chapter, I summarise the four discourses I identified and encapsulate the answer to my research questions: How do young men engaged in preventing FGM/C discursively negotiate the essence of FGM/C practices, gender norms, and the gender order? How do these discourses (re)produce or challenge violence against women, prevailing gender norms, and the hierarchical gender order? In *Section 7.2*, I discuss the theoretical and practical contributions of this study. In the final *Section 7.3*, I provide some afterthoughts, discuss the limitations of this study, and outline suggestions for further research.

### 7.1 SUMMARY OF FINDINGS

The interviewees produced four partly overlapping discourses which carry consequences for the patriarchal gender regime and prevailing masculinities in Somaliland since they (re)produce and challenge violence against women, prevailing gender norms, and the hierarchical gender order. In the *righteousness discourse*, sunnah cutting appears to be understood as primarily ‘not required’ against the dominant view of the local religious scholars who find it ‘honourable’ (that is, recommended). Violence against women in the form of FGM/C and related health consequences are, however, accepted when the violent act is viewed as required or not specifically forbidden by Islam—such as the case of sunnah cutting. Whilst renegotiating women’s righteousness by challenging the understanding of sunnah cutting as ‘honourable’, a woman’s religious purity (that is, virginity and abstinence from premarital sex) remains a norm in the *righteousness discourse*. It is, however, detached from all types of FGM/C and attached to chastity—that is, ‘modest’ behaviour and clothing, as though ‘veiling’ oneself physically and figuratively.

Within the *health discourse*, pharaonic cutting is understood as a harmful cultural practice and as a violation against women’s rights to health—not as a

violent act or an act of force. Pharaonic cutting is, thus, constructed as the primary target of FGM/C activism. In addition to women's rights to (physical) health, pharaonic cutting represents a violation against women's 'right to marry' because it 'disadvantages' them compared to uncut or sunnah cut women who do not suffer similar physical and psychological problems. Furthermore, *not* being cut (at least not pharaonically), and therefore, suffering fewer health problems and being sexually willing to engage in and 'sensitive' during the marital sex, constitute part of the idealised womanhood in the *health discourse*. Besides the right to health, and the 'right to marry', a nascent emphasis exists on women's rights to bodily integrity and self-determination. 'Ignorant' mothers are identified as the primary perpetrators, whereas women appear to possess a 'competitive edge' as anti-FGM/C campaigners given their subjective experiences undergoing FGM/C. Men, however, represent 'self-evident' anti-FGM/C campaigners as 'natural leaders'. Young men, specifically, represent themselves as well-positioned through power over marriageability preferences.

Within the *hierarchical difference discourse*, rigid gender segregation and men's superiority are justified through Islam and 'natural' gender difference. The interviewees comply with the Islamic righteousness ideal and reproduce Islam as the dominant 'gender ideology', which they believe produces equality. Somaliland is, thus, represented as a gender equal society, characterised by the different yet equal and 'balanced' gendered rights and responsibilities as understood to be prescribed by Islam. However, rigid Islamic interpretations are also renegotiated, thereby justifying women's education and expanding roles in paid work given various economic realities and modernisation, and as something 'good for the family'. Women's access to higher positions within society is, however, unanimously excluded. Furthermore, gender equality represents a zero-sum game, where men lose if women are recruited to 'men's' (higher-ranked and better-paid) jobs. That women's labour market participation remains low even amongst lower status jobs places blame on the parents and husbands, who are presented as discouraging women from such participation. But, also, women are blamed, because they 'marginalise themselves' by 'choosing' not to work. Women are also characterised as powerful change agents working 'behind the scenes'.

In the *masculine responsibility discourse*, men's superiority is justified through masculinist protection, which entails representing women as in need of protection from men. This discourse strongly complies with the culturally idealised manhood that emphasises men's responsibility towards their family and nation. Furthermore, within this discourse, young men represent themselves as well-positioned in preventing FGM/C through their power over marriageability preferences. Marrying an uncut or sunnah cut woman is considered a 'responsible choice'. Whilst 'other' (older) men are characterised as not fulfilling their responsibilities in preventing FGM/C, 'responsible' young men engaged in FGM/C prevention appear to lack sufficient resources, support from elders, and respect from the community.

*Table 4* summarises how the identified discourses construct ‘social identities’ and ‘subject positions’ (‘identity’ function); social relationships between people (‘relational’ function); and, systems of knowledge and beliefs (‘ideational’ function) (see Fairclough, 1992). The table also summarises the consequences of these discursive constructions for the patriarchal gender regime and prevailing masculinities in Somaliland. In terms of violence against women, the interviewees construct sunnah cutting as ‘just pricking’ or a ‘mild invasion’, which undermines women’s rights to bodily integrity. The health approach to pharaonic cutting, in turn, frames violence as a *contributor* to women’s poor health instead of a *symptom* of gender inequality. Furthermore, not framing pharaonic cutting as violence but as a violation of women’s (right to) health remains problematic, because *not* labelling something as violence is a way of legitimating it. ‘Ignorant’ mothers are presented as the primary perpetrators of pharaonic cutting, which downplays fathers’ responsibilities in the continuation of FGM/C and ignores how the cultural understanding of gendered responsibilities assigns women the role of preparing daughters for adulthood and marriage.

The nascent emphasis on women’s rights to bodily integrity, however, opens up the possibility of emphasising women’s individual rights enabling opposition to all FGM/C practices regardless of the health problems they cause. Furthermore, decoupling women’s religious purity (that is, virginity and abstinence from premarital sex) from all types of FGM/C and coupling it instead to covering the body, behaving ‘modestly’, and keeping away from men serves as a justification for efforts against FGM/C. On the other hand, the persistent emphasis on women’s virginity and chastity risks upholding FGM/C, a traditional means of safeguarding these virtues.



**Table 4.** *Constructive elements of the identified discourses and the consequences to the patriarchal gender regime and prevailing masculinities.*

	<b>Constructions of subject positions, social relationships and knowledge</b>	<b>Consequences to the patriarchal gender regime and prevailing masculinities</b>
<b>Righteousness discourse</b>	<ul style="list-style-type: none"> <li>- Sunnah cutting is 'not required' by Islam</li> <li>- Sunnah cutting is, however, accepted since it is not specifically forbidden or disapproved by religion, and it is 'not harmful'</li> <li>- Women's religious purity (that is, virginity and abstinence from premarital sex) is indicated by modest behaviour and clothing instead of genital cutting</li> </ul>	<ul style="list-style-type: none"> <li>- Challenging dominant religious interpretations on sunnah cutting as 'honourable' (recommended) renegotiates women's righteousness</li> <li>- Accepting what is understood as 'just pricking' or a 'mild invasion' undermines women's rights to bodily integrity</li> <li>- Recognising women's capability to control their premarital sexuality and virginity renegotiates women's agency over their own bodies</li> <li>- Continued emphasis on women's virginity and chastity risks perpetuating FGM/C, a traditional means of safeguarding these virtues</li> </ul>
<b>Health discourse</b>	<ul style="list-style-type: none"> <li>- Pharaonic cutting is a harmful cultural practice with several medical consequences for women</li> <li>- Pharaonic cutting violates women's right to health, 'right to marry', and right to bodily integrity</li> <li>- Pharaonic cutting complicates men's sexual 'performance' and restricts women's willingness, 'sensitivity', and pleasure in marital sex</li> <li>- 'Ignorant' mothers are the main perpetrators of pharaonic cutting</li> <li>- Women's subjective experience of FGM/C grants them credibility as anti-FGM/C campaigners, whilst men's role is important as 'natural' leaders</li> </ul>	<ul style="list-style-type: none"> <li>- Framing pharaonic cutting as a contributor to poor health and a threat to marriageability instead of a symptom of gender inequality upholds inequality</li> <li>- The nascent human rights discourse provides a possibility of emphasising women's individual rights and opposition to all types of FGM/C</li> <li>- Objecting to pharaonic cutting reproduces the responsibility ideal inherent to 'Somali manhood'</li> <li>- Recognising the effects on marital sex challenges FGM/C as a 'women's issue', but risks granting women's sexual health and pleasure an instrumental value</li> <li>- Blaming mothers for the perpetuation of pharaonic cutting ignores highly gendered roles, whereby women are socialised to prepare daughters for adulthood and safeguard their marriageability</li> <li>- Recognising women's roles as campaigners renegotiates their public agency</li> <li>- Representing men as 'natural leaders' reproduces men's domination</li> </ul>

