

UNDERSTANDING HOW SOMALI WOMEN PRACTICE THEIR CULTURE:
FGM AND HOW IT FITS WITHIN SOMALI CULTURE

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by
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I dedicate this dissertation to my mother – the camel woman – Rubbo Adan Hurre, for teaching me to hold on.

CHAPTER 1

INTRODUCTION

People are shaped by their cultural experiences, and cultural identity is reproduced through individual and group processes that are recreated by personal and collective decisions that, for some, may become ritualistic (Willis 1981). Through these cultural rituals, people create understandings about themselves and the world around them. Yet as knowledge is acquired, especially from outside the community, power may slowly start to shift. This is especially the case through immigration from displacement that is brought about by conflict (Abdi 2014; Deyo and Bartlett 2012).

Among some traditional African societies, women traditionally had and continue to have little or no control over their bodies. In addition, their ability to change the prevailing cultural norms is limited (Abdalla 1982). For example, Denniston and Milos (1997) explain that communities in which female genital mutilation (FGM) is practiced view sexual organs as communal properties under the care of community leaders.

What Is Female Genital Mutilation?

It is important for those who do not know where FGM comes from to understand how FGM has grown to be such a significant part of a culture, even becoming part of a culture's religion.

According to the World Health Organization (WHO), FGM encompasses all procedures that involve partial or total removal of the external female genitalia, or other injuries to the female genital organs for non-medical reasons. The four most common types of FGM according to WHO (2020) and researchers such as Abdalla (1982, p. 3) are:

1) Clitoridectomy: partial or total removal of the clitoris (a small, sensitive, and erectile part of the female genitals) and, sometimes the prepuce (the fold of skin surrounding the clitoris) as well. 2) Excision: partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (the labia are “the lips” that surround the vagina). 3) Infibulations: narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the inner, and sometimes outer, labia, with or without removal of the clitoris. 4) Other: including all other procedures on the female genitalia for non-medical purposes (e.g., pricking, piercing, incising, scraping, and cauterizing the genital area.)

Trying to understand the interplay of these traditional rituals of FGM with the perspective of the women in the culture regarding how they view and discuss FGM has led to a core research question: In what ways do Somali immigrant women stay engaged with the Somali culture, and specifically with FGM? Such a core question relates to several sub-questions about FGM:

- Why do Somalis maintain the current level of attachment to FGM?
- What tools, including networks, are employed to maintain the connection with FGM?
- What are the narratives surrounding FGM, and how is FGM talked about among women?
- How can these narratives be changed to change the tradition?

Important to this exploration of FGM is its position as a cultural practice that starts to affect women's health in childhood and continues to shape their lives in different forms, thereby crippling their social mobility (Bokore 2013). As such, it is important to understand how this tradition is connected to the Somali culture, how it affects the lives of Somali women, and what kind of agency they have within their culture.

Many scholars note that the systems of domination, exploitation, and manipulation lead to the control and policing of women's bodies (Crenshaw 1991; Abdi 2005; Rousseau 2009). These include sexualizing and surveilling women and punishing those who stray from the path of traditional norms and values (Abdi 2005). Like the struggle of Black people with popular culture in which patriarchal norms are perceived as normal, acceptable, and desirable in society, leading to women changing their appearances including skin color and hair texture to try to fit in, Somali women must also conform to their normative cultural imperatives (Collins 2013). While traditional values have shaped these women, they still have a standpoint by which they view the practices of their culture including FGM. Unfortunately, in the case of Somali women, even accepting directives to stay within the norms does not give them a seat under the proverbial tree or at the table (Abdalla 1982). Among Somalis, women do not have to be locked in the home, because FGM does that for them (Talle 2008). This means that FGM, a patriarchal norm among Somalis, is a practice used to restrain and control women so that their community does not have

to worry about their behavior. Despite being a marginalized population, Somali women tell stories about their cultural practices including FGM. While these women are marginalized and often silenced, the power of their standpoint may shift this traditional ritual, especially with the power of their unified stories without using sophisticated words (Smith 2005).

My research aims to explore the discourses and thus the standpoint of Somali women regarding the practice of FGM. This research describes a tradition and its background. Moreover, the study included the specific voices of the women who have experienced this cultural practice. I focus specifically on a small population of Somali immigrants living in the United States and particularly in Columbus, Ohio. As a member of this community, my research employs personal reflection as well as ethnographic methods to examine in-depth the perspectives of the marginalized community (Chambers 2017). The study also examines patterns in the discourse of these women regarding this practice. Finally, specific strategies to mitigate this practice are examined. This study is meant to create a better understanding of the Somali culture in which FGM is a prominent and valued norm to which women feel they must adhere.

Using Black feminist lenses, including African feminism and other intersectional feminism, I seek to explore an extreme form of colonization of women's minds and bodies (Collins 1997, Oyěwùmí 2003, Rousseau 2013).

The population examined in this study is based in Columbus, Ohio. This is because, according to the Somali Chamber of Commerce in Columbus and the Columbus Conventions and Visitors' Bureau of Ohio, up to 65,000 Somalis reside in Columbus. In addition, Chambers (2017) notes that Columbus is the city with the largest Somali population due mainly to secondary migration, wherein Somalis move to this area to be closer to other Somalis. Among immigrant communities, being close to people who practice their culture – language, religion, et

cetera – helps them feel connected as they are “othered” in areas where there is no one who looks like them (Chambers 2017). A participant in my study named Siraad says, “We have a good community here and we do help each other, nothing is too big when you tackle it together.” Why is this a good community? She says, “We help each other in cleaning, cooking, preparing, organizing, you name it, and we do it for each other.” Among Somalis, making a community is very important, as their culture is communal. Many times, as I walked around the neighborhood, I could see women congregating in front of their homes to discuss different things. A further explanation of their interactions is explained in chapter 5.

FGM, a non-medical traditional practice of cutting women’s genitalia as explained by the United Nations and Abdalla (1982), is sold to most Somali women as an important religious tenet. Often known as female circumcision, female genital mutilation (FGM) is a social issue of prominence because it affects millions of families in many different societies (Abdalla 1982). Due to the negative effects of FGM, as documented by the World Health Organization (WHO), United Nations Population Fund (UNFPA), and other institutions, this project joins a chorus of dissent against this devastating cultural practice.

Aspects of FGM have been discussed over the years by many scholars, such as Abdel Halim (2006) and Rahman and Toubia (2000), documenting how this cultural practice is fraught with biological, social, psychological, economic, and other destructive implications. What may be missing from the literature is the actual standpoint of the women who have experienced this practice and the cultural constructs they have developed to accept or challenge this ritual. Also, little scientific research has focused on the relationship between Somali women’s empowerment and the eradication of FGM among Somalis. How their marginalized voices have mitigated the prevalence of this practice has not been documented. This is the rationale for this study, which

relies on extensive interviews with a small population: the author's purpose is to include the voices of Somali women who have undergone FGM in order to reveal their perspectives on the practice and explore how they understand the culture itself. In addition, I hope to offer insights and strategies on how to inform Somali women about the way they can use their voices to inform and perhaps adjust this cultural practice. This is because feminists have tasked themselves with researching for the benefit of women without objectifying them (Smith 2005). That is why this research is following Smith's traditions of respecting and honoring women's voices and perspectives.

In their studies, other researchers have utilized mostly medical analyses (WHO 2020); anthropological relativism (Hayes 1975; Rahman and Toubia 2000); and historical and cultural narrations (Denniston and Milos 1997) to examine and pinpoint specific problems associated with FGM. However, meaningful gaps exist in the literature concerning Somali women immigrants' belief systems regarding health, especially reproductive health, and specifically FGM. Few studies have examined this issue from the perspective of the women involved. That is why my study, which uses ethnographic methodology, can offer a more powerful discourse about Somali women's perspectives of FGM and the surrounding traditions. This understanding can help clarify the Somalis women's experiences.

According to Bokore (2013), FGM as a form of violence against women is shrouded in silence. One of the subjects interviewed in this study is Naseeb, a 30-year-old newlywed, who notes, "I feel like as Somalis, when someone talks about FGM we never want to discuss it openly or share experiences." Additionally, she says, "For example, when girls are getting married, no one will explain to them like hey, this is what you are going to go through, and this is what you need, or this may happen to you, and this is what you should do to make it easier." Further

enforcing the secrecy and shame surrounding this practice she notes: “I feel like we share everything else other than that.” To clarify that it is not unknown or by accident, Naseeb adds, “Even though we know, people are circumcised sometimes severely, and they are having problems every day. We see girls that are getting married, so what are we supposed to do, continue this code of secrecy. It makes no sense.” Naseeb is a graduate student who works with Children’s Services, a government agency in Columbus tasked with the welfare of children in Franklin County, Ohio.

As a participant in my research, Naseeb is not alone in thinking the secrecy and support for patriarchy is unnecessary. Abdalla (1982) notes that women should not help patriarchy take over their bodies and mutilate them. Rather, she writes that women should stand together against FGM and other harmful practices (Abdalla 1982). In this study, even though the women interviewed agreed that FGM is problematic, and some even came out strongly against it, none has thus far deliberately talked to families and friends to say no, or even has stopped someone from doing it. However Naseeb, the 30-year-old newlywed, notes: “If I hear someone trying to take their daughters to be mutilated, I will report them to authorities.” Compared to other respondents in the study, this is a bold move. While other respondents may have expressed similar leanings in casual exchanges, no one else was willing to go on the record with such strong condemnation of the practice. It is difficult to ascertain the cause of this as, among Somalis, it is all but forbidden to report any community difficulties to the authorities. That said, as an insider and participant-observer, I believe this indicates the acquiescence and compliance of the women within the community.

Background

The origins of FGM are not well known among the Somali community. Fayow, a participant in this research and a 60-year-old former accountant in Somalia, notes, “I don’t know why they do it or where it came from.” However, in most scholarly estimates, the cultural practice is between 3,500 to 5,000 years old. Gender-based violence can take many forms – and many scholars and non-governmental agencies view FGM as gender-based violence or child abuse that further additional unequal treatment (WHO 2000). Gender inequality is a universal problem, and the Somali people have specifically oppressed their womenfolk by not allowing them to participate in their society (Abdullahi 2001; Abdalla 1982). This was done by devising cultural means to shut women out of public discourse. In addition, Abdullahi (2001) notes that these and other cultural views and rituals such as bridewealth (wealth such as camels and other livestock that are given in exchange for brides) make it very hard for women to break out of the cycle of oppression. This is because women could be taken as spoils of war by another clan and have to be defended as they could not defend themselves (Abdullahi 2001). In other words, it becomes intergenerational violence further perpetuated by the women themselves as a sign of acceptance of their culture and avoidance of conflict. In essence, women must buy protection by being silent under duress.

Weedon (1987) asserts that language is an important cultural medium for social organization, creation of meaning, power, and individual consciousness. As such, language constructs our sense of ourselves and our subjectivity because it is the place where social organizations and their political and social consequences are defined and contested. Social rhetoric and language (Rousseau 2009; Abdullahi 2001; Abdalla 1982) are used to put down women, including aphorisms such as “milk-full breasts/bosoms hold no brains,” and “women are

like children with big feet,” meaning that women cannot participate in complex issues such as decision making (Abdullahi 2001). Gender inequality, therefore, is situated in the structure of gendered social practices (Lorber, 1994). This means that even the unassuming activities such as eating and playing are gendered. In addition, Lorber notes that this means that policies are created by men to make sure that women have a lower status – that this status quo is perpetuated. Schrock and Schwalbe (2009) note that we do gender in a culturally specific way that can be seen from defining masculinity and femininity from cultural standpoints. In the case of Somalis, this means socializing boys as the leaders of tomorrow and affording them opportunities for advancement, while making sure women lag. In the same way, Anderson (1987) notes that social, political, and economic factors play a crucial role in shaping subjective experiences, especially in bureaucratic organizations such as the health system. According to Anderson, the same health systems are inaccessible to immigrant women due to this very reason. In other words, it is the social script of “othering” those who look different and letting them know that they are not welcome. Just as they were outside the club in their native Somalia, Somali women are outside the club of Westerners (Chambers 2017).

As gender inequality is a sustained attack on women’s well-being, and well-being is a public health issue and a social problem, it affects all humans. As Somali women have been socialized to obey and not ask questions (Abdalla 1982), it is up to those of us who can speak on their behalf to do so and to do it now, because this is a matter of life and death (Bokore 2013).

This research seeks to expand understanding of the tradition of FGM by utilizing in-depth interviews to explore several themes of importance to this subject, as well as the ethnographic observation necessary for describing and supplementing interviews. FGM is a multidimensional aspect of the Somali culture that has unexplored staying power. For this reason, the next chapter

comprises a more in-depth literature review for this project and exploration of work by important scholars from pertinent theoretical backgrounds.

This dissertation is divided into seven main parts. This first part introduces FGM and explains what it is, its background, and the kinds of discourse that are related to FGM and where in the dialogue this research fits. The second part discusses the literature that other scholars who have studied FGM have written before my study, or what is considered the current state of knowledge about FGM. Since FGM is a multifaceted phenomenon, I have pulled literature from health, immigration, and other fields related to Black bodies and activities. The third part continues the argument by explaining the frameworks for my argument, which further includes different intersectional theories, both Western and African, that have been a basis and a springboard for my study. The fourth part is the methodology which explains the qualitative method that I have used for identification of the subjects, the sample itself, the interviews and thematic analysis, and the ethnographic observations that have supplemented the interviews. The fifth part addresses the cultural connections that Somali women have while they are here in the United States, including the networks and tools that women use both in Somalia and abroad in strengthening their new roles as the keepers of the culture. To further aid understanding, I have included an introduction to Somali culture from before colonization and the partition of the lands occupied by the Somali people. The sixth part continues to connect the current literature and this specific research while weaving in the voices of the participants and what they say, including a general introduction. The final part of this dissertation summarizes the findings of this research and makes recommendations, including taking steps to disseminate information about FGM and how to change the narrative.

As this dissertation research is about Somali culture and specifically female genital mutilation, in the next chapter, a literature review that includes those who can help explain this phenomenon will be introduced and discussed. This review will present conversation with those who came before in the field of FGM and related research. This conversation starts in the following chapter, but continues throughout this work.

CHAPTER 2

LITERATURE REVIEW

Ethnographic Literature

According to Gordon (1984), ethnography can be defined as a qualitative method that relies on the interpretation of the researcher. This means that the role of the researcher is not merely to observe a phenomenon, but to also describe and explain it as they participate in it. Such a role she notes, emphasizes the balancing out of subjectivity and objectivity. In one sense, Gordon (1984) sets the tone for using ethnography as a mechanism for describing and explaining in order to bring a deeper understanding. In another sense, she clarifies that culture itself can be viewed as a field for its reproduction, while those who partake in the culture are the people who reproduce it. My ethnographic research employs both participant observation and describes Somali culture. Through casual conversations, in-depth interviews, and time spent with Somali women, I can tell the previously silenced story of one group of Somali women. As both an insider and a researcher, I can amplify the voices of the women within the community to bring a better understanding of Somali women's lived experiences. Dorothy E. Smith, in her 2005 book *Institutional Ethnography: A Sociology for People*, notes that it is important to create knowledge in a way that does not objectify women but is grounded in the truth of their experiences and

feminist standpoint/grounded theories. If women are oppressed, harassed, or even experience violence and other issues – even when they do not use or know complex terms to name such experiences – assumptions should not be made about how they should be named or how they have been experienced. This in essence means that women do not need permission to express themselves in whichever way necessary to speak up and be heard. The aim of her scholarship, Smith (2005) notes, allows people – that is, sociologists and others – to take knowledge as an extension of our ordinary understanding of our individual experiences through reorganization of the social relations of knowledge of the social. Because knowledge of the social is a collection of knowledge of relationships and individual experiences and how they are organized, Smith (2005) proposes institutional ethnography by which research would start by building accounts of people's situations and of what they go through as parents, employees, clients, and others in their daily lives. People's experiences would define the way forward and dictate how they proceed. This study also uses in-depth interviewing to elicit information from the women in a conversational way. My dissertation study follows the traditions established by Smith and others of employing ethnography and sociology for the people, and in doing so, my goal is to clarify the importance of including women's experiences, even those who have never been asked before about their lives. This connects well with standpoint theory as will be seen in the next section to clarify that women's voices are important and should be heard.

Others who advocate for explaining people's cultures ethnographically include Clifford Geertz. According to Geertz in his (1973) scholarship, culture is a difficult thing to describe or explain and, therefore, there is a need to use thick description to help the readers properly understand the different layers of the culture they are studying. Culture is difficult to explain because it involves a way of life that is made up of people, their feelings, attitudes, aspirations,

dreams for the future, artifacts, and socialization, to name a few aspects. Although this is a sociological research project, much of the scholarship about FGM comes from anthropology and other cultural narrations that describe a people and their culture. Hence, a thick description is needed, which is a detailed narration in which the researcher takes the reader on a journey of understanding and living in a culture that is not theirs (Geertz 1973). Such a researcher in most cases has been an outsider, whose account, even though in-depth, has been faulty. My research is carried out by an insider to the culture, whose account gives a thorough immersion into her culture – the Somali culture – and through the feminist lenses uses her scholar activism to try to empower the women by helping them understand their power. This empowerment comes from women whose voices were not heeded or heard before, who are being brought into the conversation about their own experiences. In the words of Schrock in her 2008 dissertation, these are called the “narratives of alienation.” This is because Somali women are viewed in a negative light by other Americans, and they know it. For this reason, the way they interact with outsiders is affected, and their fear of them is confirmed.

Female genital mutilation (FGM) is a phenomenon unknown to most, apart from a few people who study gender and some who study African cultural practices. The main aim of this chapter is to examine previous scholarship on the subject and determine which parts of the practice of FGM have rarely or never been researched. My study intends to use qualitative interviews to attempt to fill in some of the gaps in the available literature. One purpose of this literature review, therefore, is to connect this research to previous studies and feminist theories. FGM is a complex phenomenon: a global cultural practice that is related to women’s health, immigration, and other foundational experiences in the lives of Somali women (Abdi 2014; Abdalla 1982).

As noted in the previous chapter, FGM, also referred to as female circumcision, is a social issue of enormous global significance as it affects millions of girls and women around the world (Abdalla 1982). According to the United Nations Children's Fund (UNICEF 2021), FGM is a procedure done to modify or injure a woman's or girl's genitalia for non-medical reasons. Due to the demonstrably negative effects of FGM, as documented by the World Health Organization (WHO 2000), United Nations Population Fund (UNFPA) (Utz-Billing and Kentenich 2008), and James and Roberts (2002), this study extends the opposition to this devastating cultural practice, framing it as a purposeful act of aggression against women.

Many scholars such as Abdel Halim (2006), and Rahman and Toubia (2000) have discussed aspects of FGM over the years and have carefully documented how this cultural practice is filled with problems, pain, and can even cause death. However, not enough attention has been paid to the reasoning behind the staying power of this cultural practice, despite the avalanche of well-reputed studies and gut-wrenching testimonies of victims. In addition, no research has focused on the relationship between Somali women's empowerment and the eradication of FGM among Somalis. This empowerment and agency may come through migration through which gender roles are renegotiated among communities with strict gender roles, such as Somali communities (Abdi 2007). This empowerment is the ability of Somali women to maneuver within their environment in the United States and take advantage of the education and employment opportunities that are available (Abdi 2014). It can also be the unifying and strengthening of the women's voices to help them realize that they can say no to harmful cultural practices that have no value for their lives in the United States (Abdullahi 2001, Abdalla 1982) as well as understand their power as a group (Abubakar 2013).

To help in understanding the literature review process, I have divided this chapter into the following eight sections: the history of research on FGM; meanings and reasoning behind FGM; communities that practice FGM; indications of changes in attitudes; FGM as a phenomenon of the patriarchy; varying feminisms, negative social rhetoric, and the Black body; silence around sexual violence and reproductive health, and hypersexualization and desexualization.

History of Research on FGM

In one of the classical anthropological research articles on the phenomenon, Rosa Hayes (1975) studied the practice of FGM in Sudan. She analyzed the practice in that context and found it to be functionally interrelated to marriage, norms of female modesty, women's roles, family honor, and patrilineage – tracing back one's lineage through the father. Hayes (1975) also explored population growth in Sudan and noted that FGM may have been used to control the population, especially in Sudan. However, among other communities, FGM is misconstrued to boost fertility (Nnaemeka 2005). Among communities that practice FGM, Nnaemeka notes the removal of the clitoris is a way of protecting the child during the process of birthing because it is considered unclean or even dangerous (2005).