<b>Hierarchical difference discourse</b>	<ul style="list-style-type: none"> <li>- Men and women are different and have segregated but 'balanced' roles as determined by Islam; no gender inequality exists in Somaliland</li> <li>- Women jeopardise the 'gender balance' if taking 'men's' jobs on one hand, but marginalise themselves' if not engaging in paid work on the other</li> <li>- Women's education is 'good for the family', and women's primary tasks remain in the private sphere</li> <li>- Women cannot be accepted as leaders</li> <li>- Women have power 'behind the scenes' in public affairs</li> </ul>	<ul style="list-style-type: none"> <li>- Complying with the strict gender segregation reproduces the righteousness ideal inherent to Muslim masculinities</li> <li>- Emphasising women's traditional roles in the private sphere reproduces women's economic subordination</li> <li>- Restricting women's access to higher positions (instead of access to paid work in general) represents a transfer from private to public patriarchy</li> <li>- Denying gender equality, blaming women for inequality, and appealing to women's 'informal' power maintain women's subordination</li> </ul>
<b>Masculine responsibility discourse</b>	<ul style="list-style-type: none"> <li>- Men are 'natural leaders' and primary breadwinners</li> <li>- Women need protection and support from men</li> <li>- Young men are uniquely positioned as anti-FGM/C advocates: to marry an uncut or sunnah cut woman is a 'responsible choice'</li> <li>- Young 'responsible' men lack older men's support and community respect in their efforts to prevent FGM/C</li> </ul>	<ul style="list-style-type: none"> <li>- Emphasising men's protection over women reproduces the responsibility ideal inherent to 'Somali manhood'</li> <li>- Advocating against FGM/C through the marriageability criteria does not challenge women's dependency upon marriage</li> <li>- Not marrying pharaonically cut women risks double victimising them</li> <li>- Criticising older men renegotiates the submissiveness to the older men ideal inherent to 'Somali manhood'</li> </ul>

In terms of the consequences of the identified discourses on the rigid gender norms and prevailing masculinities in Somaliland, the 'heroic position' (Wetherell & Edley, 1999) to the religious righteousness ideal upholds a strict gender segregation. In addition, a strict gender segregation is presented as natural and fair by paralleling it with a 'balance' between gendered rights and responsibilities, and by emphasising 'natural' gender difference—defining feminine and masculine as dichotomous and in opposition to one another. Emphasising men's primary role as the family breadwinners and constructing men as 'natural leaders' also reproduces the responsibility ideal central to 'Somali manhood' (El-Bushra & Gardner, 2016). Compliance with the responsibility ideal—together with awareness of the health risks related to pharaonic cutting—entails that men feel 'obliged' to protect women from the practice. They handle the discrepancy between the responsibility and righteousness ideals regarding the unclear religious status of sunnah cutting by categorically labelling sunnah cutting as not harmful, even if in reality, sunnah cutting can approximate or mirror pharaonic cutting. By openly criticising older men's 'irresponsibility' regarding efforts to prevent pharaonic cutting, the young men renegotiate the submissiveness norm that guides young Somali men to accept the authority of older men.

Challenging the dominant religious interpretations of sunnah cutting as 'honourable' renegotiates women's righteousness. The heavily gendered norm of religious purity (that is, virginity and abstinence from premarital sex) is reproduced, whereas the means to achieve it are renegotiated. Religious purity

is decoupled from all types of FGM/C and attached to chastity—modest behaviour and clothing, ‘veiling’ oneself physically and figuratively. In other words, women appear capable of controlling their sexuality and refraining from premarital relationships without undergoing FGM/C, which expands their agency over their bodies. Furthermore, being *not* pharaonically cut, and, hence being sexually willing and ‘sensitive’ after marriage, represent components of idealised womanhood. Education, too, emerges as part of idealised womanhood, but it mostly carries an instrumental (‘good for the family and the husband’) rather than intrinsic value. Women’s primary role is designated in the private sphere, even when she engages in paid labour.

In terms of the hierarchical gender order, the discursive constructions above which (re)produce or challenge rigid gender norms also negotiate the hierarchical gender order. Women’s inferiority is also reproduced by constructing pharaonic cutting as a violation against women’s ‘right to marry’, without challenging women’s socio-economic subordination and their dependency on marriage. Similarly, ‘protecting’ women from FGM/C by affecting the marriageability criteria—the unique power that young men assign themselves—does not challenge women’s dependency on marriage. Furthermore, being ‘responsible’ by not marrying pharaonically cut women risks double-victimising them—resulting in their ostracism because of the very procedure presumed to guarantee their marriageability and socio-economic status. Connecting women’s FGM/C-related health problems to challenges in marital sex, in turn, allows for the transformation of FGM/C from a women’s issue to an issue affecting everyone. However, if recognition of FGM/C-related marital sex problems mainly focuses on men’s psychosexual problems, it risks attributing women’s sexual health and pleasure primarily an instrumental value, that is, representing the wife as an investment whose ‘payback’ FGM/C endangers.

Emphasising women’s traditional roles in the private sphere (as well as promoting women’s education and economic role as ‘good for the family’), whilst describing men as primary breadwinners and ‘natural leaders’ maintain women’s economic subordination. The opposition to women’s entry into higher (political) positions—justified through Islam—signifies men’s concern for losing their privilege, and (partial) transfer from private to public patriarchy. Representing men’s superiority as ‘divinely ordained’ renders it particularly stable, especially since the attached rigid gender segregation concentrates the power to renegotiate the gender norms and gender order in the hands of male religious scholars.

Describing Somaliland as gender equal and blaming women for ‘choosing to stay at home’ and, thus, marginalising themselves implies a denial and, hence, maintains structural factors restricting women’s access to paid labour. Moreover, characterising women as powerful change agents who work ‘behind the scenes’ also downplays the need to promote women’s formal decision-making power. Recognising that women have strong legitimacy as anti-FGM/C campaigners due to their subjective experiences renegotiates women’s

public agency. Yet, women are also characterised as the weaker sex requiring men's protection, which serves to justify men's superiority and domination.

This section summarised the empirical findings and answered the research questions. Next, I discuss the theoretical and practical contributions of the study.

## 7.2 CONTRIBUTIONS OF THIS STUDY

The theoretical contributions of my study concern theorising on gender-based violence—particularly FGM/C as patriarchal violence—and feminist theorising related to the subtle workings of power and ideology within discourse. By exposing men's discursive practices that justify violence against women, rigid gender norms, and the hierarchical gender order, I contribute to critical studies on men and masculinities. The practical contribution concerns the design of programmes to prevent FGM/C and the engagement of young men in such programmes. In what follows, I expand upon these contributions.