Hosken (1979) reported from UN conferences and follow-up meetings with ministers of health in FGM-practicing countries such as Somalia, Egypt, and Sudan. Hosken lets it be known from the start that she is against FGM and any other form of violating women's rights. This is a technique used by other feminist writers and helps the reader be clear about the objectives of the researcher. Within these feminist traditions, therefore, FGM is not a practice that any ethical research can be impartial about. Hosken (1979), like many other Western feminists, assumes African cultures are barbaric. Despite presumed intentions of forwarding all women's

empowerment and freedom, her work leads to the reductive stereotypic generalization that does not contribute to a better understanding of the unique factors that contribute to FGM's perpetuation in some African countries and not in others. Some use modern religions such as that of the Somalis (Abdalla 1982), while others use ancient traditional religions such as that of the Maasai of Kenya (Skaine 2005). This makes it very difficult to pinpoint FGM in a specific culture or religion. That is why religious leaders and others in positions of power need to help make it clear that FGM is not a religious imperative. For example, an imam in my earlier research that used focus group discussions noted that FGM is not required by Islam, and not cutting your daughter is not a sin. This same imam also noted we should use the pulpits at the mosques to tell people that FGM is not an Islamic practice. This can go far in disentangling FGM from Islam and allowing the women to release their grip on it.

Only one classical sociological FGM research was carried out in Somalia by a Somali woman, named Dr. Raziya Haji Dualeh Abdalla, in 1982. Abdalla discusses the four types of FGM and their effects on women's reproductive health and notes that there is no medical reason to have this procedure. She also connects FGM with women's general lack of participation in matters of importance for their lives, their children, and society. As such, Abdalla (1982) notes that women should know that they are helping to further the patriarchal ideology of controlling women by submitting to this procedure and remaining silent. Abdalla explains the secrecy and silence surrounding FGM as unnecessary in today's scientific and technological age. She reiterates that there is a need for public education, which this dissertation project is taking further to include empowerment through activism. Abdalla (1982) argues that many do not know of alternatives to submitting to these practices, as they feel safe abiding by the societal norms of togetherness. However, Abdalla tells Somali women not to allow their bodies to be controlled

and mutilated. Abdi (2014) notes that Somali women continue to abide by their culture even after coming to the United States, where they can renegotiate gender roles. This is because women feel safer doing what they know, as they fear the culture in their new homes (Abdi 2014).

Through this dissertation, I attempt to empower women to help in reactivating their agency. This attempt is a direct result of the women participants in my thesis research, requesting that I take a leadership role in bringing the women together in my next study and uniting their voices.

Although I have not been able to do that in the way I discussed with the women in my prior research, I am trying to bring out the women's voices to create understanding.

Abdalla's 1982 work is a guide for understanding the Somali perception of FGM as an untouchable subject. Her important firsthand research highlights inaccuracies that were perpetuated by some Western scholars in their early descriptions of FGM and its effects among African women, and especially Somali women. The approach of the current research, of obtaining firsthand accounts through interviewing, also helps to give a clearer picture of Somali women's perception of FGM and the effects on their lives right here in United States while avoiding biases. It is one of the reasons why interviewing was selected as the most appropriate method to elicit information. Ethnographic thick description is used to further describe women's lives and experiences. Such a description is warranted, for according to Geertz (1973), explaining the little details and making the connections for the reader is what creates the thick description which helps in understanding a subject that is hard to grasp. The interviews on their part open a window into the women's thinking. This is in line with the standpoint and historical womanist theories, which advocate for both researching specific populations and making sure the scholar is reflexive enough to not hurt the participants during the research process.

According to Denniston and Milos (1997), communities that practice FGM believe that people's bodies are communal property. Viewing the sexual organs as not belonging to the individual but to the herbalists, elders, and community leaders helps center how culture may be a structural barrier to some. FGM is a multifaceted phenomenon, but also very different from how it is viewed in the West. Therefore within these communities, like the Somali community, FGM is not seen as inherently oppressive, which contributes to its continuation. Rather, the researchers note that many see it as a vital cultural connection. Among Somalis, this is also true as women accept FGM as a way of keeping their culture and staying connected with their kinsmen (Abdalla 1982; Boyle and Ali 2010). In other words, FGM is the connection. In her description of FGM and her warning against allowing patriarchal norms that subjugate women, Abdalla (1982) is trying to activate women's agency so that they can stand against patriarchy which is not an easy option for women.

Meanings and Reasoning Behind FGM

Many scholars including Barber (2010) and Abusharaf (2006) note that different cultures view FGM differently. Parents from practicing communities think it is the loving thing to do, as their cultures view FGM as essential to their daughter's future and identity because it improves the marriageability of the girls. Families also believe that they may be shunned if their daughter does not undergo FGM. These sentiments are also true among Somalis (Abdalla 1982; Boyle and Ali 2010; Bokore 2013). Some Somali men in a prior project noted that they would not marry a woman who did not undergo FGM because they thought she would be too wild for them (Abubakar 2013). The circumcisers may view FGM as a money-making activity even when they

do not receive direct payment. The fact that they are carrying out a valued social norm gives them social clout (Abdalla 1982; Abubakar 2013).

Further, Abusharaf (2006) explains that there is no uniform standard for genital cutting, as they vary in severity and reasoning. Every ethnic or language group also names them differently. In support of this statement, Abdalla (1982) notes that there are at least four types of FGM, and even Somali women acknowledge the existence of a severe and a mild form, calling the mild one *Sunna* and connecting it to Islam. According to Abusharaf (2006), FGM is not a single issue; rather, it is a series of complex and intertwined social issues that continue to be the social script by which people understand each other based on the culture, which informs the ongoing dialogue on FGM. This may be why Somali women continue to abide by the culture that they know, because they do not understand and are afraid of the culture in their new homes. Many of the women affirm this feeling by attesting to moving to Columbus to reconnect with their tribesmen, which is further explained in the coming chapters.

Skaine (2005) notes that FGM is a health, social, and legal issue, and is multifaceted. In other words, there is no question that many of these scholars find FGM to be an issue that touches upon women's lives all around. In addition, Skaine asked the participants in her study if FGM is a religious or cultural imperative. Her research concludes that it is cultural, as FGM is not a religious tenet; rather, people of different religions and those having no religion practice it. This study also addresses the issue of cultural and religious attitudes as they are manifested in the immigrant population. Like many feminist researchers, Skaine (2005) makes it clear that she is opposed to the practice of FGM at the very beginning. This is a common practice among feminists of situating themselves relative to the subject matter, as they come out in the beginning to make their opposition to the subject clear. However, Skaine does not force her ideals on the

women, which is exactly my stand as I let the women speak out about their experiences by asking open-ended questions that are meant to be conversation starters.

Bokore (2013) emphasizes listening to and documenting the experiences of women on different issues. As an expert on trauma, Bokore views FGM as trauma and she explores the experiences of prolonged trauma and its resultant effect on Somali women's health, as well as the possibility of trauma transference from mother to child. Bokore (2013) also examines the impact of displacement trauma to identify barriers to care for immigrant Somali women and to propose an appropriate and culturally specific health care response. Bokore is using her position and research to help immigrant women in their quest to maneuver through life in Canada. On my part, in a very small way I am bringing the women's voices out as a researcher and will continue to do so.

Boyle and Ali (2010) note that a top-down movement to end FGM will not work. This means that there is a need to involve the women who are affected at every stage of the process of their experiences, because a uniform application of frameworks will not work. Boyle and Ali are responding to the many countries that have outlawed FGM, but continue to allow the practice to be carried out in secrecy. Hence, a better understanding of the communities is warranted, and that is what this research is trying to do: Finding those women and men who are against FGM to help in ending the practice.

Communities That Practice FGM

Gele et al. (2012) explore the attitudes of Somalis living in Oslo, Norway, toward the practice of female circumcision. This qualitative study contributes to the knowledge of the process by which young Somali immigrants in the West may be rejecting FGM for their daughters. The only

problem with the study by Gele et al. (2012) is that it overlooks the fact that attitudinal changes do not come through policies of prohibition. Like Hayes (1975), Gele et al. make it seem as though Somali women talk to everyone, including men, about FGM; on the contrary, this is a private issue, which in my own experience is not discussed in gender-mixed groups and often not even with other Somali women. An anonymous internet survey for FGM yielded no results because of this fact. FGM is not an easy subject to talk about in public, especially for a community in which talking about sexual organs is taboo. That is why Abdalla says the secrecy surrounding FGM is unnecessary (1982), but the women affected do not see it that way.

Gruenbaum (2001) offers an exploration of FGM practices, covering the reasoning behind FGM processes, their social contexts, and the health, social, and sexual consequences. She also talks about the controversies surrounding the process of changing the mindset on FGM and addresses some frequently asked questions and challenges faced by those who teach and study FGM, including those by Gruenbaum herself, who was raised in Sudan.

Gruenbaum's work demonstrates that among communities that practice genital mutilation for their girls, the practice is considered an unremarkable part of their lives as well as private and, therefore, is a topic not easily discussed with strangers. Gruenbaum (1996) joins the debate on FGM but cautions against considering the practice as a lack of adjustment to modern conditions, as it would not survive as it has if that were the case. From Skaine (2005) we have learned that people of modern religions and some traditional African religions continue to practice FGM. Gruenbaum is telling us that assuming people are ignorant or have no religion, and that is why they are practicing FGM, is not only wrong but it may also make it difficult to eradicate this harmful practice. For this reason, it is important to hear from the women

themselves about how they view FGM and how they continue to engage in it. The women's voices will be more visible in the coming chapters.

Many FGM studies have focused on the Sudan and Egypt; hence, they have excluded some countries like Somalia from the popular literature, illustrating the need for more research into issues of Somali women's health. This seems to suggest that ethnic and minority scholars have a big role to play in studying their communities (Collins 2013).

Indications of Changing Attitudes

Clarifying that FGM is a political subject due to its power relations, Shell-Duncan and Hernlund (2000) discuss what is being done about eradicating FGM, and conclude that some progress is being made but more research needs to be done to get a better understanding of this phenomenon. Documenting community-based organizations and women's self-help groups, they note that such groups are trusted by their communities. For this reason, as grassroots powerhouses, such groups can potentially be a bridge to eradicating FGM.

Similarly, Fatuma Hussein is an activist and works with a nongovernmental organization (NGO) that helps women resettled in the United Kingdom. Hussein (2008) notes that due to the Somali people's relocation from Somalia and Africa to different parts of the world, they have met other Muslims who do not practice FGM, and that has helped reshape their attitudes toward the practice. Hussein also notes that these women think less of FGM itself, as they have been empowered through education and lifestyle changes after migration.

Hussein (2008) sets the tone by explaining that attitudinal changes among Somali women are not due to the prohibitive laws in the United Kingdom – where she did the study – but rather, a general education, lifestyle changes, and empowerment of women. Hussein's work affirms that

activists and academics can work together in understanding an issue of such stature as FGM. Hussein (2008) states her belief that FGM is rampant, and after her study affirms that Somalis from all different socio-economic statuses and regions in Somalia have undergone the surgery. She is also part of a team that is providing services to women affected by FGM through a nonprofit organization, providing substantiation that scholarship using feminist theory and research methods can be combined with NGO work, with the goal of material benefit for women. This also makes it easy for her – a Somali woman – to gain entry into the community and its secrets, and these women open up to her.

FGM As a Phenomenon of Patriarchy

Rodriguez (2010) explains how cultural practices that are meant to control women's bodies, such as FGM, are not isolated occurrences or cultural phenomena, but rather the invisible hand of patriarchy. Rodriguez facilitates understanding of how the privileging of males that accompanies patriarchal systems necessitate a requirement for women's survival, removing even a woman's agency in choosing the shape and appearance of their own genitals. Many may assume that women can decide to choose not to participate, but that is rarely true. For example, modern-day factors that accompany FGM include taking a girl out of school for marriage and the negotiation of a bride price, neither of which are optional for the girls involved because they feel they must do this in order to belong and have no power to prevent them. Additionally, girls are not asked for their approval in these matters, which makes it impossible for them to participate (Abdalla 1982). Somali women cannot make such choices because they are not included in the decision-making process; this is explained by Abdalla (1982) and, more recently, in Schrock's (2008)

dissertation, which depicts relocated Somali women as alienated due to the othering that they go through in the United States in her explanations of “narratives of alienation.”

According to Rodriguez (2010), within patriarchal systems, women as a collective group are systematically not represented or are underrepresented in the economic, political, military, criminal justice, legislative, and educational arenas. Rodriguez’s (2010) work serves as a foundation for this doctoral research by offering a model of centering the women’s concerns, which in turn is empowering as it starts a dialogue on what is considered an untouchable subject. FGM is an untouchable subject because it is taboo among many practicing communities to discuss women’s genitalia in public. This is currently the case in Somalia and, to a lesser extent, among Somalis in the United States and other Western countries (Abubakar 2013); this has been reiterated by women in this study because they did not discuss this subject with other family members apart from a few instances. These few instances consisted of young women asking their mothers about the FGM that they received as little girls, and each one was told that it was a rite of passage that should not be questioned. They were told they had an easier path than their mothers, and should not complain.

Literature on women’s health, specifically about reproductive health, abound. However, there is very little about Somali women, especially those who live in the United States. Women’s reproductive health is related to cultural practices, and the research explores who benefits from overseeing the processes of women’s health. Traditional birth attendants, caregivers, and circumcisers were women among the Somalis (Abdalla 1982). However, research also suggests that FGM is a tool of patriarchy, which cultures use to control women (Rodriguez 2010; Talle 2008). Even though FGM is in a category of its own, due to the way the practice affects different parts of circumcising communities’ lives, it was connected with attending to birthing and caring

for children, the infirm, and the elderly. For these reasons, the life course approach relates very well with women and health, and especially FGM. According to George (1999), there are three main principles within the life course approach. The first is taking a long view of the individual's biography, which involves looking at transitions in and trajectories of peoples' lives. Second, its focus is on the intersection of biography and history, or the effect of major historical events on peoples' life trajectories. Third, life course studies focus on linked lives; that is, the linkage of the different facades of peoples' lives. In my previous research, I found that the women participants were surprised that a researcher found them important enough to listen to their stories about their health (Abubakar 2013). However, Hutchison (2008) emphasizes the importance of learning about people's past histories to understand their current situations and their future trajectories in order to be helpful to them. According to Abdalla (1982), women who have undergone FGM are regarded as objects of men's pleasure. Therefore, their tale of pain or lack of pleasure is not seen as important. That is why it is even more important to encourage women to speak up and use their voices in the process of knowledge creation. Speaking out can also be used as a therapy to deal with the trauma that women have experienced. The trauma results from experiencing their culture starting from being unwelcome members of the family, having FGM surgeries, and being prevented from making decisions about their lives (Bokore 2013, Abubakar 2013).

Related to health is immigration, which has also generated interest from different social researchers and has been viewed as an attractive topic; however little work has fully explored the feelings and understanding of Somali immigrant women, particularly those connected to practices of FGM. My study seeks to generate knowledge on Somali culture and how Somali women conform to their traditional norms, and documenting the Somali women's experiences in

the United States. Thus, I will link the unique intersection of patriarchal oppression as it continues, albeit in a shifted fashion, as part of the Somali women's experience.

According to Anderson (1987), experiences in a new country, especially in a Western setting, affects the health of women from non-Western societies. This is important because it is grounded in the experiences of real people (Sprague 2005) and explores how they have real-life liberatory implementations. Such applications include using telling one's story as a therapeutic measure (Hutchison 2008). Understanding immigrant women's experiences allow us to understand individual perspectives, but also, as Bourdieu (2003) asserts, it is vital that the scientist understand the participants of her study to be able to produce scientific knowledge. Necessarily, this means ignoring their histories and how they came to be in the current situation is unreflective and unscientific (Bourdieu 2003). Hence this study has directly included the women's voices as an important part of the research itself, because the interviews are the data. It also includes observations of the women as they practice their culture to get a better understanding of how and why they behave the way they do

As stated earlier, this research project is about FGM, a tradition that touches many aspects of women's lives and affects their life chances of becoming members of their communities while they are little girls. As such, it is important to understand the origins of this practice, where it comes from, where it is practiced, and how it affects the lives of Somali women, and how they view it themselves (Bokore 2013). However, many have said that they do not know where it came from and how it got so intertwined with the Somali culture. Therefore, FGM is related to both health and immigration, as the target of this study is Somali immigrants.

Although gender inequality is a universal problem, Somali culture oppresses its women by making them unable to participate in their society (Abdullahi 2001; Abdalla 1982). This was

done by devising norms and values to shut women out of public discourse. Abdalla adds that these factors make it very hard for women to break out of the cycle of events. Weedon (1987) asserts that language is an important and powerful cultural tool that can be used by trendsetters – elders among Somalis – to create whichever meaning they want and to keep people in tow. For this reason, language is key to the power game that is played by the elders, by defining the culture as unbreakable and norms as unchangeable, and Somalis are socialized to accept them as such. Such a construct gives the elders political clout as they organize the rest of the community around that script, and that is how language has far-reaching consequences as defined by elders and uncontested by the rest. As we have seen before, Abdullahi (2001) and Abdalla (1982) assert that women are put down through the use of aphorisms that equate them with children and people with no brains, which in essence portrays women as unable and unwilling to participate in intricate matters that have importance for their community (Abdullahi 2001). Gender inequality, therefore, is situated in the composition of gendered social procedures and processes (Lorber 1994) and in the social rhetoric that operates within the society (Rousseau 2013), and is the script that is being used to create understanding within the culture regardless of geographical area (Abdi 2014). The women know the rules, or what is considered right and normal; it is all part of the language they speak and love (Abdullahi 2001). Even so, participants in my study unanimously agreed that language is the number one thing in their culture that keeps the connection, and that helps the children to learn their culture. Lorber (1994) also notes that this means that in most cases, policies are created by men who make sure that women have the lesser position in society, and that this status quo is maintained. In Somali communities, this is the case as elders are entirely made up of men, because women are not seen as able to represent a community because they are not carriers of the family name (Abdullahi 2001). Schrock and

Schwalbe (2009) note that we define gender in a culturally specific way, which can be seen from defining masculinity and femininity from cultural standpoints. In the case of Somalis, this means socializing boys as the leaders of tomorrow and affording them opportunities for advancement while making sure women lag (Abdalla 1982, Abdullahi 2001, Abubakar 2013). In the same way, Anderson (1987) notes that while accessing healthcare can be difficult for many, it can be worse for women who carry multiple marginal markers. It is even more difficult for Somali women to maneuver such systems, which is why they seek to move closer to others like them in big cities such as Columbus, Ohio.

Many experts note that gender inequality is a constant attack on women's health and well-being; and therefore, touches us all. As Somali women have been socialized to obey and not ask questions (Abdalla 1982), it is up to those of us who can speak on their behalf to do so and to do it now, because this is a matter of life and death (Bokore 2013). This very practical public sociological ideal connects this dissertation to prior studies, and even furthers research to include centering the women's voices as requested in earlier encounters between the researcher and Somali women (Abubakar 2013).

Varying Feminisms, Negative Social Rhetoric, and the Black Body

According to Crenshaw (1993), imagery representing Black women portray these women as the Other. The othering of Somali women is what Chambers (2017) explains as putting a target on them, as they are differentiated from other women of color. Further explanation about the practice of "othering" and what this means about an individual's place in society, including protection and access to education and opportunities for advancements, have been discussed by many scholars (Crenshaw 1993). Crenshaw reiterates that understanding intersectionality as a

way of framing the various intersections of marginal markers in the context of violence against women is useful in gaining a deeper understanding, which makes a thick description (Geertz 1973) necessary. Rousseau (2011) argues that the negative ways in which Black women in the United States are viewed have been built over generations, meaning that this way of thinking has been used for a long time and things need to change in order for Black women to be able to thrive. Similarly, Somali women who have been oppressed by their culture need a lot of things to change for them as well, and the only way to do so is by standing up to the patriarchy, even though it is not easy (Abdalla 1982).

Because Black women have unique histories at the intersections of systems of power, they have created world views out of a need for self-definition and to work on behalf of social justice (Collins 1990). Somali women share part of this world view; however, they also have specific histories, including their refugee and asylee/asylum seeker statuses, which create an added layer to their interactions (Abdi 2014; Bokore 2013). Collins (1986) explores and describes three cross-cutting themes that apply to Black female intellectuals who are trying to create knowledge' that is, Black women's self-determination and valuation, the interlocking nature of oppression, and the importance of Black women's culture. For immigrants, culture means the physical image that is caricatured by mainstream culture as one that does not belong here in America (Abdi 2014; Bokore 2013; Anderson 1987). Valuation has to do with the place of immigrant women as bodies that have been "othered" (Rousseau 2013). As for the interlocking nature of oppression, it includes the women's experiences in a dictatorship, their cultural oppression, and Western cultures that are unwelcoming to them (Abdi 2014).