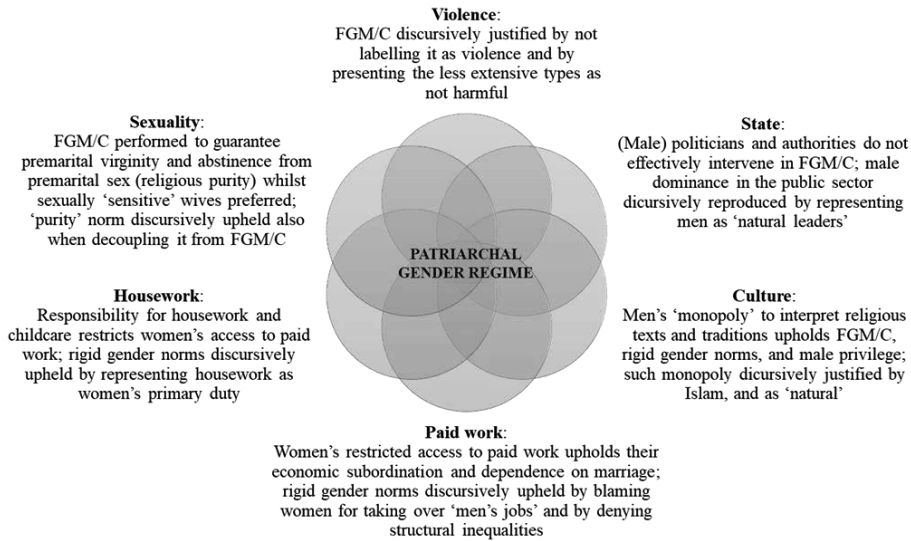
My study contributes to understanding what is gendered in gender-based violence, and responds to requests (by, for example, Bumiller, 2010; Ronkainen, 2017; Stark, 2010) that call for a focus on the meaning and purpose of violent acts and their relationship to the performance of gender. Building on Walby's (1990) theorising on patriarchy and the six 'fields' (paid work, housework, sexuality, culture, violence, and the state) she identified, I elaborate on the notion that patriarchy does not cause FGM/C, but represents a supporting condition of the practice (Mackie & LeJeune, 2009). I argue that FGM/C is patriarchal violence, and, hence, comprises a materialist practice which sustains and is sustained by other materialist and discursive patriarchal practices, which—separately and together—reproduce the hegemony of men. Crosscutting the 'fields' of sexuality and culture, FGM/C represents a valued tradition often assumed to be mandated by a religious doctrine and linked to understandings of honour, thereby justifying the use of violence to control women's virginity and fidelity. In the fields of paid work and housework, women's socio-economic subordination upholds women's dependency upon marriage and, thereby, FGM/C, which is often perceived as a prerequisite to marriage in practicing communities. Health problems and child marriages, which often follow FGM/C, further limit women's possibilities to educate themselves and participate in working life. Furthermore, in the field of the state—often dominated by men—the refusal or reluctance to intervene in FGM/C through specific legislation and policy contributes to the perpetuation of the practice.

In addition to showing the many ways that FGM/C, intertwined with other patriarchal practices and structures, maintains the patriarchal gender regime (see Figure 1), and thus represents a gendering practice, I argue that FGM/C is a *practice of gender*. That is, when organising their daughters' FGM/C, mothers and grandmothers perform their gendered role into which they were

socialised. This role includes perpetuating traditional practices and preparing children, especially girls, for adulthood. FGM/C is not directly a practice of masculinity, since cutting is almost always organised and performed by women. In Somaliland, I argue, support for the practice is, however, an enactment of masculinity since it demonstrates compliance with the religiously and culturally idealised masculinities under circumstances where (some types of) FGM/C are understood as a religious prescription and a protection against premarital sex, rape, stigma, and ostracising.

Moreover, my critical discourse analysis, which draws from Fairclough (1992, 1995, 2001) and Lazar (2007), exemplifies the workings of power and ideology *in discourse*. Fundamentally, this study illustrates the complex and subtle ways in which taken-for-granted gendered assumptions and hegemonic power relations are discursively (re)produced and sustained as commonsensical and natural, also by people aiming to prevent FGM/C, which is in many ways maintained by hegemonic power relations. This study shows how the patriarchal gender regime—and, thus, men's domination—is upheld and legitimated by patriarchal interpretations of ideologies, such as religion. Drawing upon medical 'facts', pharaonic cutting represents a harmful and unnecessary *cultural* practice, which is against Islam, but is not framed as violence. Sunnah cutting, in turn, is understood as neither required nor forbidden by Islam, and (hence) as harmless—'just pricking' and 'not a big deal'. Tradition and culture, in other words, represent illegitimate justifications for FGM/C in my data, whereas acts understood as required or not specifically forbidden by Islam are represented as acceptable. Despite the decoupling of virginity from FGM/C and emphasising women's agency in safeguarding their virginity, control over women's sexuality is perpetuated by emphasising the importance of their premarital virginity and abstinence from premarital sex. Taken together with gender stereotypes (for instance, 'women prefer to stay at home'), religion is used to justify not only sunnah cutting, but also strict gender segregation, relegating women to the domestic sphere and privileging men in the fields of paid work and political decision-making.

*Figure 1* summarises the interrelationship between FGM/C, other materialist practices that uphold patriarchal gender regime, and the ways such materialist practices and hegemonic power relations are discursively reproduced in my data. Review of the literature



**Figure 1** Interrelationship between FGM/C and other materialist and discursive practices that uphold patriarchal gender regime.

In terms of critical studies on men and masculinities (CSMM), my theoretical framework follows Beasley's (2015) suggestion of making connections which bridge the disjunctions between feminist and CSMM theorising. In doing so, I emphasise the multiplicity of masculinities, allow the subject in as a subject to materialist–discursive power regimes, and show how the interpretations of ideologies and belief systems are reproduced but also challenged. I also make connections between alternative approaches in CSMM by demonstrating masculinities as constituting both norms and practices, and, moreover, both discursive and materialist practices.

Building upon Wetherell and Edley (1999), this study illustrates how men take 'heroic positions' to culturally and religiously idealised masculinities (as opposed to 'ordinary' or 'rebellious' positions). Yet, men are also torn between competing discourses in ways that they cannot fully know or control, as suggested by Stoltenberg (2000). For instance, the righteousness norm, which is central to Muslim masculinities (see Arat & Hasan, 2018), guides men to follow religious prescriptions—or religious scholars' interpretations of them. The responsibility norm, central to the 'Somali manhood' (El-Bushra & Gardner, 2016), in turn, guides men to protect their family and nation from various harms and risks.

My study also illuminates Muslim masculinities as situated at the crossroads of 'exemplary' masculinities found in sacred texts, the culturally idealised masculinities, and the socio-economic and political realities where they are negotiated and performed. My study, therefore, supplements the studies (see, for example, Aslam, 2012; DeSondy, 2013; Hopkins, 2006; Ouzgane, 2006; Samuel, 2011) that render Muslim men visible as gendered

subjects. It contributes to an intersectional understanding of men, who are privileged by gender, but disadvantaged by their age and global inequality (see Peretz, 2017) by showing how young educated men negotiate prevailing masculinities and struggle between Islamic interpretations and gender ideals, deep-rooted cultural norms and gerontocracy, scientific knowledge and global influences. I suggest, however, that the core ideals of ‘Somali manhood’—responsibility, self-discipline, courage, humanity, and generosity (El-Bushra & Gardner, 2016)—are to a large extent compatible with salient character traits conveyed in Qur’an—submissiveness, combativeness, altruism, righteousness, steadfastness, and combativeness (Arat & Hasan, 2018). Drawing on Connell’s (1995, p. 77) theorising on hegemonic masculinity, I suggest that these core virtues embody ‘the currently accepted answer to the problem of the legitimacy of patriarchy’. Yet, some of these ideals (especially, the responsibility ideal) remain largely unachievable in the current economic and political climates in Somaliland.