Weedon (1987) argues that frameworks addressing concerns about how power is exercised and how social relations could be changed are useful for feminist research. This is

because according to Ahikire (2008), feminism is a political endeavor, as it disrupts the patriarchal structure that is present among many societies. The lack of power interlocks with low expectations for Black women in the United States and for women in certain African societies. Both Rousseau (2009) and Crenshaw (1993) assert that women of color occupy different positions in the economic, social, and political realms, and emphasize that these differences should not be overlooked. As such, feminism is not the same for all women, with White women benefiting from their whiteness, and Black women benefiting from their experiences as American citizens. Hence, Somali women, with their fear of their host culture, inability to assimilate completely due to religious differences, structural barriers that lock them out, and abusive cultural practices around reproductive health issues, speak not only a different language, but profess a different feminism (Shell-Duncan and Hernlund 2000; Nnaemeka 2005). Even so, Somali women are women of color; and understanding scholarship on such women can shed light on the experiences of Somali women in the United States.

Men are interested in sustaining gendered hierarchies (Abdi 2014). However, women are not passive actors, but rather actively partake in both resisting and perpetuating these arrangements (Abdi 2014), which takes us back to Rousseau's (2009) assertion that women take part in their oppression. Likewise, Somali women may resist parts of the Somali culture, but accept FGM as a special badge of honor (Abubakar 2013). Very much related is the reproduction of inequality as explained by Willis (1981), who notes that these processes of reproduction are individually and collectively reproduced; in this case of Somalis, the men reproduce oppressive circumstances, and the women reproduce their oppression by furthering the patriarchal goals of FGM. According to Abdalla (1982), women are involved in unceasing duties as mothers, wives, sisters, and aunts to produce and reproduce culture through the domestic duties that they

undertake every day. In her interview, Salado, an 80-year-old nomadic mother and ardent supporter of FGM, noted that “as nomadic women, we milked the animals, we fetched the water and firewood, we crushed the sorghum, we built the huts, and we carried our children.” In other words, these (and, by inference, FGM) were accepted norms of gender specialization.

Silence Around Sexual Violence and Reproductive Health

Within Somali society, women are required to show a sense of modesty and docility; therefore, they have no cultural context for dealing with the trauma of violence to their personhood (Bokore 2013). In other words, Somali women should not complain about pain or discomfort, even if they are attacked or violated (Abdi 2014, Abdalla 1982). Even when in labor, Somali women must take their cues from husbands, who refuse cesarean section for them until the last minute (Borkan 2010). In such cases, women must endure the pain until they get permission for relief to enforce their docility. This also enforces the “narrative of alienation” as discussed by Chambers (2017), who notes that Somali women are othered and that they know it. In this case, the women know they are the ones in pain, yet they let the men decide to save their lives even though these men have no medical background because the women are raised to see men as the decision-makers. Kessler and McLeod (1984) note that due to being socialized to carry other people’s burdens, women are not stressed only by what happens in their own lives, but are affected by things that are going on in their social networks. This way they are more stressed than men who are taught to think only of themselves, because they are more affected by attacks on their loved ones than by an attack on themselves. Among Somalis, this is more so because their men are taught it is their right to be served by women throughout their lives (Abdalla 1982). In the life course framework, this factor is known as *linked lives* as the women’s lives are linked

to countless others (Hutchison 2008; George 1999). Somali people practice arranged and forced marriages, with young women being given as brides to older men in exchange for wealth (Bokore 2013, Abdalla 1982). Child brides who know little about how to care for a home are forced to carry such a burden on top of a sexual life that they are not ready for (Bokore 2013). Older men who have paid for their brides are impatient and use crude objects such as kitchen knives to open their wives, causing them immense pain and renewing their trauma (Bokore 2013). Therefore, society and culture simultaneously dictate these abuses and silence, and hence victims cannot say anything about these violations – even to other women (Abubakar 2013). Even in the United States where they can report acts of violations to the police, doing so goes against social norms and values as these women are considered traitors, which can cut them away from the only community they know.

Additionally, Somali women suffer in silence because, within their culture, women are required to show a sense of shame (Bokore 2013) and are socialized to accept pain as part of being a woman (Abdalla 1982). This sense of shame and humility calls for women to be docile and to not stand up to oppression. In other words, a woman's womanhood is being contested and questioned (Rousseau 2011), and she must prove herself worthy by withstanding pain and violence.

Simultaneous Hypersexualization and Desexualization

The bodies of both Black men and women have been considered hypersexual here in the United States (Collins 2005). Collins adds that men are viewed as violent, problematic brutes and females as devoid of femininity. This creates scapegoating wherein women are blamed for changing family structures – for example, the single mothers who depend on welfare (Collins

2005). Goffman (2014) further highlights the importance of race in American life and experience and how ingrained it is in our society today; our bodies are differentiated by sex, but also heavily by race. This allows for Black bodies to be criminalized and, in the case of men, are framed as either having more uncontrolled sexual urges or forcing themselves on others, while women are seen as not “good” or not beautiful. According to Abdalla (1982), though controlling of women’s sexuality exists in every society, among the Somalis it takes the form of FGM. While Somali men enjoy increased freedom, women face dangers, restrictions, and insecurity because they are considered to have enormous libidos that need to be curbed (Abubakar 2013; Abdalla 1982). The fact that members of Somali society are afraid of women’s libidos reflects the power of FGM in preventing women from bringing shame to families by ng down their name, for if that part of their body that may influence the libido is targeted for removal, the problem is prevented (Abdalla 1982). In this sense, FGM is used to desexualize Somali women, and is equivalent to reducing their worthiness through that painful procedure (Abubakar 2013; Abdalla 1982). In Somali communities, after FGM a virgin girl will fetch a large amount of bridewealth; her father can ask for anything because his daughter has withstood so much pain and upheld the family name (Abdalla 1982). In essence, a Somali woman cannot be trusted with her judgment, and must be desexualized to be a woman. The practice of FGM as a result of patriarchy then is purported to inculcate a Somali woman into womanhood, yet, it takes away her womanhood (Abdi 2014; Abubakar 2013; Rousseau 2009; Collins 2005). Somali girls are groomed for a life of care, first in their homes and later in their matrimonial homes, and FGM is a tool that is assumed to welcome women into their communities. More of how this intricate subject is handled among the Somalis is laid out in the chapter on community, which discusses different issues such as culture, religion, gender roles, and immigration and how these affect the women’s

lives. The next chapter will discuss the theories and frameworks in which this dissertation is situated. These theories and frameworks help place this study within the wider area of feminist research and especially within Black and African feminist research.

Summary

In this chapter, not only is the literature reviewed, but the most important scholars are mentioned and their importance to this project is clarified. Even though I have tried to include a lot of literature that I wanted to employ to help me in creating a better understanding of the Somali culture, especially the ritual of FGM, I had to omit a lot. This is because bringing in the women's voices primarily involves *their* voices. In the ethnographic section, I clarify that this is one of the methods used to understand FGM. In the history of the FGM section, I establish that FGM has been around for a very long time and that it is considered important by the communities that practice it, and that though we have research dating back to the 1970s, more current research is needed. In the section on the meaning of FGM, research tells us that communities practicing it believe their daughters should be cut to have a bright future. In describing the community, assuming that members are barbaric or maladapted does not serve the goal of eradication of FGM and therefore, researchers must find a better way of interacting with such communities. Nongovernmental organizations and community activists are helping to educate people about the ills of FGM. Such activists are noting that there is hope that diasporic communities are changing their attitudes towards FGM, albeit slowly. The section on FGM as a phenomenon of patriarchy describes the practice as one way that patriarchal systems use to downgrade women and control them. In the varying feminisms section, I presented studies that have shown that there is no uniform way of looking at women and their issues. In the section on

silence, I share studies that depict the Somali culture as silencing women and forcing them to endure pain without complaining, as these women are taught to be modest and docile. The final section shows that FGM, which is meant to prevent shame and protect family names, targets a specific body part for removal, thus hypersexualizing women and then desexualizing them as they are not supposed to experience pleasure. In sum, the literature review has clearly shown the fact that a better understanding of the literature on FGM is required, and this is an entry point for my research: to improve understanding of FGM among Somalis by highlighting the women's voices and seeing where they are.

CHAPTER 3

THEORETICAL FRAMEWORKS

This chapter elucidates the multiple theories that support my research. Western theories, including Intersectionality, Standpoint, and Historical Womanism, combined with African Feminism to provide the framework for this project. In making these connections, this research builds a solid understanding of the lived experiences of Somali women living in the West. These theories allow my research to expand on existing literature in understanding the women's lives and center their experiences in Black/African and feminist discourse, etching their stories firmly into ongoing feminist discussions.

This study uses Intersectionality to explain a cultural phenomenon that not only disempowers women, but also is meant to disengage women from public discourse. Standpoint theory positions this researcher as a member of the Somali community in the United States, while an African feminist theory is the foundation of all my work. This lens explores the ever-present underlying realities of the colonization of women's bodies and minds. Finally, Historical Womanist theory highlights ways in which social rhetoric positions Black women as the "other." What follows is a deeper discussion of each one of these frameworks, and how they are applied to my research.

Intersectionality Theory

According to Crenshaw (1993), intersectionality is a way of framing the various intersections of race and gender in the context of violence against women. Crenshaw emphasizes that this is done through the imagery representing Black women, and describes how the system has generated and replicated these images, with race and gender hierarchies marking Black women as different. Casting doubts and questioning Black women's womanhood as something that must be earned, instead of something that they inherently are, puts pressure on Black women and makes them abide by different sets of rules than men and other women (Crenshaw 1993). Somali women face similar pressures to adapt to a culture that does not accept them and that they fear. Saida, a 38-year-old mother of two in my study, said "the only reason I moved to Ohio is there were no mosques where I lived in Florence (Kentucky). I also want my children to learn my culture and there are more Somalis here in Columbus." For one reason or another, Somalis – especially women - engage in secondary migration to Columbus and surrounding areas (Chambers 2017). Saida came here for religious purposes, and to help her children get connected with her people. Such a move would make it easier for mothers to parent, for children to thrive in school, and for families to practice an important part of the Somali culture, their religion. Further, in joining a Somali enclave, connections can be made with Somali professionals such as doctors, psychologists, lawyers, organization managers, and business owners. Otherwise, Somali children growing up in small towns and cities only see Somalis as limited by illiteracy and an inability to engage with teachers, doctors, and friends and neighbors. Further, with limited education and ongoing processes of marginalization, these children often grow up with absent fathers, as the fathers are forced to work to excess, and mothers are unable to successfully advocate on their

behalf due to language barriers (Abubakar 2013). Being with other Somalis is also important for Somali women's emotional and psychological survival and, more importantly, for them to thrive. This meaningfully relieves some of the alienation experienced by Somali immigrants.

Standpoint Theory

This framework provides an outlet for voicing the stories of the women in the study and guides the reader toward a deeper understanding of the respondents. Standpoint clarifies the intersection of the researcher's place and position as well as that of her subjects. Standpoint theory holds that all knowledge is constructed within a specific matrix of physical locations, history, culture, and interests, which change in structure from one location to another (Sprague 2005; Smith 2005). This means that culture changes, though slowly; therefore, it is important to try to understand how this evolution affects people who practice certain cultures in the diaspora. After exploring issues of power relations among researchers and between researcher and participants, Sprague (2005) notes that Standpoint theory increases the prominence of the interactions between power and authority, which influence who generates knowledge and how it is generated. In other words, Standpoint theory allows women to express their perspectives and lets the researcher treat these voices as legitimate data that can turn into scientific knowledge after analysis. This perspective is engaged due to its far-reaching implications when exploring White masculine spaces, which disallow women researchers and participants and people of color, and a share in the social and academic space; it can also explore how different groups of women identify with different types of feminisms. For this reason, Standpoint theory will ground this project as it seeks the perspective of Somali women regarding specific beliefs and practices through asking critical questions. Standpoint, therefore, is helpful in telling the women's stories in their shared

experience. It also helps researchers to be respectful of the women in trying to understand their lived experiences, because these women are the experts in this knowledge creation process about them and their culture. In one sense, this theory also has a strong relationship with reflexivity, as discussed by Bourdieu (2003), as in order to discuss Somali women's lives and lived experiences requires first properly understanding them and their narratives. This will include trust-building through interaction even before the interviewing sessions begin, so the women know the researcher and the researcher's intention to help tell the stories of the women. It is also important to keep interacting with the women to continue to understand their culture. As will be seen from the following chapters, especially the discussion of Somali culture, that is how we learn about many of the women's activities outside of the interviews.

African Feminism

When studying feminism, people tend to associate its roots, application, and larger discourse with Western ideology. Mikell (1997) emphasizes that issues important to African women are very different from what Western women are agitating for. Although some criticize her work as simplistic and essentializing, Mikell's landmark book has brought together writers with experience on the African continent and pertinent Afro-centric feminist issues. For instance, unlike in the United States, the politics of women's survival revolves around global social issues such as land and property ownership and the control of food distribution. Therefore, non-Western feminism must address the importance of African women's connectedness to these issues, as they must struggle for access to such resources (Mikell 1997). This means that the women in parts of Africa are trying to set the feminist agenda by taking part in the creation of national laws that consider their ideas as wives. It seems these women are not fighting their

traditional roles as mothers and wives; rather, they embrace these identities and want to be included in the discourse without having to disavow any aspect of themselves. Somali women as African women deal with many similar obstacles, and face further alienation in the West as they are seen as the “other” due to their looks and their different forms of dress.

African feminists are also tackling issues of inheritance for the women and children who are left behind after their husbands and fathers die (Mikell 1997). These are very important issues facing many African countries, and feminists have continuously agitated for policies that ensure women and children are not disinherited by their male relatives and also ensure that they become laws. Such laws would protect a whole segment of the population that is usually left in poverty by the patriarchal laws of the past (Mikell 1997). Such laws are still in use, and women who have experienced them continue to be afraid of the government here in the United States as well (Abdi 2014; Abubakar 2013).

According to Ahikire (2008), feminism is the struggle for the alteration of gender relations. As such, especially in the African context, it has far-reaching consequences because feminism challenges patriarchal systems, and these changes are unwelcome due to their perceived disruptiveness. In essence, what this means at its core is that feminism is a personal issue because it touches deep inside each person but requires unified actions that each person cannot work out by themselves (Ahikire 2008). Ahikire (2014) also notes that feminist struggles have shaped societal views, and have led to the reimagining of the African Identity, which she notes is understood as a direct product of African feminist engagement on various fronts. Further, what this implies is that even though paternalism exists due to the external funding of feminist studies and gender streamlining projects in Africa, it is important to know that African feminism is not dependent on the West to generate ideas for them (Ahikire 2014). In other

words, African feminists are a proactive and diverse group of people who have divergent issues and views rather than one homogeneous group that can be simplistically situated.

African feminism, therefore, is a complex and multifaceted endeavor that not only generates knowledge but has made political and social strides that cannot be overlooked (Ahikire 2014). For this reason, explaining issues that African women deal with must be respectfully viewed from the lenses of the women themselves. As such, women from these communities should be encouraged to own the expertise that accompanies the depth of experience they share. They must be empowered with the authority to speak up and speak out. Authority for our purposes means the power of these women, who know their lives better than anyone else, cannot and should not be shut out of the discourse around issues that affect them.

A large portion of African feminism operates under regimes that have come out of colonization. Such regimes continue to stay under neocolonial and paternalistic overtures of the West (Ahikire 2014). For this reason, people under these regimes, especially when their leaders continue to enforce the colonialist agenda, are afraid (Abdi 2014). One of the overarching themes that came out of colonization is religion. According to Sowa (2017), religious texts have been interpreted by men and elders who have used them to gain and stay in power. However, feminists have tried to work their way with and around the scriptures. Sowa's discussion with three women of faith, Win, Sow, and Kanyoro, brings to light other demands on African feminism regarding religion and women. This highlights how it will not be helpful to point fingers at each other regarding professions of faith and being a feminist. This discussion allows room for a stance that does not reject any aspect of a woman's identity: one can be religious *and* a feminist. This directly confronts the critique leveraged by many feminists who have complained that dressing a certain way has been equated to subservience – especially wearing a head covering for religious

reasons. Among Somalis, elders are all men; hence, even educated women find it very difficult to have a say on matters affecting their lives (Abdalla 1982, Abdullahi 2001). These include religious questions about life and living because, in Somalia, all religious scholars also are men (Abubakar 2013). That is why Somali women are afraid to ask questions as an imperative they do not know how to deal with. A Somali imam said that people should always ask questions (Abubakar 2013); unfortunately, many women do not know this, as not all religious leaders openly express such sentiments. This dissertation study confirms what Mernissi (1991) found in her research: that women are taught not to bother to find truths behind certain concepts, and are sometimes strongly discouraged against this. For this reason, even in the United States, Somali women still hold their tongues.

Further, Mohanty, Russo, and Torres (1991) note that even though African feminists are a recognized category of analysts and multidisciplinary people, there is still a tendency to subordinate divergent feminism and all women's oppression to Western feminism as the originator and the dictator of how knowledge is generated. This is manifest in the designation of terms such as "Third World," functioning not merely as a geographical area but having the connotation of subordination. That is why it is important to study the experiences of immigrant women such as the Somali in Western countries and how that compares to their lives before resettlement. This study honors Somali immigrant women by requesting their answers to questions that revolve around their lives before and after migration. Some African feminists have complained about how certain issues regarding African women are studied. These include FGM, which is used to further the imperialistic standards of the colonists and portray the African woman as always a victim (Oyěwùmí 2003), even as many feminists have reiterated that women are choosing their battles, as fighting on every front can be dangerous to their very survival

(Abdi 2014). For this reason, these women are keeping their culture as it welcomes and beckons to them, even as they let go of parts of it such as allowing their daughters to get an education at every level and in every formerly male-dominated field such as medicine (Abdi 2014).

In her edited volume, *African Women and Feminism: Reflecting on the Politics of Sisterhood*, Oyěwùmí (2003) brings together African women born and brought up in Africa. The very act of publishing such a collection can be viewed as activism in the sense that knowledge generation should not be colonized. In publishing this volume and in similar academic efforts, Oyěwùmí and other African feminists are insisting on being included in the academic discourse concerning their societies (Oyěwùmí 2003). Oyěwùmí is a springboard for this research, because as an African feminist myself, she has encouraged my research, and one reason why is because I am an insider to this community under study. It is, therefore, easier to find the nuances that may be hidden from others who are outside this culture. Rather than considering this research to be an exploration of odd phenomena, it instead seeks deeper insight into the community and elicits important information from previously silenced Somali women. Even though culture changes, albeit slowly, Somali women have been taught to obey and not to ask questions because men hold all the power in our culture (Abdalla 1982). This makes women believe that culture is unchanging and they are afraid to bring changes themselves. At the same time, Abdalla (1982) is telling women not to be resigned to enslavement by the patriarchal culture controlled by men.

Like other African feminists, Oyěwùmí (2002) declares the difference in feminisms and emphasizes the issue of arbitration of the concept of gender, which she says for White feminists is trapped within the family as a unit of analysis. Further, the Western nuclear family is very different from how a traditional family is viewed or talked about among most Africans. Discussing the Yoruba family, she notes that it traditionally places the mother as the center that

holds the family together as a fulcrum. This is in opposition to how Western feminists portray the wife as subordinate to the husband and not playing a central role in the family (Oyěwùmí 2002). Among Somalis, even though the mother's role is not publicly lauded, mothers are important to the survival and thriving of the family, as they are the producers of the different products including children, food, and even houseware such as huts, prayers mats, beds, and utensils (Abdalla 1982). Here in the United States, women in general and mothers in particular have become central to the Somali identity as they are the bearers of the cultural banner (Schrock 2008), and are visibly different in important ways such as dressing in a religious and cultural mode considered important among Somalis.