My contribution to the theoretical framework for men’s engagement in the prevention of violence against women—as well as towards the practical design of programmes to prevent FGM/C—concerns problematising the role of men in preventing FGM/C, a form of gender-based violence, whereby women comprise both victims and the primary perpetrators. The pro-feminist rationale (‘men must be involved because they are the primary perpetrators’, see Flood, 2004, 2011) is hence not directly applicable. Since FGM/C is a social norm upheld by biased empirical and normative expectations (Bicchieri, 2006), the social norms approach to engaging men (see Berkowitz, 2002) remains valid in the prevention of FGM/C. In terms of FGM/C prevention, such an approach should focus on people’s conceptions of moral norms (aiming to identify and mobilise progressive moral authorities to speak against FGM/C), and on parents’ conceptions of men’s preferences regarding the cutting of their future wives (aiming to identify and mobilise progressive young men to express their preference for uncut wives, however, without stigmatising and, thereby, double-victimising cut women).

The practical contributions of this study concern the design of programmes to prevent FGM/C and the engagement of young men in such programmes, which is increasingly called for (Abdalla et al., 2012; Gele et al., 2013; Ismail et al., 2016; Kaplan et al., 2013; Lunde & Sagbakken, 2014; Mölsä, 2008; Newell-Jones, 2016, 2017; Shell–Duncan et al., 2016; Varol et al., 2015). Beginning with programme design, both men and women engaged in FGM/C prevention must understand the interrelations between, and be willing to challenge the patriarchal structures and practices that perpetuate FGM/C. FGM/C should be seen as a symptom of gender inequality and oppression, not as a contributor to women’s poor health. In other words, efforts to prevent FGM/C must dismantle the building blocks of FGM/C. Working with both men and women to deconstruct the hegemony of men can proceed, for instance, with a ‘gender analysis on a discursive and reflective journey’ (Jewkes et al., 2015). By doing so, participants can develop critical

consciousness of the structures that uphold men's superiority—including the monopoly to interpret constructions of reality regarding what is 'natural' and 'normal' (Jokinen, 2010)—as well as their individual role in reproducing them. Moreover, interventions should not draw on ideas associated with hegemonic masculinity, such as strength, warrior, or leader, potentially reinforcing the gender-inequitable masculine ideals (Jewkes et al., 2015). Thus, to engage men in preventing FGM/C in Somaliland, one should *not* appeal to men's responsibility as 'fathers of the country' and 'protectors of women and children', notions that align with the hegemonic masculinity ideals. In addition to reproducing women's exclusion from leadership positions, such a strategy represents women primarily as victims of FGM/C. However, men must feel welcomed and view it as an issue relevant to their lives (see also Casey et al., 2017).

Because most previous studies and reports (for example Berg & Denison, 2012, 2013; UNFPA; UNICEF, 2015; WHO, 2008) emphasise the involvement of male religious scholars, clan leaders, and village elders in preventing FGM/C, a major practical contribution of my study concerns the engagement of young men. In my data, the rationale that interviewees—young men themselves—used for engaging young men in anti-FGM/C efforts stemmed from their 'unique' power over marriageability preferences, as well as situating young men as the future leaders of the nation. The latter strategy implies that the hegemony of men is discursively reproduced by characterising men's superiority in leadership positions as natural and commonsensical, which works against transforming the patriarchal gender order. It is worth noting, however, that in gerontocratic Somaliland, where young men possess very little power in relation to older men, and marriage is a doorstep to social adulthood, compliance with the prevailing masculinities and the hegemony of men reveals more (or at least as much) about the socio-economic position of young unmarried men than about their efforts to reproduce men's domination.

Peretz (2018, p. 26) argues that the key accountability issue when engaging men in the promotion of gender equality 'is not men's inability to see [their] privilege, but their inability to address privilege effectively, because it is operating on a macro-level and, thus, limiting their individual ability to respond effectively.' Therefore, individualistic approaches tend to 'blame individuals who receive privilege for both the privilege that they reproduce and for that which they are unable to prevent', Peretz (p. 26) claims. This very much applies to young men in Somaliland, who are not only marginalised by uneven global and local income distribution but also because of their age. That is, young men are seen as immature and volatile, lacking leadership skills and knowledge, and, hence, excluded from positions of power. Young men's reluctance to deconstruct men's domination must also be understood against the harsh economic situation in Somaliland, where young men find it nearly impossible to fulfil prevailing masculinity ideals.

Simultaneously, the role and potential of women in FGM/C prevention must be fully supported and utilised. Prominent local anti-FGM/C advocate



women like Edna Adan Ismail<sup>41</sup> with whom young women may identify are necessary. Jewkes et al. (2015) note that working with women in deconstructing the hegemony of men needs to proceed so that women can develop a critical consciousness of their right to live without subjugation. Furthermore, women should be supported to scrutinize their role in reproducing their subordinate position through gender socialisation and through social sanctioning and marginalisation of certain femininities and masculinities (Jewkes et al., 2015).

Finally, my data suggest that, in efforts aimed at eradicating FGM/C in practicing communities, international actors should remain in the background to safeguard local ownership of the efforts. Otherwise, they risk diminishing the legitimacy of such actions, because their good will and competence in questions attached to morality are often questioned by the local community. Furthermore, it is important to use local vocabulary rather than English-language terms and acronyms, such as FGM or FGM/C, which, for example, in Somaliland, are often understood as referring to pharaonic cutting only, and are associated with international campaigns. On the other hand, the use of terms such as 'sunnah' to name the practice risks reinforcing the misconception of FGM/C as a requirement of Islam. When recruiting and training anti-FGM/C activists, arrangements with mixed-sex sessions often help men to view women as their equal counterparts instead of victims needing protection, and convince women of men's increasing opposition to FGM/C. This agrees with Flood's (2015) notion that mixed-sex groups are effective in preventing violence against women, especially if the session seeks to create a gender dialogue or opportunities for men to listen to women. Jewkes et al. (2014) claim that the most effective interventions to prevent violence against women involve women and men with combined single-sex and mixed-group delivery and which feature a lengthy participant engagement time. During joint sessions, attention must, however, focus on not stigmatising cut girls, and not raising concerns about their marriageability. Female participants should be consulted regarding the content of sessions and encouraged to take the lead in activities.

### **7.3 AFTERTHOUGHTS AND FURTHER RESEARCH**

In this final section, I provide some afterthoughts, discuss the limitations of this study, and suggest directions for further research.

Whereas the international NGO and the local CSO with which I cooperated in many ways enabled this study, their role also set some limitations and

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<sup>41</sup>Edna Adan Ismail is the founder and director of the Maternity and Teaching Hospital in Hargeisa, and a pioneer in the effort to end FGM/C in Somaliland. She made the first public declaration on stopping FGM/C at a governmental meeting in March 1977, and continued to lobby until 1991, when the government was overthrown and campaigns against FGM/C collapsed. In 1997, as a WHO representative in Djibouti, Ismail was asked to return to Somaliland to denounce FGM/C at the first seminar to revitalise efforts to eliminate FGM/C (Ismail, 2009; UNFPA & UNICEF, 2015).

eventually affected the data. My reliance on the support of these organisations—which was enhanced by the challenging security situation in Somaliland—to access the field and to recruit research participants implied above all that I was sometimes misinterpreted as a representative of the international NGO (and therefore a potential employer to the student interviewees). In my view, some of the interviewees thus considered the interview as a test of their knowledge about FGM/C. This produced a certain bias in the data. For example, I assume that listing numerous health consequences was (over)emphasised as well as young men's responsibility, capability, and unique position in preventing FGM/C. Furthermore, the nascent *human rights discourse* and *sexuality discourse* may not emerge in other settings, where students discuss FGM/C. On the other hand, this can be seen as my position as a complete outsider (a Western and non-Muslim woman) empowering the interviewees to speak more freely. It must be noted, however, that the semi-structured interview scheme also affected the accounts. For example, interviewees were guided to elaborate upon the effects of FGM/C on men, which contributed to some 'new' elements in the *health discourse* (such as representing pharaonic cutting as a hindrance to marital sex). Without specifically asking them to elaborate upon the negative effects to men, they probably would have concentrated on the effects to women.