These intricate and sometimes complex differences cannot be ignored all the time and must be directly addressed. As Collins (1990) aptly puts it, feminists of color have an enormous but invaluable task in bringing forth the voices of people of color. Another African feminist, Ifi Amadiume (1987) portrays the Igbo people's gender roles before the arrival of the Europeans, unequivocally emphasizing how this society was traditionally egalitarian with gender roles reversed until colonization forced females to become subservient to the males in adherence to the Europeans' ideals. After independence, access to agency declined for women in most colonized countries, which disrupted their matriarchal systems. According to Fanon (2004), for colonizers to be able to take over people's lives, they must disrupt their cultures and scatter their way of life until the colonized are completely overtaken. Colonizers also transform the narrative to make the people they colonize believe they have been changed for the better. That is why, even though they may not consider it to be more beautiful than their natural looks, women of African descent are known to mimic the skin color and hair types of White women. Fanon (2004) also notes that Black people are marked as Black people, while White people are unmarked as people, with

women marked and Black women marked even more. Here in the United States, even though women have become the bearers of the cultural banner, men continue to hold the cards to keep women in line (Abubakar 2013). This is done through conflating Arab culture and Islam, and teaching that to women as religion. That is why even though women are the backbone of the family, they still have no power to take the necessary steps to unify their voices (Abdi 2014).

As is evident from feminist writings, both academic and literary, African feminists are trying to create a space for women in research (Cornwall 2005). This means that feminists are engaging with topics that are important to women through academic research work and activism, both scholarly and community-based. It also means that feminist scholars are multidisciplinary as they are poets, community organizers, journalists, and scientists, to name a few roles. It is disingenuous to assume that only specific academic disciplines can produce knowledge because that is the colonial thinking of disregarding large portions of society to assume what they think and what they know is unnecessary (Mohanty 2003; Oyěwùmí 2002). There is, therefore, a real need to decolonize research. Decolonizing research starts from accepting that knowledge and science belong to all of us, not only a small portion of the public (Collins 2013). In teaching methodology in feminist research, Sprague (2005) notes that scientific knowledge can be produced by different methods rather than a specific, singular format. Even so, many feminists decry the current positivistic science that makes it impossible for women and minorities to excel in science (Beckman 2014). One way of avoiding this quagmire is by having graduate programs accept multidisciplinary methods of conducting and analyzing research. Such methods can include mixed methods or a single method, and should let the question and personal preference lead the way to selecting and using methods (Collins 2013; Sprague 2005). For example, feminist methods assert that gender and race are social identities that must be recognized in

research conceptualization, analysis, and interpretation (Beckman 2014). This can free much-needed resources to be shared equitably instead of overfunding specific programs while letting others die due to lack of funding (Beckman 2014). On their part, African feminists such as Ahikire (2014) emphasize their ability to create knowledge and even academic departments, such as women's and gender studies departments at universities in Africa like Makerere University in Uganda. Ahikire (2014) also discusses how such universities are bringing together feminists from different countries who are dealing with diverse issues and studies to discuss ways forward within each researcher's context. An important step that makes women feel welcome, however different their issues are, is to give them a platform on which to discuss their issues. This is important for my research because even though immigrants including Somalis may be a small group compared to the rest of Americans, they are a growing population whose public health needs must be explored, and experiences validated.

Most of the Somali women immigrants to the United States have been through refugee camps or have urban refugee statuses; that is why it is important to know what these statuses mean in an international setting (Abdi 2005; 2014, Bokore 2013, Abubakar 2013). According to the United Nations High Commissioner for Refugees (UNHCR), a refugee is someone who has been forced to flee his or her country because of persecution, war, or violence. Asylees, on the other hand, are asylum seekers who petition for the right to be recognized as refugees to receive legal protection and material assistance to help them put their lives back together (UNHCR 2014). Understanding these nuances makes this study adhere more to reflexivity, which Bourdieu (2003) insist are important for properly understanding the women's lives through the process of looking back at their lives before moving to the United States. Doing that, they note is

unscientific because it is unreflective. It also helps this study use the African feminist lens in understanding African women's lives and the kinds of issues they deal with (Ahikire 2008).

Like Mohanty (2003) suggests, it is important to recognize that African women or women of color are not a singular group with the same needs. Rather, it is a diverse group with divergent needs and struggles, as noted by Ahikire (2014). Both feminist scholars explain that African women and other women of color deal with many issues that may not be known to White women. Their main concerns are for assumptions not to be made about these women's experiences, at least not without consulting with them. In this dissertation, my study attempts to help outsiders understand Somali culture through the women's experiences. Richelle Schrock in a 2018 article notes feminist ethnography is a project dedicated to recording lived experiences as impacted by people's identities and other aspects of their lives. This dissertation project, therefore, is a feminist ethnographic endeavor using in-depth interviewing in order to uncover the deep-seated attachment of Somali women to their culture and how that affects their lives in the United States.

According to Ahikire (2008), African feminism is an innumerable multiplicity of theoretical perspectives originating from the complexities and specifics of the different material conditions and identities of women, and is informed by the many diverse and creative ways in which we speak truth to power in our private and public lives. This means that no single woman's view should be disregarded as unimportant, and no group of women should be simplistically placed in a bundle. As Smith (2005) also notes, this is important to feminism as a sociological endeavor. For Somali women, this can be a way of opening a conversation that can lead to the empowerment of women through unifying their voices (Abdalla 1982, Abubakar

2013). It is also a way of showing them how their culture has subjugated them to their men and made them unequal (Abdalla 1982).

Studies of inequality including colonization show that oppression cannot continue unabated. For example, according to Fanon (2004), although it is a violent process, decolonization is highly desired by the colonized as they seek freedom from oppression. The colonizers, however, fear independence and therefore try to put every obstacle in place to make it difficult for the oppressed to move forward with the change they wish to achieve. These obstacles are what Fanon calls the “spiral of domination and exploitation” (2004, p. 14). Feminism meets similar obstacles, with women of color facing an even more uphill battle, and African feminists a more complicated battleground (Lorde et al. 2009, Ahikire 2008). For feminism to move forward, Falcon (2016) insists that there should be system overhauls and paradigm shifts to include feminist research methodology. Although Somalia was colonized by Europeans and other forces (Metz 1993), Somali culture continued to colonize Somali women after independence and disallowed them from having full membership in their communities (Abdalla 1982). Further, because this culture was taught through poetry and other traditionally valuable oral means, women learned and taught it to their children as a sacred truth (Abubakar 2013).

In using the concept of colonization as explained above as one that denotes oppression and undercuts the rights of Somali women to make decisions concerning their bodies, I seek to clarify how the women feel about their culture and how they continue to practice it in the United States. I am also using Amadiume’s (1987) explanation in her book, *Male Daughters, Female Husbands*, in which she describes how colonizers changed the division of labor and gender roles in the Igbo tribe. She notes that the tribe was egalitarian and mothers had a central role in the

family; whereas, after colonization, patriarchy became more dominant and unfortunately never left the tribe after independence. Therefore, not only does colonization dominate and completely take over the lives of the colonized, but it also leaves scars in the fabric of that community that become very hard to repair. Among Somalis, after colonization came illiteracy, a dictatorship, a patriarchal culture, and misinterpretations of religious texts. It would therefore be disingenuous to ignore colonization of the minds of Somali women when discussing the dynamics of FGM within this dissertation.

Historical Womanist Theory

Historical Womanist theory is a versatile tool for discussing the history of inequality as rooted in slavery, the commodification of black people to make a profit, and intersections of marginalizing markers on Black women (Rousseau 2011). As is well established, slavery started from colonization, when the colonizers took some of the people they colonized to further exploit in the West. Black women have unique histories at the intersections of systems of power; due to these factors, they have created world views out of a need for self-definition and to work on behalf of social justice (Rousseau 2011). Somali women share part of this world view; however, they also have specific histories including their refugee and asylee/asylum seeker statuses that create an added layer to their interactions (Bokore 2013, Abdi 2014). The works of Collins (1990) and Crenshaw (1991) support Rousseau's assertions about Black women's history of marginalization and commodification. Further, according to Crenshaw (1991), considering marginal markers separately causes researchers to miss how they burden the women's lives at the same time. For this reason, it makes more sense to look at the Somali women in my study as visibly Muslim Black immigrant women whose lives are affected by how they are viewed when they look for

employment or education opportunities and when they access healthcare. Also, colonization of their minds by their own patriarchal culture makes them more susceptible to violations (Fanon 2004). According to Abdi (2014), people from formally colonized countries, especially those who witnessed it, tend to be afraid of foreign cultures, more so among women who cannot read or write, and in the present day they continue to teach their children to be afraid (Abdi 2014, Abubakar 2013). To reiterate, women have learned this culture through oral means, and continue to teach it to the next generation as a set of valuable norms among Somalis (Abdalla 1982, Abubakar 2013).

Rousseau (2011) notes that understanding the nuances of Black women's experiences, and in the case of this study, Muslim immigrants from Africa, makes this study adhere more to the womanist perspective of studying a specific population with specific needs. With this permission, this study explores both the social rhetoric which is a currency that the women cannot use as they have been marked (Fanon 2004), and the commodification as well as commercializing of their bodies, while giving the women a platform to speak about these issues (Rousseau 2011). The issue of bridewealth within the Somali culture has been established by Abdalla (1982) as the commodification of Somali women, which pairs well with the work of both Rousseau (2011) and Fanon (2004).

This chapter focused on the frameworks that support the course of this dissertation. The main theoretical framework or the backbone of the course of this dissertation is intersectional theories, both Western and African, especially feminist intersectionality. Although it appears that there are many different theoretical frameworks, these are interrelated but different, which helps to elicit information from participants and at the same time helps to bring their stories to readers while respecting them and treating them as experts, as is advised by the frameworks used. In the

following chapter, an in-depth discussion of the methodology that was used in this research will be explored.

CHAPTER 4

METHODOLOGY

To understand FGM and explore Somali women's relationship with this cultural ritual and the norms and values surrounding the practice, qualitative methodologies have been selected. Qualitative research was chosen for this project as it seeks to elicit and contextualize Somali women's experience of FGM and to encourage discussion among women concerning its "staying power" despite its invasive and traumatic effects (Abdalla 1982, Abdi 2014). This also speaks to the Black feminist approach as a mode of data collection and analysis, not just a theoretical lens. Among qualitative data collection methods, in-depth interviewing is employed for this research as the main method of data collection because it helps to tell the story from the women's perspective (Lofland et al. 2006). At the same time, observation was used as a minor mode of supplementing the interviews. Ethnography is being employed here as broadly defined by Gordon (1984), a qualitative method that relies on the researcher to not only observe but explain and describe the phenomena under study. As such, this method makes this study possible and helps the reader understand it. The interviews were semi-structured.

This study identifies FGM as a specific problem, which it proceeds to address by theoretically placing FGM among other concepts of women's oppression. To understand FGM

and the issues that surround the practice, this project explores Somali immigrant women's views on FGM and asked a number of questions, answers to which will be explored in later chapters.

In completing a pilot project related to my thesis research, internet surveys failed to elicit meaningful results. While they offered anonymity, they also lacked prompting by the investigator, resulting in no findings. In my second round of data collection for thesis research, a focus group discussion was attempted. This method proved inadequate as well, as these topics were taboo and respondents were unable to speak freely among a group of their peers. As an insider to Somali culture, it became clear that the best way to approach these forbidden and private issues was through one-on-one, in-depth interviewing supported by ethnographic participants and cultural observation. This allows the respondents the necessary space to reveal their attitudes and beliefs more freely and in greater detail, as follow-up questions can be asked, and the research becomes a conversation. This method also follows feminist traditions, especially those of other FGM researchers including Abdalla (1982), Abdel Halim (2006), and Bokore (2013). These scholars are Somali, Sudanese, and Ethiopian researchers who study other issues that are important to women from their countries of origin, which they deal with here in the United States and Canada. As you can see from the dates of their research, it is about time to carry out this timely research because all these studies are older –carried out 39 years, 15 years, and 8 years ago respectively.

Protection of the Research Subjects and Other Ethical Considerations

Knowing the sensitive nature of FGM, I sought the advice of other researchers from the Somali community on how to proceed. I then settled on requesting a waiver from the Institutional Review Board (IRB) for the consent form. This means that the consent agreement was verbal,

and there was no signature linking any of the participants to my study. To further protect identities, I also requested that they not say their names during the introduction, as many Somalis may begin by identifying themselves as so and so. The names used in this dissertation are assigned by me as pseudonyms.

Because of the sensitive and traumatic nature of FGM, participants were informed that they may become emotionally distressed. Breaks were provided when needed. Provisions were made to refer women who seemed distressed to seek help from the Community Refugee and Immigration Services (CRIS) and other organizations. However, none of the women interviewed expressed emotional upset or symptoms of crisis.

The Sample

This study recruited participants through snowball sampling and collected data through individually interviewing women in Columbus, Ohio. Any Somali woman aged 18 and above who lives in Columbus, Ohio was eligible for recruitment. The women were contacted directly through person-to-person purposive sampling strategies. Somali women who were born in different places including Somalia and refugee camps in Africa and the Middle East are tied together by the Somali culture and its patriarchal leanings (Abdi 2014). For this reason, place of birth is not a condition of participation in the study. The two languages of the sample were English and Somali.

Snowball sampling was done through word of mouth and distribution of my phone number to women who were potential subjects for my research. One day as I was leaving my house to go for a walk, I met with an elderly Somali woman who was also walking in the snow with the wrong shoes. As is customary among Somalis, I ran to her and offered a shoulder for her

to lean on and held her hand. I took her to her house where she changed shoes, and we went for a walk together. She asked me to pass by her home every time I was going out for a walk and that is what I did. She asked me what I did for a living, and I explained to her that I was a researcher and that I wanted to write a book – a dissertation – to graduate. After explaining to her my topic, she offered to be my first interviewee and talked to her youngest daughter about participating in the study as well. As the other women got to know me and asked me about my life and education, they seemed to be proud to have one of their own doing this kind of research, and each one called and set a time for the interview. However, I had to speak to them first by explaining my research and asking them to reach out to me if they felt comfortable talking about Somali culture, including FGM.

In another case, after talking to one woman on the phone, she gave me her home address and an appointment time. When I knocked on her door at the appointed time, a different woman popped out and when I asked her if she were so and so, she said that she could do anything the other woman could. She offered to speak to me, and that is how I interviewed her, her sister-in-law, the interviewee with whom I had the appointment, and her mother, separately.

Though the sample size is very small, I want to highlight that this is one of only two studies of its kind among Somali Muslim immigrants from Africa. The other one was my thesis research, which employed focus group discussions and was also set in Columbus, Ohio. As an insider, I have been able to elicit information from these women, whose silence I cannot emphasize enough. The power of a study that relies heavily on their voices is very important as these are people who have been silenced forever. Another issue to point out is that the women, though few in number, were unanimous in most of their answers. This created saturation and makes it likely that if we had more participants, they would have answered in the same way.

Although I am an insider of the community, in a way the women who participated also consider me somewhat an outsider. I felt it most as I saw their fear of outsiders and how they perceived me to be comfortable with the outsiders. A woman in my study told me that her daughter swore that I could not have a master's degree at the time of the interviewing because I looked like regular Somali woman my age would. This helped solidify my insider status. The women also used me as a witness to our shared culture.

Data Collection/Interviewing Procedure

This study was conducted in Columbus, Ohio, which has the highest concentration of Somali immigrants, this study's target group in one US city (Chambers 2017, Somali Community Association 2015). Columbus is a large city in the Midwest United States in which many Somali refugees have been resettled (Schrock 2008). There have been several influxes of immigrant communities to this city, mainly through secondary migration from other parts of the United States and Canada in order for immigrants to be closer to resources including culture and community (Chambers 2017). From six individual families to 100 people in the early 1990s, the Somali community has made a home in Columbus, Ohio which now boasts of up to 65,000 Somalis in Franklin County, Ohio (Schrock 2008). Therefore, it was important for this project to carry out the data collection in Columbus, Ohio.

A total of 14 Somali women were interviewed in-depth over three months. These women were interviewed about their views and experiences on FGM, their lives in the United States, and how they practice their culture in the United States. (A Full interview schedule is found in appendix A).

The interviews were conducted individually with each participant in their home and at a time of their choosing, based on their availability and convenience. Eleven interviews were carried out in Somali, and there were three in English.

The direct question and answer sessions were planned for an hour to an hour and a half each, although in some cases the interviews were completed in less time. Interviews were recorded with the permission of the participants. To build trust with the interviewees and elicit information about the women's concerns, the questions started with general inquiries and moved to more personal questions. Examples of the topics include how and when a woman came to this country, how integrated they are into their neighborhoods (especially for those with non-Somali neighbors), how they practice their culture and religion and pass it onto the next generation, and how they feel about FGM.

Myself as Researcher

Collins (2013) notes that to challenge the power structures of society from the inside, one should know the inner workings of these structures well. As a Somali woman and feminist scholar who comes from an FGM-practicing community, I am in a unique position to engage in this research and thus generate a better understanding of an understudied aspect of this phenomenon (Collins 2013). While most of the literature on FGM centers on its effects, this study will deeply examine why the practice and positive sentiments toward it continue. The positive sentiments are the women's acceptance of the important role of FGM in their lives.

Lofland et al. (2006) note that the position of the scholar is central to the research. I am a researcher, but I am also a Somali immigrant woman. Speaking the Somali language and dressing similarly to most mainstream Somali women has helped me gain entry into the

community. However, according to Lofland et al. (2006), being of the same culture is not a guarantee of in-group acceptance and admittance into confidences in all cases, which has necessitated my negotiating and renegotiating my approach as I was immersed in fieldwork. My previous research provided me with a cadre of potential respondents to start from. However, I also had to speak with the women and interact with them as a neighbor and friend before and during my interviewing to learn about their lives.

Although I abhor female genital mutilation, I have not imposed my values. Rather, while conducting interviews I have asked questions relating to the women's feelings, concerns, and perceptions of their lives, such as their struggles in the United States. For these interviews, I generated specific questions including how they feel about FGM; these questions were neither leading nor close-ended to the extent that they might demand a specific answer. The women were free to respond with their thoughts and ideas without coercion. Occasionally, the women tried to pull me in by using me as a witness to the culture – which I am – by asking me to answer the question myself. In those cases I have gently nudged them to answer the question themselves regardless of my status. For example, Salado, an 80-year-old woman said, “You are a Somali mother yourself, are girls born with clitorises?” when I asked her why girls are cut. In another instance, she said, “if this girl reaches adolescence without being cut, can she read the Quran?” These exchanges show that women were looking to me to basically answer my own questions, or even to fill in hard details while they were telling their stories. This points to the reverence women have for others. As a highly educated woman, the women respected me as a researcher and a professor-to-be. This position also puts me in elder status, as I have broken the barrier that so many women face in my community. This made the women see me as a person of power as I had essentially become a man to them, in the patriarchal sense.

Muslim Somali immigrant women rarely, if ever, get asked to provide their accounts of their experiences, especially regarding FGM and other cultural issues. Lorde (2003) notes that downtrodden women's voices do not travel far or are not heeded. Therefore, she suggests that we listen to such women. This research has built on this advice by listening to Somali women's voices. This is fundamental to Black feminist methodologies; for example, Historical Womanist theory places Black women at the center of its research as the core to its knowledge creation. The women were surprised that they were considered important by a researcher. As I have explained above, the women saw me as a person with clout, even though they were also taken by my humility as a neighbor, a community member, and as a teacher, because I also provided other help for translation and training in how to handle issues related to their children's educations. For example, I explained to the women the importance of following up with their children's teachers to make sure their children did not fall behind. I also informed them that if they did not speak the language, they have the right to an interpreter which should be provided during conferences, to go over concerns and questions with teachers and school administrators. This facilitated my discussions, and women offered to clarify and answer any questions I had, even after the recordings. Some of the women told me that they had never been interviewed about their lives and were a bit nervous about talking. However, the arrangement of the interview guide helped keep them at ease. This is because the general questions at the beginning helped open them up to the more cultural questions at the end.

Analysis

According to Lofland et al. in their 2006 book, *Analyzing Social Settings*, the process of turning observed phenomenon into knowledge or information that can be understood by others involves

four things: 1) the analysis is inductive because it does not prove or disprove a hypothesis; 2) the researcher is the core and center of the analysis process; 3) it is an interactive process; 4) it is a labor-intensive process that should be methodical. This research has these characteristics. For example, it uses induction in starting from the data, which are the women's voices. The researcher is also the core of creating an understanding of the voices of women. This study was interactive, as the women gave the researcher an opening into their life experiences, and finally, it was a labor-intensive process as this is its thick description. Then the coding process starts. There are two steps into this procedure, the first being initial coding where I categorized my data into ideas (Lofland et al. 2006). The second portion is focused coding, which normally begins after generating all the ideas and putting them in analytically more focused and related groups, also known as themes. This procedure is less open-ended and more in-depth (Lofland et al. 2006). This may be time-consuming, but is an important process, as coding is the crux of the analysis (Lofland et al. 2006).

Results

Through coding, thematic analysis was used to identify themes after the interviews were concluded, and here is the process of converting the interviews into codes which were later turned into themes. First, the interviews were transcribed and translated when needed. To supplement interviews, interview notes and memos were used in conjunction with the interviews (Lofland et al. 2006). Next, I listened carefully to each interview and reread the transcripts. This was done to assign codes and later to identify cross-cutting themes that the women described or shared in the interviews. In this process, I looked back in the interview notes and recalled details about the context of the women and the environment in which they lived and experienced life.

This environment is described in detail in the neighborhood section of the community chapter that follows.

Next, I wrote down topics or ideas as they emerged in the process of initial or open coding. That process resulted in 12 topics. Here is the original list of codes or topics:

- Religiosity
- Foods (halal, and cooking and spices and chai)
- FGM is not a good practice, mostly the severe one
- Several types of FGM, one acceptable, one unacceptable
- Culture is important as it helps you be who you are
- Negative cultural practices such as shouting or being very expressive
- Child-rearing (breastfeeding or the lack of it)
- Somali identity
- Visibility of the Somali woman
- Sharing among Somalis (salt, sugar, tea leaves, etc.)
- Caring for each other and visiting the sick
- Helping each other
- Remittances
- Losing culture and not gaining other things = no education being lost
- Secondary migration (being afraid of not seeing Somalis moving to Columbus because of the big Somali population)
- Tribalism/clannism

Then I used color-coding to distinguish the different topics in the transcripts once I realized that not every topic is going to be a theme and hence tried to relate the topics to more significant underlying themes (Lofland et. al. 2006)

Here are the main themes that emerged and answered the research question of how the women keep their culture and stay steadfast with FGM: 1) Desire to maintain religious practices; 2) Belief in and commitments to cultural norms; 3) Issues of belonging and identity; 4) Socialization of the next generation; and 5) The unbreakable cycle of FGM. A table visualizing the themes and their further explanation can be seen in chapter 6. These themes are the main findings of the research, resulting directly from the analysis of the interviews.

Certain implicit processes are also at work in maintaining the practices of FGM; these were not mentioned by the women because of total immersion. The women feel disempowered to make changes, and they are not going to mention this dynamic because they do not see it or properly understand it. As an insider, I get this both from this study and the previous study I conducted about FGM, but also from my general interactions with the women outside the research. This interaction is important as a background to the interviews because they provide a context, but they also facilitate continued relationships and goodwill between researcher and participants. To help in mitigating the conflict of shared experiences with the women, I needed to remind myself of this every day by journaling. I had to constantly fight disappointment, as the women will not talk about FGM the way I want. As I read other people's works, even some that are outside FGM, I improved my understanding of how FGM can be a type of resistance as well as a reproachment in the minds of the Somali people, albeit one that is fraught with the human cost, again paid for in terms of the lives and health of women as they are sacrificed at the altar of keeping the culture.

The above insights complicate the eradication of FGM, because women want to belong as well as take advantage of available resources to gain skills they can use to tackle life's challenges. Even though women's lives in Somalia are full of challenges, it is even more challenging here in the United States where the women work double shifts outside the home and double shifts inside the home.

Table 1 presents a visualization of the demographic information of study participants.

Table 1. Participant Demographics

Participant	Age	Education	Marital status	Number of children	Employment status
Ceesh	73	Quran	Widowed	10; 9 alive	Unemployed (blue collar)
Nafiso	26	High school; studying for GED	Married	0	Employed (blue collar)
Sirad	38	No formal education but literate	Remarried	4	Three jobs
Khadra	40	12th grade	Remarried	5	Employed (blue collar)
Salado	80	Illiterate	Widowed	8	Unemployed (blue collar)r
Saido	35	8th grade, Quran and Arabic	Divorced	2	Employed (blue collar)
Hiba	32	Illiterate, trying to attend ESL	Married	5	Unemployed (blue collar)
Sharifa	40	Attending ESL classes	Married	4	Employed

Naseeb	30	BA, is working on MA	Married	0	Employed (white collar)
Lul	22	Attending college	Single	0	Employed (blue collar)
Hubi	45	Illiterate	Married	10; 6 alive	
Nuria	48	Quran and Arabic	Married	5	Employed (blue collar)
Shindays	48	8th grade and Quran and Arabic	Married	10	Employed (blue collar)
Fayow	60	MA accounting	Married	4; 2 alive	Unemployed

In the next chapter, the women's relationship to their culture is explained and a better understanding of what agency women have is explored. The chapter also describes different issues affecting the women and further explains the themes.

CHAPTER 5

THE SOMALI CULTURE PRE AND POST IMMIGRANT AND SOMALI WOMEN'S AGENCY WITHIN IT

In this chapter, I will discuss the Somali culture and how it disables its women. Some of the issues I am exploring include how women are treated among Somalis, how they accept this fate, and what agency they have within their culture. However, before I dive into these issues, I would like to give you a glimpse of Somali people's culture before, during, and after colonization.

Helen C. Metz in her book, *Somalia: A Country Study* (1993) notes that the Somalis had centralized state systems emerging before the interests of outsider Europeans and others were felt on the land. However, she adds that the Somali people were divided and colonized in the early 19th century. During the early colonization of Somalia, there was a competition between multiple countries to seize Somali territory. England, France, Italy, Ethiopia, and Egypt all seized land from this country for their agendas. Metz explains that these agendas ranged from the need for livestock products to coal stations by the sea to defense of other colonies along the Indian Ocean (Metz 1993).

According to "The Heritage of War and State Collapse in Somalia and Somaliland" (Ahmed and Green 1999), nomadic pastoralism provided a livelihood for the Somali people for

hundreds of years. Somalis are part of the Cushitic sub-group who inhabit eastern Africa and who captured great regions of former Abyssinia or current Ethiopia to populate the Horn of Africa (Ahmed and Green 1999, Metz 1993). The Somali social and political systems are based loosely on clans, subclans, primary lineages, and dia-paying groups. *Dia* is blood money that is paid to a group whose members have been killed and is a primary responsibility among Somalis that helped avoid the mishap of killing each other arbitrarily (Ahmed and Green 1999). Instead of a single leader, the groups usually preferred a council of elders – all men – with collective responsibilities to solve problems and provide guidance within their groups.

According to Ahmed and Green (1999), the dia-paying groups also function as aid agencies that help in relief and rehabilitation. The council in such a group gives each person the responsibility to help each other through a crisis. This can be observations of such activities as mixed herding, giving animals, and other alms. These responsibilities are taken very seriously and must be observed or adhered to, as they provide a safety net and joint responsibility to help each other navigate crises and problems so no one is left without help (Ahmed and Green 1999). Today, when there is drought in Somalia, we get calls from our primary lineages and dia-paying groups' council, to contribute and help those that are affected. The women in my study have talked about making remittances to those left behind; that is usually to their primary lineage.

During the colonization of Somalia by the different forces, parts of the land inhabited by Somalis was given to Kenya (Northern Frontier Districts) and Ethiopia (Ogaden Region), while parts were colonized by France (Djibouti), Britain (Northern Somalia or British Somaliland), and Italy (Southern Somalia or Italian Somaliland). Later British and Italian colonies joined after independence to form Somalia (Ahmed and Green 1999). Metz (1993) adds that it is during this time that the dervish – a group of young Somalis led by Sayyid Mohamed Abdille Hassan –

pushed back on the European forces as they agitated for independence. Hassan, a poet and an orator – skills loved and appreciated by Somalis – became dear to Somalis as an elder and leader within his group as he used poetry to enlighten his people (Metz 1993). Poetry and storytelling are important ways of passing information to the current and next generations among Somalis (Abdullahi 2001) and this has become even more consequential due to the high illiteracy among Somalis (Abubakar 2013).

According to Metz (1993), Somalia entered a difficult decade between 1980 and 1990 which saw a conflict break out. After the British and Italian colonies joined to become Somalia, the new country tried to get back their territories which were held by other countries such as Ethiopia. The war with Ethiopia brought to Somalia a huge influx of Somali refugees which forced Somalia to depend on outside help (Metz 1993). The president of Somalia, Mohamed Siyad Barre, who came to power through a coup d'état, became increasingly dictatorial and started to jail dissidents, an action that triggered further dissidence and opened a door to a vengeful Ethiopia to host guerilla warfare militias (Metz 1993). This militia and other dissidents within Somalia joined forces to bring down the government of Barre in 1990. Barre also faced continuous pressure from the World Bank, the International Monetary Fund, and the United Nations to liberalize its economy. Somalia's economy was based on scientific socialism which contributed to turmoil and clan warfare; each clan wanted to be the leader to control state resources (Ahmed and Green 1999; Metz 1993).

According to Metz (1993), the huge number of refugees was a great burden on an already unstable economy under a dictatorship. Thus, with the increased pressure on Barre's government came further tightening of his grip on power, an untenable situation that caused more Somalis to subdivide themselves into clans and groups whose demands were irreconcilable with the

situation at hand. For this reason, Barre had to go, and clan warfare broke out which led to the breakdown of social and fragile governance structures (Metz 1993). This civil conflict increased the size of refugee camps and created camps for internally displaced persons (IDPs), which include hundreds of thousands of people who ran away from their homes (Metz 1993). Further, people started to seek refuge in Kenya and Ethiopia as the insecurity and famine continued to fester. Some of the people were resettled in Western countries such as the United States and European countries.

Below, I will discuss immigration to the Columbus region, the Somali culture as it was and is today, patriarchy among Somalis, socialization, and the sprawl of the Somalia community within Columbus. I will then focus on the neighborhood in which I conducted the research.

Immigration

Before the civil war in Somalia, few Somalis migrated to the West, other than for education, tourism, or through the government missions from Somalia. According to Richelle Schrock in her 2008 dissertation “Cultural Divides, Cultural Transitions: The Role of Gendered and Racialized Narratives of Alienation in the Lives of Somali Muslim Refugees in Columbus, Ohio,” there were about 100 Somalis in the Columbus area in 1990. Since 1991, hundreds of thousands of Somalis have come to the United States as refugees and asylum seekers. This influx continues today, including secondary migration from other states closer to larger Somali enclaves (Chambers 2017). According to Somali academics (Abdi 2014; Bokore 2013; Abubakar 2013), often this secondary migration is due to a lack of cultural competency within non-Somali communities. Consecutive influxes came through such secondary migration of Somalis from other US states and Canada because the immigrants wanted to be closer to the larger Somali

community. Many immigrant groups just try to find their niches, and Somalis are no different (Chambers 2017).

In Columbus, Somalis have established themselves in the city and its suburbs, with several shopping malls that sell cultural accoutrements such as attire, technology, and home décor such that many Somalis travel from around the country and across North America to purchase goods in Columbus. Columbus also has a plethora of ethnic Somali dishes surrounded by Somali cultural décor, incense, and language, which evoke home. Columbus has other Somali businesses too, including tax professionals and lawyers tackling human rights issues such as immigration. There are also daycare centers and home healthcare facilities. Columbus is home to many Somali doctors with personal clinics including general practice offices, pediatricians, dentists, obstetrics/gynecologists, and mental health practitioners. These doctors are available in both local clinics and large community hospitals. The city also has multiple facilities with Somali nurses, public health experts, teachers, and university lecturers, along with several community organizations that help individuals and support the community by connecting them with resources.

The Columbus, Ohio Somali community holds cultural festivals yearly to introduce their culture to other Americans and let them know Somalis better. In this regard, they put on a shindig that features traditional singing, dances, plays, foods, and cultural artifacts. These sometimes coincide with Somali independence week between June 26 and July 1. Such events bring together Somalis from around the country and Canada and may sometimes be attended by Somalis from Europe. Such events are also attended by others who study or are interested in Somali culture. There are also soccer tournaments that are also attended by Somalis from all over the country and from Canada and Europe. Although I have not witnessed either the cultural

festivals or the soccer tournaments, I have heard so many good things about them and I hope to attend both as soon as pandemic restrictions are lifted, and gatherings are allowed.

Neighborhood

The area in which both the researcher and the subjects of her study reside is an eastern suburb of Columbus known as Reynoldsburg. This suburb is made up of several residential areas and countless stores, including the major chains in Ohio such as Kroger and CVS Pharmacy, several restaurants and fast-food chains such as McDonald's, and several tea and coffee shops such as Starbucks and Tim Hortons. Stores that are missing from this area are the halal stores and other Somali businesses where Somali people shop. Therefore, every so often, mostly once every week, families pile in their cars and go to the northside of Columbus to buy meat and poultry, and other essentials.

The specific area where the women live is called Mail Trees apartments (pseudonym). In this area, most of the residents are Somalis and so every nearby school will have several Somali children and every store will have Somali families shopping there. Although it is not like the northside, it is much better than living in places like Kent, Ohio, or Florence, Kentucky. Many of the Somali families have lived in this area for four years or less, as many had come from outside Columbus or even Ohio; because many did not manage to secure a place to live in the northside, they settled for Reynoldsburg which is about 13 minutes away from the northside.

The Mail Trees complex features two- and three-bedrooms apartments; built as townhomes with the sleeping area on the top floor and the living area and kitchen on the ground floor. There are also garden apartments where everything is on the ground floor. Families with young children and those with elderly parents prefer residences with everything on the ground

floor. The apartment complex is next to a park that features a 2-mile-long trail for walking, a play area for smaller children, a basketball court, and several areas that are used for soccer and other games. This park hosts several games on the weekends and fireworks on the fourth of July, among other events. Though some people walk in the morning or during the day, most people go for their walks in the evening. Most residents use this trail for exercise and for community connection to interact with others.

The school district provides transportation in the form of school busses for the children in the district. Few Somali families use the bus and therefore most children are ferried to school by their mothers. This is because fathers are usually absent as they are trying to provide for the family by driving long-distance trucks that bring them home once a week or even once a month, while others drive cabs that take them out of the home at dawn, only to return after their children have gone to bed. Mothers are not only cooking and cleaning, but also chauffeuring their children to and from school, library, games, and tutoring sessions. Like the situation back in Somalia, Somali women take the lion's share in the family affairs of raising the children and keeping the home together. Among Somalis, if the home breaks and the family is separated, it is usually the woman's fault (Abdullahi 2001). Even if it is the man's fault, the woman will be asked: Did you clean your home? Did you cook good food, and were you taking care of your children? A saying goes, "A woman who did not fill the crock of her arm with tears will not have a stable home." This means that when a woman is frustrated, she should wait for all to go to bed and cry herself to sleep, thereby releasing the tension. A woman with good friends and family members may talk to them and advise her on how to work out problems with her spouse, but among Somalis, telling your issues to outsiders, especially non-Somalis, is considered

unacceptable. It is akin to lamenting, which is contrary to the “hishout” which Bokore explains in her scholarship (2013).

In Somalia, first family members and later elders were called on to solve family conflicts under the acacia tree. It was, therefore, easy to shut women down, as most of them did not know about Islam and their rights. Most women were asked to go back to their husbands and children regardless of the type of abuse they may have suffered (Abdalla 1982). This has become difficult if not impossible here in the United States, as more women know or are learning their rights in Islam and generally as human beings. Additionally, a lot of help that was provided by extended family and clan members is no longer available and women are overwhelmed by taking care of huge families, especially those with children whose births are not spaced out as families still count children as wealth and men are not willing to help with housework (Abubakar 2013). For this reason, problems break out more often within immigrant families than they would in their home country.

In this neighborhood of Mail Trees apartments, most Somali families are younger, with young children. The bulk of children go to elementary schools, with fewer going to the middle schools, and even fewer in the high schools. Since the children are in school for a long time, women clean their homes, cook lunch and dinner, then congregate in front of their homes in groups to connect and share the news. They may also plan for henna parties and shared dinners. The *ambullo*, which is usually made by cooking wheat and beans or corn and beans together, can be shared later in the afternoon where one woman will be given the duty of bringing the ambullo and chai or coffee. After women pick up their children from school, they feed them and take them to play in the park. The one whose turn it is to bring the ambullo will pack the ambullo and the tea/coffee to bring to the park. The ambullo is eaten with olive/sesame oil and sugar, and

women can sit for hours talking over ambullo while enjoying each other's company. Somali women volunteer to bring the ambullo, and sometimes one woman might claim she has less work if her kids are not too young, and therefore will bring ambullo twice before someone else takes up that duty. Somalis also fry whole coffee berries to top their ambullo with popcorn. The crunch gives the meal an extra kick. However, it is not everyone who does that, and some women opt only for the ambullo.

Somali Culture

There is a Somali saying that one "should stay within their shoes and their tribes." This means that within the Somali culture, alienation and loneliness are considered a curse. Another saying is "Even a sheik may go to hell because of protecting his clansmen." This one denotes that even those who study the religion and know it is forbidden to be unjust may side with their tribesmen if they are cornered. For this reason, being in the proximity of other Somalis is important to the Somali people, and while we are here in the United States, we are all from the Somali tribe. Therefore, there is a lot of poetry including songs and poems about living in a place where you cannot see your people. It is like places in the United States where Black people who live in suburbs in which few other Blacks reside, find themselves and their children have fewer opportunities to interact with other people in the schools and neighborhoods who look like themselves. In *Race in the Schoolyard*, Amanda Lewis explores how race and racial inequality are reproduced in day-to-day life in schools. These can negatively affect how the children behave, and how they play and learn (2003). Somalis who live in small towns find themselves in the predicament of wishing and praying that they see another Somali person because it affects them and their children's ability to thrive in their environment as new Americans.

For example, after moving from Kent, Ohio, our family settled on the east side of the city in the Columbus suburb of Reynoldsburg. This area is close to the airport between East Main Street and East Broad Street. Finding a place to live can be difficult, and we got a lot of help from relatives and friends. Our neighborhood was inhabited by mostly Somalis, a few African Americans, and a few white Americans. I had never experienced that before coming to the United States. In Kent, my name was *hooyo*, the word for mother in Somali because my children call me hooyo. In Columbus, there were thousands of hooyos all over the city but mostly on the northside. Somalis are concentrated in the area around Cleveland Avenue, which runs north to south, and Morse Road, which runs east to west. I needed some information about how Somalis came to live in this city. After finishing the interviews for my research, it became hard to make physical connections due to the pandemic. However, I was able to make phone connections through a small community organization with which I volunteered for 10 months. I was able to teach sociology and carry out a little bit of scholarly activism, which is the core of my research. According to the director for the Somali Community Association of Ohio, there were about six Somalis who were resettled here in the early 1990s just by chance. Two of them had their family members join them. Then Somali truck drivers from Indiana were passing through Ohio and met with the Somali families and thought it was better to live in Columbus. Through word of mouth, other Somalis kept hearing about the growing Somali community in Columbus. The director himself was one of the first six people –brought in as refugees and asylees – who lived here in this city; he moved from Virginia and settled here because it was cheaper to live in Columbus and there were better-paying jobs here. Chambers (2017) backs up this claim by noting that though there was intense competition for low-wage jobs at the time of their arrival, Somalis and other immigrants found employment and cheap housing in Columbus and other enclaves in

Franklin County which is the central Ohio area. Because the Somalis are congregated here, primarily in the northern parts of Columbus, most of the biggest Somali shopping malls such as Global, Jubba, Banadir, and others are found in this area. These are street malls on Cleveland Avenue or Morse Road. There are a few Somali stores in other parts of the city and its suburbs, however, it is rare to see the congregation that is visible in the northside of Columbus. Inside the malls are countless Somali clothes stores, a halal meat store, a coffee/tea shop. Somali malls feature smaller stalls inside the larger building, with each cubicle belonging to a different trader. Most of these stalls sell similar wares. This area is also home to several Somali restaurants and cafes including “African Paradise,” a restaurant that carries Somali food of all kinds, and a halal pizza café where you can find halal pizza, coffee, and chai that remind Somalis of home sweet home. Somali malls also feature small mosques called *Maula*’ in Somali, while some feature a medium-sized prayer area for men only, due to its openness. The bathrooms have the usual cans for washing after using the tissue; this is an extra compared to American malls where one is forced to carry a bottle or other container to cleanse oneself. According to Chambers (2017), Columbus has the second-largest population of Somalis after Minnesota. This means that, although Minnesota has a larger population of Somalis dispersed all over the state, Columbus has concentrated its Somali population in central Ohio. This may mean that at the shopping malls around Franklin County, Somalis or even Muslims will get a special bathroom such as the family bathrooms, or containers for washing themselves will be provided, which shows acceptance of Muslims and Somalis in the Columbus area. It has been 30 years since large numbers of Somalis started coming to Columbus (Chambers 2017), but still, things could change. This cleansing serves the cultural/religious purposes of always remaining in a state of cleanliness, something that the women in this study have talked about abundantly.