As an afterthought, focus group discussions in addition to individual interviews might have produced interesting contradictions, thereby revealing something about the prevailing norms. For example, Newell–Jones (2017, p. 29) found in her investigation about FGM/C attitudes in Somaliland a contradiction in the opinions expressed by young men during focus group discussions compared to responses during confidential interviews. When interviewed individually, 29% of young men said that they would prefer that their daughters remained uncut, whilst during focus group discussions the overwhelming opinion was that being uncut was completely unacceptable in their community. Considering that the individual interviews in my data produced different views on, for example, the religious status of sunnah cutting and on the loosening of gender segregation (women's increasing economic involvement), it would be interesting to explore how they negotiate their views in a group setting.

Based on this study, little can be said about the views of Somali men in general on FGM/C, violence against women, gender norms, or the gender order, since the interviewees consisted of a select group of young, educated men from the capital city. Yet, the fact that these progressive men discursively reproduced rigid gender norms and men's superiority—in an interview setting that some interpreted as a 'test' of their knowledge—suggests that the revealed power asymmetries and structural inequalities revealed are both naturalised and legitimate. In terms of future research, observing young anti-FGM/C activists' encounters and discourses with other community members could shed light on the role of the context in constructing discourses on FGM/C and gender. Specifically, it would be interesting to explore the discourses on

FGM/C and gender that young people employ in their peer-to-peer encounters. Social media would provide one arena for such research, as well as to illuminate the impact of new technologies on discourses. Whereas this study focused on the discourses employed by young male activists, an equivalent study focusing on the female activists would serve the purpose of, for example, exploring the eventual gendered differences in the discourses, that, in light of this study (with only four female interviewees), were surprisingly few.

Based on my study, little can be said about men's motives and pathways to anti-FGM/C activism. The students who participated in the anti-FGM/C training were primarily nominated by the university management and did not, thus, strictly volunteer. In general, their motives drew from both relational interests (solidarity for women and girls) and community interests (public health) (see Flood, 2011). Understanding the variety and severity of the health risks related to pharaonic cutting appeared to 'activate' men's 'protective shield' over women (see El-Bushra & Gardner, 2016), and thus 'fuel' their activism. In particular, men studying public health or social work viewed it their masculine as well as their professional duty to advocate against FGM/C. In line with UNICEF's (2010) findings, the reasons men cited for abandoning pharaonic cutting also stemmed from an understanding that religion does not mandate it and that it may negatively impact sexual relationships. Since the interviewees in this study had barely begun actual campaigning against FGM/C when I interviewed them, it would be interesting to conduct follow-up interviews to, for instance, determine which factors promote or hinder long-term engagement in FGM/C prevention, and if there are gendered differences in this regard. Whilst the students seemed quite engaged in preventing FGM/C during the actual research interviews in 2016, the follow-up meeting two years later left me with the impression that only a few remained genuinely engaged, some of whom were even employed in FGM/C projects run by local CSOs<sup>42</sup>.

The role of the diaspora in preventing FGM/C was not mentioned by my student interviewees. In the background interviews with CSO employees, however, the diaspora was touched upon with both optimism and 'a grain of salt'. Somali girls in the diaspora who remain uncut but who are considered respectable and getting married, were perceived as serving as role models, aligned with the views amongst nurses, returning Somali exiles, and development workers interviewed by Vestbøstad and Blystad (2014) in Hargeisa. On the other hand, the impact of the diaspora appears to depend upon how the general public views the diaspora. If individuals are perceived as Westernized (which is often the case if they live in or return from the West),

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<sup>42</sup>Following the meeting, I talked with one participant about the challenges in keeping young activists motivated. He suggested that when mobilising students, those from the fields of social work and public health should be prioritised since they have enough prior knowledge, are keen to address social problems like FGM/C, and are thus more comfortable publicly challenging FGM/C. He insisted that trained students must be supported throughout, offered repetitive training, and provided with a 'platform' on which to work (for example, regular follow-up meetings, a magazine, public debates, or mentoring by more experienced activists). Students who remain engaged could receive certificates, recommendation letters or volunteer vacancies to enhance their employability.

they can at worst jeopardise the efforts to eradicate FGM/C. But, if such individuals are seen as somebody from the same community (which is often the case if they live in or return from, for example, Saudi Arabia, the United Arab Emirates, or other Islamic countries), they can be viewed as role models. This issue should be explored in greater detail.

Furthermore, to understand the interplay of the discourses identified in this study with the construction of the prevailing FGM/C and gender discourses in Somaliland, discourses employed by, for instance, religious scholars, political leaders, clan elders, health professionals and media should be explored. During my follow-up visit to Hargeisa in October 2018, I met with some of the local CSO employees I interviewed in 2016. They informed me that the *Sexual Offences Bill* to criminalise rape, forced marriage, trafficking for sexual slavery, and sexual harassment—passed by the Parliament’s upper house in April 2018 (see also Bhalla, 2018) and ratified by the President of Somaliland in October 2018—was subsequently pulled back due to ‘Western influence’ and accusations of legitimating adultery. CSO employees thought that the ‘scandal’ also negatively impacted the promotion of the anti-FGM bill, since political leaders were now quite cautious regarding anything related to the gender–Islam nexus.

Another concern voiced by CSO employees was the *religious fatwa* issued by the Ministry of Religious Affairs in February 2018. CSOs advocating for a zero tolerance of all types of FGM/C required rephrasing of the *fatwa* because it legitimises sunnah cutting. According to the *fatwa*, ‘[i]t’s forbidden to perform any circumcision that is contrary to the religion which involves cutting and sewing up, like pharaoh [pharaonic] circumcision’ (Ahmed, Maruf, & Hassan, 2018). In SIHA’s (2018) interpretation, the *fatwa* is problematic because it also frames FGM/C as a religious matter. Furthermore, the *fatwa* vows to punish violators and allows victims to receive compensation, but it does not describe the type or severity of punishment nor indicate whether compensation is paid by the government or by those who violate the ban (Ahmed, Maruf, & Hassan, 2018). The students with whom I met in October 2018 noted, however, that regardless of the problematic wording, the *fatwa* implies to Somalilanders that opposition to the practice comes from within the country not from outside.

The Sexual Offences Bill and the religious *fatwa* ‘cases’ illustrate the norm-setting power of religious scholars in Somaliland, as well as the sometimes unexpected and undesirable consequences of external intervention. In addition to open lobbying for legislation and policies, more subtle intervention such as ‘importing’ discourses can appear as external influence, as is the case with framing FGM/C as a matter of human rights violation and gender discrimination. The ‘case’ I studied also serves as an example of external influence. The international community (via the international NGO) supported the local CSO to eradicate FGM/C by mobilising local students to advocate via social media and amongst their peers and family members. As my data illustrates, trained students did not automatically adopt all of the

meanings delivered during the training. The human rights perspective did emerge in some accounts, thereby de-emphasising the health consequences and claiming more principal opposition to FGM/C as a violation not only of the right to health, but to bodily integrity. However, the interviewees were unanimous that the human rights approach is not legitimate and applicable amongst their target audiences, who equate it as a foreign intrusion. Furthermore, women's rights are understood as granted by Islam and thus, violated primarily if something is imposed upon a woman, which is forbidden by religion or if the rights entitled by the Qur'an remain unfulfilled.