When one enters a Somali mall, you are hit by the incense that is burning inside the different stores and the perfumed oils that are usually commonly applied on the hair to keep oneself smelling fresh, because most of Somali women keep our heads covered most of the day. One is also sure to find colorful clothes – the bright orange, the gold, the bright red, the different shades of blue and green, the browns, silver and other grays, shimmering blacks and whites – and traditional garb, flowing non-form fitting long clothes. There are also Somali artifacts including wooden utensils, wall decorations, and paintings that feature farms in Somalia and Somali people in different situations of traditional importance, such as milking a camel and picking fruits, especially bananas which were sold in the world market as cash crops before the war. Anytime Somalis talk about food, we always remind each other of how sweet and succulent fruits were in Somalia and everyone wonders why fruits in America can never compare. This may be due to Somalia's tropical weather conditions with 12 months of sunshine and no snow.

When entering a Somali restaurant, one is hit with two smells: the smell of the food and the incense that is burning inside the eating areas. Though the curry and other spices are like the ones used in Indian and Arabic cuisines, these are sometimes roasted and mixed differently to give it a special Somali twist that tantalizes you and piques your interest, thereby teasing your taste buds as you wait for your food to arrive. Somali restaurants feature two sitting areas, one for families or women, and one for men. There is also a prayer area for women. The walls in most Somali restaurants feature the Somali flag, which is a sky-blue color with a white star in the middle. The walls feature countless pictures and drawings of Somali people and animals, and produce from the farms such as bananas and coconuts. There are also beautiful beaches and other landmarks on the walls. Another very common thing to see is traditional Somali dress, which is a long piece of cloth that is not sewn. It is worn by putting one edge over one shoulder and tying it

to form a sleeve at the back by the shoulder blade; the rest is tied around the waist to form a skirt and then another smaller piece is used as a shawl over the head and shoulders to cover the head and arms. This dress is called *Guntina/o* and was traditionally worn by Somali women and girls. It is similar to the sari worn by Indians, but it is worn over one shoulder. Another material that is featured is *shash*, a silk square material that is usually gifted to women seven days after the wedding in a ceremony that is similar to a bridal shower among southern Somalis, where women members of both families and friends bring countless numbers of *shash* to give to the bride. After sitting down in a restaurant, a waiter approaches but instead of giving you a menu, they will list the different Somali dishes available from which you can order. Most of these are standard, but you can mix and match and though they rarely, if ever, write down an order, they never bring you the wrong order. Customers can get their order on one small plate with utensils. However, most Somalis go to eat together, so their orders come on huge plates that feature entrees, salads, and rice or spaghetti with bananas. There are also many pieces of Somali bread including the ones made from sourdough and batters as well as regular Italian bread. In such instances, we usually eat with our hands. Restaurants also feature bathrooms that have a can that you can use to wash after using the bathroom. That is why we never worry when we visit a Somali restaurant. It is just like leaving home and visiting a relative. All men are referred to as brother, uncle, or grandfather, while women are referred to as a sister, auntie, or grandmother. This makes everyone feel related and welcome.

Somali homes are also known for their smells, both food and incense. When I lived in Toledo, Ohio, I had a baby, and my aunt who was visiting me from Columbus followed the smell of my cooking and incense that I was burning in the house. The smells helped them find my apartment, as we were the only Somali family living in the apartment building. Another common

issue among Somalis is the welcoming and sharing of food. When talking to Somalis, they always decry the loss of culture; some young Somalis are adopting the American culture through assimilation, and everyone pays for themselves when people go to get coffee together. Lul, a 22-year-old in my study, noted that “it is very hard for children at young ages to keep in touch with their identity and where they are from because of how we live and this social media matter, and just people being influenced by so many things.” In Somalia and perhaps even here among older Somalis, it was common among Somalis for one person to pay a restaurant bill, a bus fare, or coffee for a whole entourage, even for those whom they do not know. All the women in my research projects have talked at length about how they share food such as sugar, salt, tea, and cooking oil among other daily necessities, which would have forced someone to run to the store if they did not have a Somali neighbor or if they were other Americans. Everyone is so ready to give, and when no one is asking for something, Somalis get worried. They would ask themselves and their friends, “am I a mean person?” For example, Nuria, a 48-year-old participant, said, “I grew up in Somalia within this culture of sharing and caring.” But how does a relationship come about with your neighbors in the United States? “You say peace be with you today and another day, next thing you know you are conversing about different things. The next thing is I do not have salt or sugar, and my neighbor is Somali.” However, sharing and caring is something Somalis grow up with, so it is very easy to bond with other Somalis.

Patriarchy and Gender Roles

Hooyos (mothers) and women in general, are very important and have a central function within the Somali culture, even though it is not pronounced. For example, because nomadic families move from place to place in search of greener pastures and water for their animals, women have

many duties, which makes them an important part of the patchwork that is the Somali culture as they provide care and continuation of the culture. Nomads have a system of sharing water whereby different families will come to the watering hole at different times. This was to avoid conflict and muddying the water. In most instances, men watered animals, and they specifically watered camels. This is because wells can be deep and require several strong men to bring the water to the animals, and men could uncover most of their bodies like the chest without being considered naked. Women could not do that, for religious reasons. However, women make all the parts of the Somali hut. The temporary hut is made up of mats that are skillfully woven to avoid rain, wind, and sunshine. Then there are sticks, which must be cut wet to fold them without breaking them. The sticks are planted into the ground in a circle and folded into each other and tied together with ropes, made mostly from camel skin. In rare cases, they use ropes made from special grass, or the soft inner lining of the bark of the acacia trees. This creates a round frame on which the mats will be placed to form each hut. The huts differ in size and height, but not in shape. From inside, the mats are decorated with different dyes and colored string, depending on the artisanship of the woman of the house. Specific incense is burned in the house to keep it smelling fresh and keep away insects. Such incense is also used to smoke the water pot, to protect it from germs and to give it a minty flavor; this is dependent upon how clean and creative the woman, her mother, and her daughters are. From the outside, most huts look similar and show only the ruffles or grassy backside. But on the inside, the decorativeness and the size of the hut again depends on the artisanship of the woman of the house. The women oversee dismantling the huts, mounting them on the camels, and when they get to the new homestead, dismounting the materials from the camels and rebuilding the hut. Young girls and women participate in dismantling and rebuilding the hut and must work together to mount the hut on the camels or

dismount them while singing a work song. Even though one may not mount or dismount the camel, being little does not preclude one from leading the camel, so those who are too young to mount and dismount can be asked to lead the caravan of camels.

While women are involved in unceasing duties which consume the whole of their days and half of their nights, what do men do? That is a great question. Men oversee the security of the homestead and keep an eye out for any cry for help from the young men and boys who are tending the animals/camels in the wild. They are also in charge of forecasting the weather and looking for a good place to move the homestead. During moving the men supervise the process as carried out by the women. They may be required to bring branches from the thorny acacia tree to be used for fencing in the goats and sometimes the homestead. When there is no moving, they are mostly involved in playing games such as drafts or the six holes game – a favored game by nomads and rural dwellers, played by moving stones or big seeds from hole to hole. These games may look simple, but they have complex rules and to become good, one needs experience. These are hard for women to learn because even when they are around these games, they cannot learn them as they are not a member of the club (Abdalla 1982). Occasionally elders may be involved in conflict resolution ranging from marriage and family conflicts to tribal conflict and rustling. Men also plan defense strategies and protect their homesteads, their tribal lands, animals, and watersheds as required. In comparison to women, however, men do nothing a majority of their time and they have leisure time to plan and carry out attacks and to play while women toil every day from before dawn to hours after dusk, making sure everyone is taken care of and sometimes forgetting to take care of themselves (Abdalla 1982). I once watched a video made by the United Nations World Food Program (UNWFP) titled “Women Eat Last,” which is the case in many cultures and shows women giving food to everyone else and sometimes not eating themselves.

Watching that video reminded me of my own family and how women, including my grandmother, mother, aunts, my uncles' wives, and older cousins, labor away and eat very little. All these women were very slender in build and ready to pounce on their duties. I have never seen any of them complain that they were overworked or that they were hungry. They were always smiling warmly and working. Sometimes there are work songs that are sung to pass the time. For example, when crushing corn or millet, women would say:

Why is it so hard? Is it

A metal

A steely stone

An open land hit by rain

The bald head of an old man

Just like most societies in the world, even in the urban areas, Somali women continue to do most of the care work, whether it is the cooking, cleaning, or tending to the children, the infirm, and the elderly. It is women who watch other women when they are close to childbirth to make sure they are ready whenever it is time. Unlike women in a rural areas, women in cities may have children born in hospitals; however, some still prefer to give birth at home with midwives and traditional birth attendants. Due to the female genital mutilation that Somali women experience, it is very common to have the birth canal enlarged in a process called episiotomy to allow the baby to come out during birthing. This passage is originally constricted for men's pleasure and to uphold the family names through infibulation, the type 3 FGM where

labia minor and major, the clitoris, and sometimes the vulva is removed, and everything is sewn together to form a seal that narrows the passage (Abdalla 1982).

An issue that is very important to the Somalis is the socialization of the next generation. This is important in every culture. However among Somalis, apart from a few cases, raising children is an important task that is communal because extended members of the family – all women – of both parents help in advising new parents and watching children as they grow without expecting to be paid or asking for any gifts. Advice includes breastfeeding, sleeping, and keeping the baby comfortable and safe. There are aphorisms for every situation, and Somalis use these always. Not only birth attendants but also female elder members of the community, whether related to the mother or not, are tasked with these responsibilities. It starts from singing for the baby, and a young woman can learn these songs and sing to her baby as he or she grows. For boys, it starts from ululating when they are born to signify their importance, and their songs include war songs and encouragements to be strong and brave. For girls, they may include songs about good smells and how she will ultimately take care of her husband, her parents, and the parents-in-law. Somali women, therefore, are encouraged to breastfeed even though some may supplement with goat or cow milk when the infant is four months or six months old. Those who do not breastfeed are frowned upon, and sometimes may be called names. For example, Ceesh, a 73-year-old participant, said, “In my culture we breastfeed kids, this takes up to two years for most mothers just like it is encouraged in the Quran and the Traditions of the Prophet (may peace be upon him).” Another example is the 80-year-old Salado, a mother who almost nostalgically broke down in tears describing how mothers used to breastfeed their children and take care of them in every possible way. However, she also mentioned that there were a few mothers who did not know how to best do it or were overwhelmed by the unceasing duties that they have. Salado

said that “a mother has to make sure her children are healthy, well-fed, dressed, and growing.” She continued, “Families are not the same, they don’t feed their children the same way, or dress their children the same way. It all depends on the ability and effort of their parents. Pulling me into the conversation, she said, “you are a Somali mom yourself; every Somali knows this.”

That is why when a Somali woman has a baby, women in the community come together and bring her gifts including clothes, incense, and food, both cooked and dry rations. People come to help you clean your home, cook for your family, and even bring you gifts. Sometimes an aunt or uncle might send their daughter to help you for a while and make breakfast. This was important, because new mothers may not sleep at night with the newborn not yet adapted to a good sleep schedule. Such a cousin would also keep you company, a very important communal ideal because it helps mothers have adult conversations, as babies can be overwhelming especially for first-time mothers. That is why bringing them cooked food that lasts a long time is a good thing.

Cooked foods include meats that have either been dried, or tiny cubes of camel meat cooked and recooked in ghee and spices such as cardamom that was traditionally made for travelers, newlyweds, and husbands who return from long work trips. These meats are cooked by several women communally with each having different duties; this can weigh as much as 20 pounds. There are special containers that are used to store these meats and special spices to keep them from going bad as long as no one puts their finger in it. Travelers among Somalis are treated with respect because as nomads, we consider ourselves travelers (Abdullahi 2001). That is why when people travel, especially to Makkah for pilgrimage, friends and families come together to bring these meats. Newlyweds are given this meat because women are in a honeymoon state for at least seven days where they do not lift a finger in their new home and are

served by several younger sisters and cousins or even friends, bridesmaids or not, who are at a bride's beck and call. These young women will do all the housework and cooking for the new bride for days on end as required by the culture. That is why they get priority treatment for the meat. As for husbands, when they return from long trips, they need to be given special care by their wives and so this meat is prepared for them, which they can eat for days including when friends come to visit them.

Somali food is a mixture of African soul food with a touch of Indian and Arabic cuisine. It may also have been influenced by the cuisines of the British, Italian, and French who colonized different parts of Somalia. For example, women make a Somali bread called *anjera*, which is very similar to a crepe. We put together wheat flour, corn flour, and a pinch of salt, then mix them into a smooth batter. This usually happens early in the evening (6:00 or 7:00 pm), and the bread is made in the morning (around 5:00 or 6:00 am). The batter is supposed to lightly ferment overnight. After it comes out of the pan, we sprinkle on a little sugar and lightly spread some butter or olive/sesame oil on it. This can be eaten with a cup of tea. Anjera for the evening or midday meal may not have sugar or any oil on it. Then it can be eaten with greens, sauces, or stews. Anjera is known across cultures with different names; for example, among Indians it is called *dosa* and can be larger than a plate. Closer to home, Ethiopians call it *injera* and it is massive and ferments for several days before it is cooked; one Ethiopian injera can be eaten by up to four people.

A large portion of Somalia was colonized by Italy, and after colonization, some parts of the Italian culture was adopted by Somalis. For example, Somalis eat and love pasta in all its different iterations. It is eaten by certain people with olive/sesame oil and sugar, while some eat pasta with thick or thin sauces, and others eat it cooked together or baked with meat, tomatoes, or

with eggs depending on people's liking. In the second and third examples, there is always a banana on the side. In upscale restaurants in Nairobi, Kenya, for example, the walls have pictures of mouthwatering pasta with the names printed on them, such as pasta arrabiata or pasta al forno. The arrabiata is in a sauce with visible green and red peppers in it while the al forno is baked with or without meat. Regarding incense in Somali culture, many times it is made from different good-smelling ingredients. However, there is a special one that grows in the wild in Somalia. When the Arabs came to the coast of East Africa, they used to get this naturally growing incense from certain gum trees. These were chewed to strengthen the teeth. Such gums were also used to smoke pots used for drinking water. The water tastes and smells minty and it also keeps insects away. In the United States, though we do not smoke pots, we still chew gum and smoke the homes and sometimes refrigerators and cars. My older friends have told me that they turn off the fridge and smoke it, then they turn it back on. Though this is called Arabic gum, it grows in Somalia. When the British and Italians colonized Somalia, they called it the land of Punt, because of all the different gum trees that grow there.

Entering a Somali woman's home as I mentioned above is a mixture of tantalizing food smells and incense both minty and flowery. The homes feature elaborate curtains that are imported from Turkey and some Asian countries. These are very colorful and bright and give the home a different look than you find in most non-Somali homes. There are also carpets; a large one in the living room, a medium-sized one for the dining area, and a long and narrow one for the hallway or corridor. These three pieces have the same prints and colors, and they match with the curtains and other objects in the home such as lamps. Although these carpets and curtains are very expensive, people save for and buy them, and those who cannot afford them have community members buy for them through a collection.

Somali women value gold. Most have several sets of rings, earrings, necklaces, and bracelets. This depends on how much money a person has, but it also depends on the savviness and amount of effort a woman puts into it. Somali women do not wear fake gold; this is because gold is not only jewelry to them but also a surety, meaning they can sell this gold anytime they are strapped for cash. Women can start putting gold on their daughters as early as four months old. However, there are a few who wait until their children are grown before they put gold on them or even pierce their ears. It is religiously ordained that a Muslim man must give a gift to his bride. This is not for her parents or family; it is specifically for her. As the bride is free to choose what she receives from her groom in consultation with him, usually the bride asks for gold. This is because the price of gold appreciates in most instances, and it is used as a surety by women in case they need cash urgently. For example, if a woman's family needs money for anything such as medical costs and her husband does not have money to give to her family for this need, a woman would take some of her gold and sell it to provide this cash for her family. Although divorce is rare, when it happened women used their gifts to start a business or even buy a home for themselves, especially if they do not have children.

One cultural artifact is the tooth stick, which is a stick toothbrush employed by chewing one edge to form hairs or bristles that are then used to brush the teeth. Somalis are traditionally nomadic, and even those who live in urban areas get these tooth sticks brought to them to buy and use. It is not the same, but it is better than nothing. Somalis brushed their teeth at least five times a day as it is encouraged to be in a state of cleanliness before prayer and after eating to remove the remains of what they have eaten. Those in the nomadic setting could pull a tooth stick from a branch and start brushing their teeth where they could spit while watching animals on the soil. However, the urban lifestyle with pavements and tarmac prevents spitting and

distressingly reduces the number of brushings as people are urged not to brush in public as this is considered uncouth and against the norms, especially in the United States. Though it is fine for athletes to spit on the grass and ground and sometimes on their hands while playing in the field, it is viewed as very uncouth to spit in public. For these reasons, many Somalis are only able to brush two to three times a day, which can be stressful especially to the older generation. One older woman friend of mine confided that she has gum swelling because she has not used a tooth stick. When I asked around and found her one, she blessed me and wished me success in life. Using a tooth stick does not require toothpaste, and the medicinal trees used for tooth sticks keep Somali people's teeth white and clean without visiting the dentist. Somalis can live up to 90 years without ever visiting a dentist or having dental problems; many say this is thanks to the tooth stick. However, those who smoke or drink black beverages sometimes use charcoal to scrub their teeth with the tooth stick and that always brings back the shine. Adams et. al. (2013) discuss the intricacies of the use and lack of the tooth stick for brushing, reiterating that Somalis and other rural communities used tooth sticks to keep their mouths clean. They also say that most Somalis also did not eat processed foods, which helped keep their mouths healthy. Coming to the United States with its cheap processed foods cause more people to suffer from dental problems, especially the new generation of Somalis born or brought up in the United States. Many Somalis from rural areas and nomads have never used or even seen toothbrushes before their orientation for the process of coming to the United States. For that reason, they are not very well versed with it (Adams et. al. 2013).

In Somalia, when someone arrives at the airport from a foreign land, different things are expected as gifts. Today here in the United States, when someone comes from Africa, all we want as the best gift is tooth sticks. When people receive a batch, they share and then put the

remaining pieces in the freezer for later use. Many elderly people will tell you that giving people tooth sticks to clean their mouths is a good deed that is rewarded by God. In Somalia and even Kenya, people gave tooth sticks as gifts at the mosque where we know many people will come and some may be travelers who will benefit from the gift. The tooth stick, therefore, is an important Somali artifact and a valued resource that is referenced in poems and wise sayings. This includes one that says the truth and teeth should be whitened, which means like cleaning your teeth with a tooth stick, one should always clean one's speech from any lies. Simply put, tell the truth like you clean your teeth.

The Somali community is a very communal society. There is a lot of visiting and sharing. For example, we visit the sick in their homes and at the hospital. This is also a religious duty that is learned while very young. Welcoming guests and visiting the sick is drummed into Somalis. The young, the elderly, and the sick are always the most important as they are considered vulnerable. The elders are also the teachers and trainers of the younger members of the community. The younger members and especially children are targeted for socialization to become proper members of the society by learning the culture, especially when they are too young to have any duties. Any duties depend on age, but they also depend on the hardiness and understanding of the child him or herself. Children are taught through oral histories such as songs, poems, and stories. The children internalize these norms and values of the community through hearing, seeing, and doing. Everyone is supposed to respect those who are older than them. For example, all the women who are younger than me call me sister or auntie Nasra, and I call all those older than me sister or auntie so and so. Age, therefore, is very important. Once your parents become elderly you start tending to them as if they were children again due to the immense needs that they have because of reduced senses such as sight and hearing. With most

people not able to afford or seek medical help, easily fixable problems go unsolved as people settle into their elderly age without complaints, saying, “it is God’s will, and we accept it.”

During the rainy season, nomads and rural folk hold dances to celebrate the season. Among Somalis, farmers celebrate the growing and harvesting season through dances and other competitions of oral literature. Such dances are also where young men find their future brides. Women sing and men dance. There are several types of dances that require both men and women, but the way they are set up, they never touch each other. It is like polka without holding hands or touching each other at all. Gifted poets and singers also talk about the signs of the times and things that are surprising or out of place. Children may go to the dances if they are close to the homestead and if the dance begins earlier in the evening. At least once in the season, the young and young at heart are allowed to participate in the dance until the late hours. However, since most women and girls have to wake up in the morning to prepare for the day and restart where they left off the previous night, they are obliged to go home earlier. Strict rules guide these interactions, and no girl in her right mind would accept anything less than a marriage proposal to even talk to a man, even in the presence of others.