To address the difficulty of applying human rights arguments in FGM/C prevention work, Mackie and LeJeune (2009, p. 28) argue that 'transformative human rights deliberation should not be conceived of as the imperious transmission of informed and legitimated international norms to less informed and less legitimate local communities.' Instead, they suggest, human rights ideas must be translated into local terms by making community values explicit and stimulating discussions of how these are better upheld. With regards to FGM/C practices, Mackie and LeJeune (p. 26) suggest that making the fundamental moral of 'doing the best for one's daughter' explicit could justify why a social norm (FGM/C) should be amended so that 'individuals are not rejecting the bad but are embracing the good'. In a similar vein, the men I interviewed revised the social norm (FGM/C, especially the pharaonic type) by making explicit the fundamental moral norm perpetuating FGM/C in Somaliland, women's religious purity (that is, virginity and abstinence from premarital sex), and characterised women as capable of safeguarding their purity without undergoing FGM/C. This revision not only contributes to FGM/C prevention, but also to women's agency.

When I specified my research aim in late 2013, my underlying belief was that if more men are encouraged to stand against FGM/C publicly, the pluralistic ignorance around the practice can be diminished. That is, FGM/C can be transformed from a 'women's issue' to everybody's issue; parents' trust in the marriageability of uncut girls can be enhanced, and the stigma attached to uncut girls can be reduced. Following my analysis, I continue to believe that more men should be engaged in efforts to prevent FGM/C. However, it is unsustainable to engage people (men or women, from the grassroots level to political leaders) in FGM/C prevention without highlighting the patriarchal structures and practices that sustain FGM/C.

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# APPENDIX 1: LETTER OF REQUEST

Ministry of Labour and Social Affairs  
Republic of Somaliland

To whom it may concern:

I hereby request a permit to conduct qualitative research in the city of Hargeisa during the period 22 September through 12 October 2016.

I am a doctoral student at the University of Helsinki, in the Gender, Culture, and Society doctoral programme. In my thesis, I focus on men's advocacy against female circumcision in Somaliland. My primary research interests are men's motives and the challenges they face when advocating against the practice.

In Hargeisa, I will conduct individual semi-structured interviews with approximately 20 men who participated in discussion groups organised by [international NGO]. I have recruited a local research assistant, Mr. [assistant], who will help me in recruiting the interviewees together with [local CSO]. Mr. [assistant] will also assist with interpretation during the interviews if necessary.

The primary interview themes consist of: 1) the nature of the activities in which the interviewee has participated; 2) gender equality and human rights perspectives related to the activities; and 3) gender ideals in Somali culture.

In order to confirm informed consent, each interviewee will receive an information letter in Somali and in English, summarising the purpose of the study and including the contact information of the researcher. Interviews will be carried out anonymously and confidentially with a high regard for the privacy of interviewees.

After the research, the data will be stored securely and will only be used for academic purposes—not for commercial or media purposes. The research report document will be a public document in Finland and in Somaliland.

During my stay, I will reside at the [Hotel], and [international NGO] will assist with practicalities in Somaliland. My fieldwork period is partly funded by the Nordic Africa Institute at the University of Uppsala, Sweden.

18 August 2016

With warmest respect,

Ms. Maria Väkiparta, doctoral student, University of Helsinki  
maria.vakiparta@helsinki.fi, t. +358 50 467 1565 (Finland)

Attachments:

Detailed work plan & Letter of invitation from the [international NGO]

## **APPENDIX 2: LETTER OF INVITATION FROM THE INTERNATIONAL NON- GOVERNMENTAL ORGANISATION**

Dear Sir/Madam:

[international NGO], established in [xxxx], has worked in Somaliland since 2000. [international NGO] has solid networks and long-term partnerships with local development organisations.

[international NGO] and its two local partner organisations, [local CSO1] and [local CSO2] share a common goal, related to the eradication of female genital mutilation (FGM). For the last 10 years, [local CSO2] and [international NGO] have collaborated on the implementation of FGM projects. Cooperation between [international NGO] and [local CSO2] began in 2015. These partners have years of experience in making women's voices and choices heard, improving their possibilities to achieve sustainable livelihoods, and advancing their physical integrity through community- and national-level development interventions

[international NGO] is willing and ready to assist Ms. Maria Väkiparta during her field work in Somaliland.

Any assistance accorded to her is highly welcomed.

Yours sincerely,

[Forename Family name]  
Programme Director  
[international NGO]



## **APPENDIX 3: DETAILED WORK PLAN (ATTACHMENT TO THE LETTER OF REQUEST)**

Detailed work plan of Ms. Maria Väkiparta

Duration

22 September through 12 October 2016

Place

Hargeisa, Somaliland

People in charge:

Researcher: Ms Maria Väkiparta, doctoral student, University of Helsinki  
(email maria.vakiparta@helsinki.fi, tel. +358 50 467 1565)

Assistant: Mr. [Forname] [Familyname], Hargeisa [email], [tel]

Driver: Mr. [Forname] [Familyname], Hargeisa

Cooperation partners:

[Forname] [Familyname], [title], [international NGO], [email], [tel]

[Forname] [Familyname], [title], [local CSO], [email], [tel]

Supervisors:

Ms. Marjut Jyrkinen, Associate Professor in Work-life Equality and Gender Studies, University of Helsinki [telephone number], [email address]

Ms. Lena Näre, Assistant Professor of Sociology, Department of Social Research, University of Helsinki [telephone number], [email address]

Purpose:

The field work is related to Ms. Väkiparta's doctoral thesis on men's advocacy against female circumcision in Somaliland.

Preparations:

Mr. [assistant] and [local CSO] will recruit approximately 20 male (and some female) interviewees from amongst participants of anti-circumcision discussion groups organised by [international NGO] together with [local CSO].

Interviews:

Approximately two interviews per day will be conducted between 24 September and 10 October. Mr. [assistant] will assist with and interpret during the interviews when necessary. The individual semi-structured interviews should last between one to two hours each, and they will be conducted on [local

CSO] premises or at the [Hotel]. When necessary, Mr. [driver] will assist in driving the researcher and/or the interviewees to the premises in question.

In order to confirm informed consent, each interviewee will receive an information letter in Somali and in English, summarising the purpose of the study and containing the contact information of the researcher.

The primary interview themes consist of: 1) the nature of the activities in which the interviewee has participated; 2) gender equality and human rights perspectives related to the activities; and 3) gender ideals in the Somali culture.

All interviews will be conducted anonymously and confidentially with a high regard for the privacy of the interviewees. Following the research, data will be stored securely and will only be used for academic purposes—not for commercial or media purposes.

## APPENDIX 4: MEMORANDUM OF UNDERSTANDING

### MEMORANDUM OF UNDERSTANDING BETWEEN [INTERNATIONAL NGO] AND MARIA VÄKIPARTA

This MEMORANDUM OF UNDERSTANDING (MoU) is hereby made and entered into by and between Maria Väkiparta and the [international NGO].

#### PURPOSE:

The purpose of this MoU is to conduct field work for a research study on young men's conceptions of female genital mutilation (FGM) in Somaliland.

#### RESPONSIBILITIES UNDER THIS MOU

##### 2.1. [international NGO] SHALL:

- support Maria Väkiparta in mapping out and selecting interviewees (approximately 20 young men) for the field study.

##### 2.2. [international NGO] is not liable for:

- indemnifying any third party with respect of any claim, debt, damage or demand arising from the implementation of this MoU.
- compensation for injury, death and/or any other hazard, which may be suffered by Maria Väkiparta as a result implementing this MoU.

##### 2.3. MARIA VÄKIPARTA SHALL:

- secure travel insurance valid for the conflict area during her journey to Somaliland.
- follow the safety regulations of the [local CSO] and [international NGO] whilst in Somaliland.
- select and hire research assistants for the field work.
- arrange transportation for the field work.
- cover the costs for her own accommodation, food, and other travel-related costs.
- carry out the field work.
- guarantee respondent confidentiality.
- assume responsibility for research ethics during the field work and in writing the research report.

IT IS MUTUALLY UNDERSTOOD AND AGREED BY AND BETWEEN THE PARTIES THAT:

3.1. MODIFICATION. Modifications to this agreement shall be made by mutual consent of the parties, through the issuance of the written

modification, and signed and dated by authorised officials, prior to any changes being performed.

3.2. DURATION. This MoU shall become effective upon signature and will remain in effect until modified or terminated by any one of the partners by mutual consent.

3.3. LIABILITIES. It is understood that neither party to this MoU is the agent of the other and neither is liable for wrongful acts or negligence of the other. Each party shall be responsible for its negligent acts or omissions and those of its officers, employees, agents, or students (if applicable), howsoever caused, to the extent allowed by their respective state laws. [international NGO] reserves the right to use data and information produced under this MoU, with the mutual consent of the signed parties.

3.4. PROPRIETARY RIGHTS. Maria Väkiparta owns the right to the research data and shall ensure internal and external respondent confidentiality. The research document will be a public document in Finland and in Somaliland.

## FUNDING

This MoU does not include the reimbursement of funds between the two parties.

This agreement is neither a fiscal nor a funds obligation document. Any endeavour or transfer of anything of value involving reimbursement or the contribution of funds between the parties to this agreement will be handled in accordance with applicable laws, regulations, and procedures. Such endeavours will be outlined in separate agreements that shall be made in writing by representatives of the parties and shall be independently authorised by the appropriate statutory authority. This agreement does not provide such authority. Each party shall be fiscally responsible for their own portion of work performed under this MoU.

In witness whereof the undersigned, being duly authorised there to, have on behalf of the parties signed this MoU at the place and on the day indicated below.

For:

Maria Väkiparta / [international NGO]

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Mrs Maria Väkiparta  
31 August 2016

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[Executive Director]  
31 August 2016

## APPENDIX 5: SOCIO-ECONOMIC BACKGROUND VARIABLES TEMPLATE

GENDER

Male / Female

YEAR OF BIRTH \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_

RELIGION \_\_\_\_\_

MARITAL STATUS (choose one)

Single / Married / Divorced / Widowed

PARENTAL STATUS (choose one)

No children / Only sons / Only daughters / Daughters and sons

HAVE YOU LIVED ABROAD AT SOME POINT DURING YOUR LIFE?

No

Yes, at the age of \_\_\_\_\_ in \_\_\_\_\_

FGC STATUS IN THE FAMILY i.e., respondent, his/her mother/sisters  
(choose one)

All female family members cut /

Some female family members cut

No female family members cut /

I do not know / no answer

I CAN BE CONTACTED VIA EMAIL BY THE RESEARCHER IF SHE NEEDS  
TO CHECK SOME DETAILS OF THIS INTERVIEW

Yes / No

## **APPENDIX 6: INTERVIEW SCHEME WITH CIVIL SOCIETY ORGANISATION EMPLOYEES**

What is the main goal and focus of the recent anti-FGC projects your CSO has been involved in?

What is your view or strategy on eradicating pharaonic vs. sunnah cutting?

What are the recruitment strategies for involving community-level project participants?

What is the role of gender in participant recruitment?

What are the major challenges in recruiting participants? What are the primary reasons for participant dropout?

What experiences (challenges) do participants report when advocating against FGC?

What are the biggest challenges to preventing FGC?

(How) does your organisation relate FGC to women's rights and gender equality?

What are the biggest challenges in promoting women's rights and gender equality?

## APPENDIX 7: INDIVIDUAL INFORMED CONSENT (ENGLISH)

Consent letter for participating in an academic research interview

My name is Maria Väkiparta. I am a doctoral student at the University of Helsinki, Finland.

I am independent from [local CSO] and [international NGO]. They provided me with the contact information of project participants, but I am not monitoring nor working for their projects.

I am conducting a doctoral dissertation on men's advocacy against female genital cutting (FGC) in Somaliland. FGC here refers to all forms of cutting from sunnah to pharaonic. I am especially interested in the challenges that young men (and women) face in the eradication of FGC.

I want to assure you that your answers cannot be later identified as belonging to you. I will not keep a record of your name or address. I am recording the interview; but after I transcribe it, I will delete the recording.

Your participation is completely voluntary. You have the right to withdraw from the interview at any time, or to skip any questions that you do not want to answer. There are no right or wrong answers.

Mr. [assistant] is available to assist in translating if necessary. He has signed a declaration of confidentiality, promising never to identify the research participants nor the opinions they shared.

If there is anything you want to add or ask later on, you hereby receive the researcher's contact information.

The interview will take approximately 60 to 90 minutes.

Do you have any questions?

## APPENDIX 8: INDIVIDUAL CONSENT (SOMALI)

Aniga magacaygu waa Maria Vakiparta. Waxaan ahay ardayad darajada PHD ka wada jaamacadda Helsinki ee ku taalla wadanka Finland. Anigoo ka madax banaan hay'adaha [organisation], waxay laakiin igu caawiyeen xiririka dadka ka faa'iidaystay mashaariicdooda si aan u waraysto. waxaan cilmi baadhis ka diyaarinayaa taageeridda raga ee ladagaalanka gudniinka firconiga ah qaybihiisa kala duwan (nooca sunaha iyo fircooniga).

Hay'adda [organisation] ee gacansaarka la leh [organisation] ayaa kuu dooratay inaad ka qayb qaadata diraasaddan, sababtoo ah waxaad ka qayb gashay ololihii ay qaadeen [organisation] iyo [organisation] si ay u cidhib tiraan caadadan. Waxaan danaynayaa ka qayb qaadashada ragga iyo Dumarkuba ee Cilmi Baadhista.

Waxaan kuu ballan qaadayaa in dhammaan jawaabahaagu ay sir ahaan doonaan. Ma diiwaan gashan doono magacaaga iyo ciwaankaaga toona. Waxad xaq u leedahay inaad markaad doonto waraysiga iska joojin kartid amma aad iska dhaafi kartid suaalaha aanad rabin inaad ka jawaabto. Ma jiraan jawaabo sax ah amma khalad ahi.

Ka qayb-galkaagu waa tabarruc laakin khibradaadu waxay wax u taraysaa ragga kale ee ka shaqaynaya ladagaallanka gudninka fircooniga ah.

Waraysigu wuxuu qaadanayaa 60–90 daqiiqo.

Miyaad ogoshay in lagu waraysto?

Miyaad ku hadli kartaa English mise [name] baa ku caawiya oo kuu turjuma suaalaha iyo jawaabaha? Wuxuu saxeexay warqada ilaalinta xuquuqda cilmi baadhista oo ah inaanu cid kale la wadaagin xogta ama fikradaha la is waydaarsaday. Wuxuu ilaalin doonaa magacaaga iyo xogta kale oo dhanba.