The patriarchal system that governs the Somali society, both rural and urban, is set up in such a way that girls and women are always on the receiving end of injustices. For example, boys are preferred for education, especially in rural areas and small towns. And even when girls are enrolled in school, they have the burden of taking care of the family when they come home instead of playing, doing their homework, or reading ahead. This makes them lag, unlike boys who have time for play and even schoolwork (Abubakar 2013). If children are not doing well in school, boys may be tutored and given the extra support they need to be successful in school such as provided books and other amenities. However, girls may be pulled out of school if they

are not doing well, yet it is the family's fault that the girl lags behind. As the girls grow up, school staff including teachers belittle and distress girls, causing them to further fall behind as they do not give them the help they are paid to give. I once had a classmate for five years, and I did not know the sound of her voice, because I had never heard her speak in or outside of class. She never asked questions or answered them. Being born from a good family, this girl was not harassed much. However, she must have experienced trauma to be silenced like that. At least that is what I assumed. According to Abdi (2014), though there are opportunities to discuss changes to Somali gender roles in the United States, Somali women do not seem to be taking full advantage of this opportunity. This does not mean that Somali women do not benefit from the freedom to get an education and participate in the job market. However, it means that they continue the extended care work that they have been doing for a long time. This allows most Somali men not to worry about childcare as that is considered a woman's responsibility, even in the United States. Therefore, though many Somali women are missing out on opportunities due to their way of dress and their lack of English proficiency, childcare is yet another disabling factor for those who may not have a mother or an aunt nearby.

During my thesis research, I met with men who told me they did not want to be put in a nursing home because they are afraid of so many things (Abubakar 2013). One of the items of concern is lack of halal foods; halal are meats from animals permitted by Islam such as goats, cows, camels, chickens, and even herbivores in the wild such as buffalos and deer, which must be slaughtered following Islamic laws. Then there are sea creatures such as fish. In Eastern Africa there were agreements between British colonialists and Arab Muslims to have animals slaughtered following Islamic laws so that Muslims could eat, as the other cultures did not mind so much how the animal was killed, they just wanted the meat. This was agreed upon and while

living in East Africa, Muslims do not have to worry about asking whether the meat is halal because they know it is. When traveling, you can walk into any establishment, including a bar, and eat. What is more, if you order something that may be tainted – that may not be halal – the restaurant owner or workers will tell the customer “That is not good for you because it is not halal.”

As Somali men come to a family of girls to seek a woman’s hand in marriage, parents, uncles, and other relatives may try to force a woman into getting married. Bridewealth is important among Somalis, and girls are sometimes forced as young women to marry if they do not accept it willingly, because of the immense wealth that will come into the homestead. Although most Somali marriages were arranged as girls did not have a say in who they wished to marry, there are horror stories about women who have been forced into marriage but never accepted their fates. Such women would run away from their abusive husbands and many of them have been killed by wild animals. I have encountered a cousin of my mothers’ who came to live with my mother’s oldest sister. Fortunately for my aunt, she caught a lorry in the middle of her journey before nightfall. What is more, she was pregnant and that would have been devastating had she not been fortunate to catch that lift. When women refuse marriage completely, especially if she can defend herself, men gang up against them and devise plans to make them accept the marriage proposal to save their lives, due to the threats posed by the men in their family.

Although children are considered a blessing, and women do more than their share of all labor, men are the decision-makers for the community and therefore men are favored. Hence, having a boy is very important. According to Lidwien Kapteijns in her 1999 book, *Women’s Voices in A Man’s World*, an ethnographic study of oral traditional poems and love songs to

understand a woman's place in Somali culture, women are not in charge of big decisions within the culture and may not have a say as to who gets to marry their daughters or even what products to put in the soil before the rain comes. This is especially the case among nomadic pastoralists. These cultural markers is similar among several pastoralist communities in Kenya and Somalia where women were kept at bay when decisions about war and conflict were being discussed.

The Somali community prefers for families to have boys instead of girls. Therefore, there is always room for criticizing girls and telling them not to do something, or to do something differently. This is regardless of what the girl is doing even if perfectly innocent like running or jumping. If a girl is not cleaning or cooking, there is room to tell her she is doing something wrong. In total opposition, for boys it is encouragement and praise, even when they could be wrong or hurting someone else. When a boy is born, during the birthing process, ululation is heard from a distance as the son is welcomed into the family and the community at large. Conversely, girls do not receive that until they are undergoing FGM, especially if they do not cry. So, from the beginning girls are an unwelcome part of the community whose identity depends on enduring pain and suffering. Women are encouraged not to cry out and are advised to bite down on something instead when they have conjugal relations and when they have babies. Crying out is not only weak, but also uncouth and unbecoming of being a lady. For these reasons women are always told to be brave and not cry, even if they are hurt. Even though women have had their outer genitalia cut, and their birth canals are narrowed, they do not like to get cesarean sections. Whenever a woman is in a hospital to have a baby, many Somalis will preach to her not to undergo a cesarean section as it is said to limit the rest of a woman's life. This is even though countless women undergo this procedure, and they are fine. According to Ariela Borkan in her thesis study, "Rejecting Vulnerability: Somali women's resistance to the cesarean section in

Columbus, Ohio,” Somali families resist this method of birth even when deemed necessary by their medical providers including doctors and nurses. As a fatalistic community, Somalis say that they will keep the faith until the last minute, only accepting the process in an emergency situation when the baby or the mother is dangerously close to dying; in fact, babies die because they have waited too long (Borkan 2010). Such decisions are in the hands of men. and that is why they take too long, after all, they are not the ones in pain or close to dying.

Religion

Islam is the most dominant religion among Somalis both in Somalia and everywhere else. Scholars such as Mohamed Diriye Abdullahi in *Culture and Customs of Somalia* analyze the culture, laying bare the gender norms that guide Somalis in their division of labor and other mores that steer the Somali people. Abdullahi (2001) notes that the gender roles which make women toil continuously are not religious; rather, they are traditional values. For many, these facts are unknowable simply because many Somalis are illiterate, even in Quran or Quranic Arabic, and do not know for sure what is written in the Quran, or the traditions of the prophet. For this reason, these facts are unknown to many, especially women due to their illiteracy. After leaving Somalia, an increasing number of Somalis become more religious both in learning and following the rules of Islam more stringently. This can be seen from women dressing more conservatively with burqa-like dressing. The Somali version of the dressing is called *jilbab*. The *jilbab* features a long-sleeved flowing maxi dress that is usually made from a thick material in a solid dark color. There is a top piece that has an opening for the face to come through and it flows to the knees or beyond, depending on how conservative the wearer is or wants to be. This dress type also features a face covering which is called a *niqab*, which covers the entire face

apart from the eyes and it even has a middle part that joins the top and bottom parts of the niqab to covers the bridge of the nose. A woman who dresses like this may also wear long gloves that cover her lower arms and fingers, and socks to cover her feet despite climatic conditions. The only part of her body that is visible is her eyes. When walking in Columbus, especially around the northside, you will see many Somali women, young and old, most wearing jilbabs and now, due to covid, all are wearing a face covering.

As other researchers and I have reiterated, many Somali women are illiterate, and the few who are literate may not be so in Quranic Arabic or Quran. For this reason, it is hard for them to disconnect from cultural norms that are disguised as religious imperatives (Abdi 2014; Abubakar 2013; Mernissi 1991). According to the Borgen Project, a nonprofit that addresses issues of poverty and hunger, reports that Somalia has a total literacy rate of 37%, with males pulling up to 49% as they get help from nonprofits while females garner only 25% (2018). Although this report is slightly more positive than most recent reports, it is still unfortunate that in this century, Somalia still struggles with illiteracy. This report also highlights the fact that education for all would greatly benefit the economy and health of the Somali people (Borgen Project 2018). There are several points that this report emphasizes to show the gender inequality in education and job skills in Somalia.

Positionality – Myself As an Insider

I am myself a Somali born in Somalia and brought up partly in Kenya, where I went to school, having been prevented from going to school in my rural village in Somalia as a child. I therefore realized early on that being a girl was neither easy nor fun. Since the time I started school at the age of seven and a half, I have been trying to help pull up my fellow girls and this has instilled in

me the agency to help all women and girls in my life. Unfortunately, I started seeing women's rights abuses by men, especially in villages and rural areas which the patriarchal system within the Somali culture supports. Because I did not go to college, right out of high school I returned to Somalia and started involving myself in the community in whatever way possible. At this point, a civil conflict had broken out in Somalia and turned into full-fledged clan warfare. I started as an interpreter and translator of development meetings and documents from Somali to English and vice versa. Some of my involvements have been documented by Reuters Media and others. In that capacity, I met other like-minded individuals, some of whom I have worked with to form grassroots or community-based peace and human rights organizations. In these grassroots organizations, I was able to help and support women in different difficult situations, such as victims of rape and returnees from refugee camps. As an adult, I have been fortunate to work with several national and international NGOs, which put me on the frontlines serving where I was able to help people undergoing human rights abuses and other problems related to conflicts, such as famine and the lack of daily basics.

In my academic journey, I have studied sociology, communication, philosophy, and history. Even though I started from conflict resolution, my main interests are the areas of gender and racial inequality and health disparities. My research interests fall in the wider area of inequality and gender. I have experience studying female genital mutilation/cut FGM/C, sometimes referred to as female circumcision. I carried out my master's thesis research among Somalis in Columbus, Ohio, through focus group discussions. I have specifically studied the reasons behind the continuation of such a painful and detrimental cultural practice among Somalis in Columbus. In doing so, I always strive to produce literature that can be used by policymakers and the everyday citizens of Somalia, as well as those in other countries.

As a human rights activist, I see FGM as a fundamental violation of the rights of girls and women. That is why I continue to seek to understand why it continues in my quest to create knowledge about my culture through research. More than anything, I have learned that carrying out field research, especially qualitative research, is a communal endeavor because a researcher cannot and will not be able to do the work without the goodwill of the community. It is, therefore, imperative to engage the community and adjust to their needs and your changing needs.

In my current research, I explore how FGM affects former refugees and its relationship to other issues of inequality that make women and girls lag in various social indicators, including education and participation in decision-making processes. This experience has shown me how important it is to carry out research among ethnic communities by researchers who look like their subjects. I aim to contribute to rooting out violence against women and girls and understand other issues of health and well-being. This is also to continue the scholarly activism that helps women share and heal together, as well as accommodate each other and work together to have a voice. This voice can be used in many kinds of ways, such as strengthening the position of Somali women and destigmatizing women's cries for help.

This dissertation is about the Somali culture and how parts of it have hurt and immobilized Somali women and made them beasts of burden, unable even to choose a marriage partner. Concerning FGM, the Somali culture seems to stand still as if it is unchanging. For the culture to change and to eradicate FGM, the narratives must change. That is why it was necessary to ethnographically describe and explain a culture that seems perfect in one sense, yet so imperfect in another (Abubakar 2013), using the women's standpoint by meeting them where they are (Lorber 2005; Smith 2005). Somali women were usually exchanged for bridewealth -

wealth given by the groom's family to the bride's family. Raqia Abdalla, a Somali sociologist and researcher, in her book *Sisters in Affliction*, describes bridewealth as a limiting and disabling factor that lock women out of systems of negotiations and power. This is because men/elders from a man's family visit the family of a young woman to speak with male members of her family to ask for her hand in marriage and negotiate a bride price, regardless of what the daughter wants. This very culture makes FGM important as a cultural imperative. Among Somalis, Abdalla (1982) writes, women who are cut fetch at least 100 female camels, one male camel, a horse, and a host of other gifts that her elders, led by her father, can ask for. For this reason, families know that FGM is important for the future of their daughters as a valuable norm that should not be overlooked. Abdullahi (2001) supports Abdalla's assertions by noting that the Somali culture does use norms and mores, including aphorisms, to demean women. This continued attack forces women to stay in check and even when they move to the West, they believe that staying with the culture is the safest route for them in keeping with valued norms to avoid constant confrontation and shunning (Abdi 2014; Abubakar 2013; Abdullahi 2001).

As stated above, I have lived in smaller cities in Ohio, where it was difficult to find Somalis. More recently, I have lived in Kent, the city that houses the main campus of Kent State University. We were the only Somali American family in Kent. This can be soul-crushing for most Somalis, as I have mentioned, because our culture is based on making a community. This is even more problematic for a researcher who studies Somali culture because accessing or interacting with Somalis would require constant travel to Columbus, the magical city where Somalis not only reside in huge numbers, but congregate mostly in one area on the north side of the city (Chambers 2017). Just like Black Americans in the suburbs and small towns, the Somalis

in the United States face many problems and discrimination that negatively affect their children and themselves (Chambers 2017).

Around 2017 I met two Somali young women in Kent, about 20 and 24 years old, who were from Saudi Arabia. I met them through my husband, who met a brother of one of the young women at the mosque. After a lot of discussion, I realized the young women were assimilated to Arab culture more than Somali culture. There were also very few of them, and they could not be the target of my research. For this reason, I started to explore Cleveland and Columbus. Since I did my thesis research in Columbus and many of the women with whom I had good discussions had told me to come back to Columbus to talk to them again, I decided to move to Columbus to carry out my study. My move was all about my research; however, I found so much more, because I was able to reconnect with the Somali community. I plan to continue research among Somalis in Columbus.

Because there is no research that is the last word on any subject, I plan to continue research among this and similar communities, and I must maintain my status as an insider. Such a status has helped me interact smoothly with my research participants, and I will continue to foster these relationships. The women continue to keep in touch with me, asking me about my progress in my program, meaning they have a vested interest in me as one of their own. This gives me comfort, but also makes me want to continue my activism as this is not only a dissertation to me. This is a life's work.

I have now lived in Columbus for three years, and I had promised myself I would attend the Somali Independence Day celebrations that are held in Columbus. I was finally able to do so. On the 3rd of July, 2021, I attended the Somali Independence Day celebration. As is customary, several groups including businesspeople, professionals, community organizations such as youth

groups, and the Somali community come together and put on a show. This time – my first time – it was held at Innis Park, a park in Northern Columbus.

Although the show started earlier, around 11:00 am in the morning, and ended at 8:00 pm, celebrants seemed to want to go on forever, with several youngsters practically being pulled from the field by their parents.

There was singing and dancing, bouncing castles for children, ice-cream trucks, free food, and water. Almost everybody was either wearing the flag or the flag colors of blue and white, or carrying a flag. I wore a white dress with silver decorations, a blue scarf, and a pair of slightly raised black pumps. I went with my older daughter, who also wore a blue-and-white dress with a light blue headscarf and a pair of slightly raised black sandals. Many of the children had face paintings of the flag of Somalia in shimmering sky blue with the white star in the middle.

Since it was my first such celebration, I did not know what to expect and so I did not go early. I arrived at the park around 5:30 pm and made my later afternoon prayer at the park. The pomp and circumstance were quite exciting, and everyone found themselves dancing or shaking some part of their body in response to the music. Not only the adults but young kids were trying to break free of their parents to dance. Many young Somalis were live-streaming the event on social media and making hundreds of videos and photo records. Women went all out with their makeup as if they were going to a wedding.

The only downside was that the number of people who came in cars exceeded the capacity of the park, and parking was a challenge. Next time, I could help organize a rideshare or hire busses. This time, I was not involved in any arrangements as I do not know many people in the community, and they do not know me.

Mothers carried children, coolers, and baskets with goodies and drinks to appease their children so that they could stay longer. Fathers were also seen dancing with their children and introducing them around to family and friends. This was eye-catching because it is not normal among Somalis to have fathers walking around carrying their children, apart from very few cases. It was hard for those older women who did not believe men should take their share of responsibility more seriously, to congratulate every man who was carrying his child or children around and showing pride in them.

Summary

In this chapter I have explored the Somali culture, starting from nomadic pastoralism, the clan-based cultural system with primary lineage, and dia-paying groups that used councils of elders in guiding the community and resolving conflicts. I have discussed how Somalia had systems of governance and how it was colonized and partitioned by groups with their own agendas. I then moved on to how Somalia fell into disunity and disarray due to the tight grip of a dictatorial president and the pressure he felt both from within and without. This later led to clan warfare and civil strife. Then I discussed the Somali migration within Africa and their later resettlement in the West, and how women are maneuvering life in refugee camps and the West. Although both men and women have gone through a difficult time, I focus on the women because women are the ones who face more problems during peacetime or wartime and they have the added burden of caring for the children, the elderly, and those who are wounded or ill. They are always the caretakers, continually extending themselves in the service of others.

In the next chapter, I will explore the findings from the interviews and the interactions that I have had with the Somali women who participated in my study. I will try to include as

many of their voices as is necessary to present what they are saying about their culture. If it was up to me, I would love for all of them to be against female genital mutilation. But it is not up to me, and they are not all against FGM. The next chapter explains what they stand for, and why.

CHAPTER 6

FINDINGS

In this chapter, I will discuss the major findings of this research. These findings came directly out of the interviews, and five themes emerged from my analysis of the interviews Table 2 is a summary of these themes; I provide further explanation of each theme in the sections below.

Table 2 (Spates et al. 2019)

Themes	What they encompass	Salience/Frequency
The desire to maintain religious practices	Prayers, fasting, charity, volunteering, helping neighbors	14/100%
Belief in and commitment to cultural norms	Food, language, dressing, marriage	14/100%
The need for belonging and identity	Communal ideals, clan kinship, cultural ties	14/100%
Socialization of the next generation	Oral literacy, instilling the idea of sharing and caring for each other, reverence of elders	14/100%
The unbreakable cycle of FGM	Importance of FGM	6/42%

Theme 1: The Desire To Maintain Religious Practices

The women I interviewed talked a lot about the religious practices in which they take part. They included praying five times a day, fasting during the month of Ramadan, giving to charity, and being good neighbors as obliged by Islam. They all agree that religion was one part of their culture which they would not overlook or discard wherever they went. The participants unanimously agreed on this fact. It affects their dress and what they eat, among other practices. For example, Ceesh, a 73-year-old, noted, “ I pray five times a day, I fast and I read the Quran. I also give charity and alms to the poor as is required by my religion.” This theme reinforces FGM through a lack of knowledge, especially women’s lack of knowledge because many of them think due to the type of FGM called Sunna, that this practice originates from Islamic teachings. Because they do not know their religion well, it is hard for them to confirm whether or not this is true.

This theme encompasses connectivity to both local and ancestral culture and communities. This is clear because the women talked a lot about how the most important part of their culture is their religion and the language in which it is communicated. Among my interviewees, only Naseeb, the 30-year-old graduate student; Fayow, the 60-year-old former accountant; and Nafiso, the 26-year-old, speak Arabic fluently, and Saida was learning Arabic. For this reason, I found that most women could not disprove what they have been taught as a religion throughout their lives.

Based on the data collected in this study, staying connected to ancestral culture is important to women within Somali communities in the West. These five points were consistently discussed by respondents: the difficulty of maintaining Somali culture while in the United States, acceptance of elements of US culture, the impacts of popular culture on young Somali

Americans, the communal nature of Somali culture, and the role of Somali women in the United States in preserving the culture.

Maintaining Somali Culture

Each participant agreed that it would be easier to teach the next generation and maintain ties to traditional Somali culture from within Somalia, rather than from outside the country. Even other countries on the continent would be preferable to the United States for this task. Moves to the West significantly exacerbate this issue. Traditional Somali life within the native country would typically bring with it countless examples of community members performing Somali culture. No amount of conversation can replace the firsthand witnessing of collective mores, bringing with it an inherent shaming and shunning of those who fail to adhere to Somali norms and values. Culture is practiced in every element of Somali life, and is taught directly and indirectly by community elders, grandparents, and extended family. As Somalis have long suffered being forced to seek asylum in other countries, no move has proven as treacherous to the sustenance of Somali culture as the move to the United States. Salado, an 80-year-old woman, says that “every Somali girl should be cut, the unclean part should be taken off, that is our religion, that is the right way to practice our culture and religion.” In other words, engaging in FGM is staying connected to the culture of which religion is a major part.