Haddiiba uu qofka ku waraysanayaa u baahdo xog dheeraada amma fasiraad ma leeday cinwaan email oo lagaala soo xidhiidhi karo? Haddii ay jirto waxaa aad ku dari karto ama su'aal aad qabto waxaa lagu siin ciwaanka iyo numberka cilmi baadhaha si aad ugala xidhiidho.



## APPENDIX 9: INTERVIEW SCHEME WITH STUDENTS

### Introduction

- Present myself and describe the project
- Explain and secure individual informed consent
- Explain the structure of the interview

### Warm-up

- Have you participated in activities against FGC before? Please elaborate.
- How were you recruited to participate in this project?
- Did you hesitate to participate? (Why or why not?)
- Can you identify reasons why someone would hesitate to engage in a project addressing FGC?
- Has your knowledge increased or have your attitudes changed about FGC during the training you just finished?

### Topic: FGC practices and consequences

- What is your opinion regarding the different types of FGC?
- How do you feel about women who have not been cut at all (uncut)?
- Do you know girls or women who have experienced problems related to FGC? Please elaborate.
- Does FGC affect men's lives? How?

### Topic: FGC prevention

- What kinds of activities against FGC have you engaged in?
- You are expected to raise awareness about FGC in your community. How do you feel about that awareness raising?
- How do you think people will react?
- How have your family and friends reacted to your participation in the project or in efforts against FGC?
- Do you think men have a special role to play in preventing FGC? Please elaborate.
- Do you have a personal mission related to the eradication of FGC? Please elaborate.
- In your view, when will FGC be abandoned in Somaliland?
- What are the biggest challenges to eradicating FGC in Somaliland?
- What keeps you motivated (despite the challenges)?

Topic: Gender roles, ideals, and gender equality

- Are there specific roles for men and women in Somaliland society? Please elaborate.
- Have these roles always been the same or have they changed? How?
- What kinds of women are respected in Somaliland?
- What kinds of men are respected in Somaliland?
- What are important criteria for young women in terms of their future husband?
- What are important criteria for young men in terms of their future wife?
- Do you see gender inequality in your society? Please elaborate.
- Is there a relationship between FGC and gender equality or women's rights? Please elaborate.
- How do you and people in general feel about advocating for gender equality or women's rights?
- Do you have anything else you want to add?

# APPENDIX 10: CODES AND SUBCODES IDENTIFIED AND APPLIED IN THE DATA ANALYSIS

Diaspora  
 Effect on men: agony related to her pain  
 Effect on men: giving birth  
 Effect on men: health / extra costs  
 Effect on men: psychology / feelings  
 Effect on men: sexual intercourse / reopening  
 Effect on men: sexuality / sensitiveness  
 Effect on women  
 Effective education / campaign strategies  
 FGM/C prevalence  
 FGM/C root causes / upholding factors  
 FGM/C stance: no clear stance  
 FGM/C stance: prefers sunnah  
 FGM/C stance: zero tolerance  
 Gender equality  
 Gender ideals / female  
 Gender ideals / male  
 Gender norms / female: flexible  
 Gender norms / female: rigid  
 Gender norms / male: flexible  
 Gender norms / male: rigid  
 Marital preferences: husbands  
 Marital preferences: wives  
 Marriageability criteria  
 Men's role: brothers  
 Men's role: community mobiliser  
 Men's role: encouraging women to speak up  
 Men's role: fathers  
 Men's role: leaders  
 Men's role: marriage preferences  
 Men's role: professionals  
 Mothers in the key role  
 Motive: altruistic  
 Motive: professional  
 Motive: selfish

NEG exper/expect\*: challenging culture  
 NEG exper/expect: challenging religion  
 NEG exper/expect: confusing / irritating people  
 NEG exper/expect: foreign values  
 NEG exper/expect: lack of authority  
 NEG exper/expect: no effect  
 NEG exper/expect: sensitive issue  
 NEG exper/expect: women's issue  
 POS exper/expect: future role  
 POS exper/expect: optimistic plans  
 POS exper/expect: others' success  
 POS exper/expect: personal success  
 POS exper/expect: positive feedback  
 Sunnah: as harmful as pharaonic  
 Sunnah: harmless  
 Sunnah: less harmful than pharaonic  
 Untouched girls  
 Women & FGM/C advocacy  
 Women's rights violations: economic & social rights  
 Women's rights violations: political & civil rights  
 Women's rights violations: reproductive & integrity rights  
 Women's rights vs Qur'an  
 Women's / human rights: appeal to arguments

\*NEG/POS exper/expect = negative or positive experiences or expectations regarding the anti-FGM/C advocacy

# APPENDIX 11: ISSUES AND RELATED CODES IDENTIFIED DURING THE PRELIMINARY ANALYSIS

<b>FGM/C PRACTICES</b>	
Solidarity	Effect on men: agony related to her pain Motive: altruistic
Sexuality	Effect on men: sexuality / sensitiveness Untouched girls
Marriage(ability)	Marital preferences: wives Marriageability criteria
Sunnah vs pharaonic cutting	Sunnah: as harmful as pharaonic Sunnah: less harmful than pharaonic Sunnah: harmless
Violence / violation	Women's rights violation: reproductive & integrity rights
Health effects	Effect on women
<b>FGM/C PREVENTION</b>	
Competence	Effective education / campaign strategies FGM/C root causes / factors upholding it Men's role: community mobiliser Motive: responsibility / educated professional Positive experience / expectation: future role Positive experience / expectation: optimistic plans Positive experience / expectation: others' success Positive experience / expectation: personal success Positive experience / expectation: positive feedback
Roles and motives	Effect on men: health / extra costs Gender norms: male / rigid Men's role: brothers Men's role: fathers Men's role: leaders Men's role: marriage preferences Men's role: professionals Mothers in the key role Motive: altruistic Motive: responsibility / educated professional Women & FGM/C advocacy
Challenges	Negative experience / expectation: challenging culture Negative experience / expectation: challenging religion Negative experience / expectation: confusing / irritating people Negative experience / expectation: foreign values Negative experience / expectation: lack of authority Negative experience / expectation: no effect Negative experience / expectation: sensitive issue Negative experience / expectation: women's issue Women's / human rights: appeal to arguments Negative experience / expectation: lack of authority Effective education / campaign strategies

<b>GENDER ROLES, IDEALS, &amp; EQUALITY</b>	
Gender norms and ideals	Gender norms: female / flexible Gender norms: female / rigid Gender norms: male / flexible Gender norms: male / rigid Gender ideals: female Gender ideals: male
Women's rights and status	Gender equality Women's rights violations: economic & social rights Women's rights violations: political & civil rights Women's rights violations: reproductive & integrity rights Women's rights vs Qur'an

## APPENDIX 12: DECLARATION OF CONFIDENTIALITY

To all research assistants engaged in Maria Väkiparta's doctoral thesis research on men's advocacy against female genital cutting in Somaliland

I have been given and have understand the aim of this research project and its ethical challenges. I have had an opportunity to ask questions and have had them answered.

YES \_\_\_\_\_ NO \_\_\_\_\_

I understand that I can never identify the research participants or share their opinions.

YES \_\_\_\_\_ NO \_\_\_\_\_

I understand that if I know any of the research participants, I must inform the researcher, Maria Väkiparta.

YES \_\_\_\_\_ NO \_\_\_\_\_

I understand that the personal data provided to me will remain confidential and will not be used for any purpose other than assisting in the research project.

YES \_\_\_\_\_ NO \_\_\_\_\_

Place / Date / Signature

Print name