Acceptance of Elements of US Culture

Originally, I had assumed that the increase in FGM practice is a reaction to the rapid Americanization of Somalis, especially the self-centeredness. This turned out not to be the case, at least currently, because many Somalis remain true to their ancestral culture while embracing

parts of the American culture that they deem useful and necessary. Some even went as far as owning up to admiring parts of the American culture and even imputing it themselves. For example, Nuria noted that she admires “the system of rules and the parents who teach their children and are good law-abiding citizens.” This is about the conflict in Somalia and the warring factions that have created unlivable conditions in Somalia as compared to the United States (Deyo and Bartlett 2012). Shindays supported Nuria by saying, “The things Americans do for each other, like when there is a hurricane and they fundraise for the needy, that is a good thing.” This shows that Somali women admire parts of American culture. However, they are also aware of the differences between Somali and American cultures. One difference the Somalis seemed to be aware of when comparing American culture with Somali culture is the difference between communalism and individualism; the Somali culture being the communal/collective culture and American culture being associated with egoism. However, in connecting this research with other research on the reproduction of inequality, according to Willis (1981) when certain norms are enforced, these norms are countered. In essence, this means that due to urbanization and later colonization, Somali elders felt threatened, and that is why they emphasize their culture as a means to counter the dominance of the colonizers. In this sense, FGM allowed the colonizers to dehumanize those who practice this ritual as barbaric (Hosken 1990), and it gives these groups some power as they accept some of the colonizer’s culture (Fanon 2004). In my previous research, an elderly Somali man said that the movement against FGM was a Western ideal and that I, the researcher, was speaking as a Westernized person (Abubakar 2012). This same man, Giirre, a 70-year-old, was trying to convince the other participants that they should not be talking about female genitalia, and that the issue of FGM and surrounding cultural norms were not their problems, as they did not participate in them. This prompted a young man of about 28 years to

get riled up, noting that shrouding FGM and other problematic cultural practices in silence is what prevents Somalis from moving forward (Abubakar 2012). This resulted in an argument between the two men as they tried to out-talk each other until I was afraid they would get physical. However, I asked them to kindly talk to me instead of each other and tell me how they felt about the subject; the other men agreed, and that helped open up the discussion. This shows how sensitive the cultural ritual is and how attached some feel, even though they would not say so in public.

US Popular Culture

The influence of other cultures is unavoidable for Somalis in the United States. Popular culture has had the furthest reach, leading many of the respondents to complain that media advances are not always a good thing. The women often talked about how this is problematic for their children and other young Somalis. A young college student, Lul, notes that “young Somalis who live in the US are very untraditional, because they do what they want, and do not care about their culture. This is because they are affected by other cultures and the social media matter.” Lul is indicating that a connection to Somali culture is being severed by following popular culture. Another participant, 40-year-old Khadra, says, “In Somalia, we were sharing and getting to know each other but here it isn’t like that. When going for coffee together, each one pays separately, that is the American culture. Our children are becoming American through popular culture.”

The Communal Nature of Somali Culture

As evidenced by this research, Somali culture is very communal. This means Somalis share everything and care for each other. This is both a religious imperative to help your neighbors and

those who are traveling among you, and a cultural prescription. Therefore, it is a very important value for Somalis, beginning from the nomadic pastoralist lifestyle. This is because nomads roam the land for better watering and feeding areas for their families and animals, and traditionally were unable to carry supplies on their backs while looking for better or greener pastures. It helped to etch into the fabric of society the notion of catering to travelers and neighbors because sooner or later, this is going to be you or a loved one (Abdullahi 2001). As my respondents noted, this culture of sharing and caring for each other, be it the sick, the elderly, and most importantly the young, is the opposite of American ideals. Everyone feels responsible for the next generation. All the participants have time and again reiterated the importance of communal ideals.

That Somalis are known for sharing is something that brings pride and joy. The women have all talked about continuing the sharing of daily things so that no one must run to the store to fetch daily needs such as salt. Saida says, “I wouldn’t run to the store if I had a Somali neighbor. I would just get what I need from my neighbor and of course if she needs something, I will give it to her, that is the normal Somali way.” When asked about cooperation, Nafiso, a 26-year-old, said that “there was an old lady who was walking alone around the park in our neighborhood, and she was attacked. When we heard about this, I sat with a few neighbors and planned to walk together. Every time we wanted to walk, we would call each other to go together.” Nafiso continued, “When we met with other Somalis, we warned them about what happened in our neighborhood.” This shows solidarity and neighborhood cooperation. However, this cooperation is mostly among Somalis, as many have said that it is easier to build a relationship among their own kind. It is also due to the lack of English language skills which makes it difficult to sustain a

conversation with non-Somalis. Somalis are very aware of the differences between themselves and other Americans, which makes them care about their interactions with others.

The two oldest respondents in this study emphasized how the community works together. Salado, an 80-year-old participant, says that “the Somali people culturally help and love each other even though some have destroyed the trust among the people.” Ceesh, a 73-year-old new arrival from Somalia, adds, “Somalis help each other, especially during weddings and in times of need, such as help with the basic needs of food, shelter, and clothing. If somebody needs to be bailed out, Somalis contribute to help.”

All the women agreed that Somalis visit sick people at the hospital, but they also do more, even for those who are still in Somalia and those in the refugee camps. For example, Lul, the college student, says, “Somalis also remit funds to the people who have been left back home in Africa, not only close but distant relatives, friends, and former neighbors.” Ceesh supports the remittance story and adds that “if we see neighbors who are hungry or have other problems we help as much as possible, including visiting them at the hospital and on their part, neighbors have welcomed and reciprocated as they are practicing their Somali culture with open arms and hearts.”

Although Covid-19 has affected every community in the United States and the world over, it has hit Muslims in general and Somalis in particular very hard because not only can visiting the sick be prohibited, but visiting the families is also prohibited if their loved ones have died of the disease (Ohio Department of Health 2020). This practice of visiting each other is also Islamic teaching: to respect and care for neighbors and help them when you can. The women emphasized that this is an obligation that they take very seriously. Khadra, a progressive 40-year-old woman, adds that “it does not matter what religious or cultural background neighbors have,

when it comes to neighborly collaboration, we respect and help each other no matter who they are.” However, many of them said it is easier to connect with Somali neighbors. Nafiso, a 45-year-old, says, “you say peace be with you today and another day, next thing you know you are conversing about different things.”

The Role of Somali Women

Even though the women were proud of their culture – at least the positive parts that help bring people together and share many things – there were a few negative things that may cause division, for example tribalism or clannism. Some of the women did not like the over-expression when talking, such as being loud and using gestures that may be intimidating to non-Somalis or may make outsiders think people are fighting when they are having a regular conversation. In addition, the women also admire parts of American culture, and they do practice it or try to improve themselves. For example, they admire the system of laws as compared to the lack of law and order in Somalia, and the lack of security and stability in the refugee camps. These experiences shape how the participants of this study interact with outsiders, including trying to be close to other Somalis.

The women were very protective of certain parts of their culture, which they practice by dressing modestly, practicing Islam, eating Somali foods, and speaking the language; they were also taking the extra step of teaching younger Somalis. All 14 women said that they are practicing their religion and that it was the most important part of their culture. Religion is closely followed by the language and the socialization of children. This helps the culture to continue and for the adults to remind themselves of where they are from (Abdi 2014). Most families discourage fast foods, as Somalis worry about whether these foods are halal (meat from

animals that are permitted and slaughtered following Islamic law). For example, Fayow, a 60-year-old participant, noted that “regardless of where we are, we have the religion, and it is one of the most important parts of our culture.” Even before leaving Somalia, whether they were nomads or urbanized Somalis, they still practiced their religion. The rest agreed with her.

Salado, the 80-year-old, said, “There is nothing in my culture that is to be discarded or changed. My culture is self-correcting and if there is anything wrong, it will be discarded over time.” This clarifies the point Ahikire (2014) is trying to make: African women accept their roles as mothers and wives, however, they are fighting for other rights such as inheritance and land ownership. On the same question of something in the culture to be discarded, Ceesh, the 73-year-old new arrival from Somalia, emphatically says “No, there isn’t any part that can be done away with. There is not a single thing in the Somali culture that I would suggest being discarded. These are things that have been practiced for thousands of years; through time they have only become better.” Ceesh was looking at me as if to ask, “how dare you to talk about my culture that way?” The other women had several complaints about other aspects of Somali culture, while celebrating certain parts.

Aspects of the culture celebrated include ceremonies like bridal showers and wedding ceremonies. Weddings, Naseeb says, are a beautiful thing. In other words, these occasions bring Somalis together so they can share and exchange ideas. All the women who participated in the study emphasized this, saying that Somalis are very generous, especially with food. Among the Somalis, the saying goes, what is mine is yours; even more so among women, as they are the housekeepers and caretakers, duties taught to them as children and which they continue to teach their daughters. Lul, a 22-year-old, said, “my culture is my identity, it means a lot to me. It is

what my mother taught me, and it is what my grandmother taught my mom and has been going on for generations.”

The role of women is not pronounced among Somalis. However, women have always played an important role. According to Chambers (2017), most Somali women dress conservatively in burqa-like clothing that cover almost all of their bodies. This was reiterated by the women, who noted that they dress very modestly for religious and cultural purposes. In this way, they have become visible keepers of the culture. However, according to Abdi (2014), they have not been able to take the decision-making power for themselves as they continue to be subjugated almost as much as they were back home, because that is what they are used to. According to Willis (1981), they are partaking in their inequality even though they are here in America where they can change that, thereby reproducing this inequality.

Theme 2: Belief in and Commitment to Cultural Norms

Cultural norms are considered important. Although they intertwine with religion to some extent, the women felt that their cultural interpretation of Islam separates them from other Muslims who may be Arab or even other Africans. They guide aspects such as gender roles. Such roles are not changeable and affect how Somalis interact with other people. This theme enforces the practice of FGM through the normalization of practices such as bridewealth, whose negotiations exclude women. Such exclusion is supported by the patriarchy on which Somali culture is based. Since Somali girls are usually not accepted at birth, their first chance of acceptance is during circumcision, which leads to their formal acceptance during marriage as they are exchanged for camels from their birth families to their married families.

Theme 3: Issues of Belonging and Identity

The women in this study need to belong to something bigger than themselves, a notion that they have grown up knowing and appreciating, but here in the United States this takes a different meaning. For example, Lul, a 22-year-old, says, “I like every part of my culture. I am not saying this just to say it, but I do. I do like the whole process of things that we do. And I believe there is a reason why we do certain things in certain ways.” Lul was the youngest participant and a college student who came to the United States as a four-year-old toddler. Others who came here later in their lives identify more with Somali culture and continuously keep their cultural connection alive. This theme reinforces FGM because the women feel they need an identifying mark that makes them belong to their culture – even though this mark may be considered shameful by members of other cultures with whom the women interact (Abdel Halim 2006). I have explored the fact that women are afraid of the culture in their new home. For that reason, they keep their own culture, which beckons to them as the new carriers of the cultural banner. This makes it very hard for the women to decide to discard even the hurtful parts of their culture such as FGM and the related issue of bridewealth.

As we have explored in previous chapters, there has been a historical silencing of women. Such power over women makes it easier for elders to enforce norms. I will attempt to show in the following paragraphs that these include norms of marriage and negotiation of bridewealth carried out by elders – all men. In understanding their standpoint, we are trying to meet the women where they are by learning from them through their experiences.

Silencing of Women

Many of the women interviewed tried to pull me into their conversations. They see me as a Somali person who knows the community's secrets. Many women are not confident and seek reassurance by making others help them tell the story. It is also a way of making others attentive by involving them in responding and asking questions while telling the story such as what did so and so do or say. In this study, I found the women were using me as a witness to the culture. Also, as I have explained in the methodology chapter, the women saw me as an authority to respect. Essentially, the women were seeing me as they would have liked to see themselves and their daughters, and sometimes even as an honorary man due to the multiple barriers that I have broken in their eyes.

Somalia has been in conflict for the last 30 years. Many of the women who were in the study were barely born when the war broke out in Somalia. Hence, they have only seen chaos and lawlessness; some of them were born after the war and during the civil unrest and disorder. For this reason, they appreciate the law and order in the United States and the stability it brings in the governance structures around them. Even those who were older, many of whom were living a blissful rural and nomadic life, lost their animals and farms, which forced them to run away and seek refuge in second and third countries in Africa and the Middle East.

The civil war also brought about looting and the breakdown of normalcy in the lives of Somalis. Being considered weak, women were looted and sometimes raped or even killed in spite or as revenge (Balakian 2016; Abdi 2014). Some of the women have temporarily lived in displacement camps inside Somalia before realizing the situation was not improving and it was time to move on to seek refuge. Salado, the 80-year-old, said "I was a nomadic pastoralist, and one day some gangsters came to our homestead and took all our animals from us as I watched.

That forced me to flee the hunger with my children to Hagadera refugee camp – the largest refugee camp in the world – which is in northeastern Kenya.” She also says that in the refugee camp, she continued to struggle to educate her children as she had no resources. This makes all the women appreciate the law and order in the United States and how these help to make life smooth. Even when someone does not like you, they cannot just attack you, especially if you have others who can be witnesses. The women had been silenced by their own culture, and in the refugee camps they were further victimized by Kenyan security forces (Balakian 2016).

According to Samatar (1997), the effects of the two forces of political oppression and economic implosion led to destruction such that the nation-state ceased to exist. This means that the civil war led to the breakdown of all the systems of laws and social norms that protected all people, allowing or enabling thugs and gangsters to attack innocent civilians because they know there will be no repercussions (Samatar 1997). This makes clear the participants’ identification with a working system of laws and government. Women, having never been taught to protect themselves or work outside the home, have suffered the most, especially those who led rural lives and did not know any other way to survive.

The participants also acknowledged that Somalis have been forced to adjust to a new culture. Adjusting to a culture with individualistic ideals from a culture of sharing and communalism has taken its toll on Somali youth and their parents alike. Participants also felt that Somalis experience a lot of social problems because they are not well equipped for a cultural milieu like that of the United States. Being thrust into this society brings them face to face with issues that they do not know how to handle effectively. This is because women have never been accepted as breadwinners or decision-makers, and this study has tried to make that clear as an understanding of the Somali culture (Abdullahi 2001, Abdalla 1982).

Khadra and Fayow both noted that there is a need for community workshops/gatherings because many Somali youths are in jail or prison and drug use is becoming common, all because the parents do not understand American culture. The women emphasized that their parents or grandparents were not exposed to these kinds of situations because back home the children were raised by villages. From observations, women have become the keepers of the culture, and women who do not speak English and who have no job skills fend for themselves and their children single-handedly. Abdi (2014), when discussing gendered opportunities, notes that Somali women have made strides in many different areas. However, Abdi adds that the trauma that women suffered under colonial systems and dictatorships and through insecurities during conflicts, displacement, and refugee camps continue to affect women after resettlement to America. This is clear from the women's discussions.

Theme 4: Socialization of the Next Generation

This is where cultural reproduction becomes important, as the elders who are the keepers of the culture teach the young about respect and love for their culture. Maintaining culture includes language and norms of reflecting and respecting elders and caring for the sick and the elderly. Salado gave an impassioned speech during her interview, discussing how it was wrong not to give up your seat in a waiting area while an older person was standing next to you: "We show our children by doing. We also tell them, so and so is your uncle, so and so is older than you, learn to love and respect them." This makes it easy for the children to smoothly slide into their role and to respect all their elders. This theme enforces the continuation of FGM, because we have seen cases of girls and young women being physically forced to be cut while they struggle to run away. Naseeb, a 30-year-old graduate student, said, "they just put us in this bed and

people are holding my legs and this old lady came with scissors and started cutting, and I just felt violated and unprotected.” The young girls are not willing to undergo this painful process of cutting and stitching, but then again even those who seek these services are doing so because they are afraid of the unknown and ostracization. Not only is the young woman ostracized, but her brothers may also not get a wife to marry, her father will not be able to participate in social gatherings of elders, and her mother may not participate in mat making and material collections with other women (Abdalla 1982). No family can be expected not to be afraid, and this is also such a huge burden on the shoulders of little girls, but it helps to further propagate FGM practices.

Socialization of subsequent generations is very important to Somalis as it is to other communities. For Somalis, this entails the teaching of valued norms regarding what is expected of the children as they grow, done in an informal oral way by elders, grandparents, parents, aunts, uncles, cousins, and older siblings. It is the duty of every Somali to teach a younger person their ways. That is why Lul, a 22-year-old, is teaching her siblings and cousins the culture and demanding that they speak in Somali.

As is evident from what the respondents said above, and contrary to popular belief, the Somali diaspora separates itself from mainstream American culture, especially when it comes to communal ideals of sharing and caring. For example, Shindays, a 48-year-old mother of 10 and a grandmother, explained that “we have been taught and taught our children that anyone older is like your parent and can discipline you.” This has to do with norms of raising children together. A popular saying is “it takes a village to raise a child.” In support, Nuria, a 48-year-old woman, noted that “the women in the neighborhood come together and collect money to help with new moms or those who fall ill.”

The women attached negative attributes to American women's dress, because they experienced culture shock when they saw how American women dress. This is especially true for the elderly Somalis when they see American women for the first time as they are used to women dressing very modestly; Somalis are taught from childhood that the accepted way of dressing is to cover up. However, they kept telling me that it is not the fault of the American women because that is how they were raised. It seems that they were saying it does not affect us as long as it does not come into our home. However, American culture affects Somali youths and children who must go out every day. Saida says, "Well, it has affected them negatively, there are many Somalis in jail and prison, some have refused to get their education and are wasting time on the streets." Saida continues, "When we were in Africa, the children learned how to behave from the community. If a child was in the wrong place, any Somali mother would reprimand the child, she did not have to wait for the mother." And she adds, "But here, you can't do that, children would harshly let you know that you are not their parent, and the parent would be upset that a stranger tried to discipline their child."

Lul, a 22-year-old student, and Hiba, a 32-year-old woman, think Somali youths have been negatively affected in many ways by American culture; Lul says, "It is very hard for children at young ages to keep in touch with their identity and where they are from because of how we live and this social media matter. Children forget to speak their language because they might be made fun of at school." Lul thinks this loss of language is a tragedy. As the children are not mature enough to argue for what they believe in, or do not know enough about their culture, they easily get swayed. It also affects their dress, especially boys, who want to look like their favorite stars. Lul says, "they get tricked into living a lie because the life on TV is a lie." She gives examples of people not having problems or mishaps on shows and how everything is so

easy. Additionally, Lul says, “that makes youths aspire to have that life and to try and make it without working hard for it.” Lul gives a real-life example. “I feel like TV and social media are teaching and influencing people who are not even in this country, okay.” Lul adds, “Somali youths have forgotten their culture and language, they behave like they are not Somali. I would not marry a man who does not speak Somali because I want my children to learn to speak Somali.” Despite being the youngest participant, Lul has a strong feeling of connection to her language.

Khadra, a 40-year-old woman, says, “The Somali youth have become antisocial and not like how they were in Somalia.” She goes on to say, “In Somalia, we were taught sharing and getting to know each other, but here it is not like that. I think that is not a good thing.”

Naseeb, 30 years old, believes Somali youths have been negatively affected in many ways by American culture; she cites the hip-hop culture where the kids listen to the music and rap and try to emulate them “in courtship and in how they treat women, which is not necessarily ideal as most of these videos oversexualize the youth and demean women.” This is because as entertainment, popular culture is temporary fun, but Naseeb says “it can be emulated by the youth, which makes them lose direction as they assume what is portrayed as truth is elusive and a goal post that keeps moving, as those are not achievable.” Here she is talking about weight issues or certain looks that are considered ideal among the young, but which are not attainable by everyone.

Saida, a 32-year-old woman who is also a religious scholar in training, says “Somali men meet at coffee shops, no youths or teenagers will be present at the teashop because they get bored with what the elders are talking about and find fun elsewhere.” Therefore, unlike the old country, they are not learning from the elders through oral literature and instead are learning through the

media, especially through television. This makes Somali youth even more susceptible to being influenced by the media and popular culture. Naseeb notes that “although I see popular culture as entertainment, it can be a distraction and make young Somalis see the idea of gangs and drugs, and lying – which, unfortunately, is being portrayed as something that is ok – as a good thing.” She continues, “Making them see it as acceptable, unlike how it used to be back home, as the society stood by the values and the few who did not follow rules were not glorified.”

Theme Five: The Unbreakable Cycle of FGM

Even though every woman in my study has undergone FGM, which means they have experienced the pain, the bleeding, the trauma, the uncertainty, and sometimes even have seen death during childbirth, many still believe it is appropriate to keep this practice or at least parts of it. One of the reasons, as I have explained above, is that women continue to be exchanged for bridewealth, even though the amount has been drastically reduced due to the conflict in Somalia. Even so, communities continue to mutilate their girls in preparation for marriage within the culture, and although Somalis may still practice genital cutting on their daughters at the later ages of 10 to 12 years, leaving the old country forces families to seek such services for their daughters at younger and younger ages. For example, Lul, the 22-year-old college student who came to the US as a four-year-old, said she was already cut and healed up by the time she came to the United States. Salado, an 80-year-old woman in my study, noted that it was not okay for an adolescent girl not to be cut as she was not “clean” enough to read the Quran.

A major finding of this research has been that the discourse around FGM is convoluted and taboo. Mired in patriarchy, women are all but forbidden to discuss it or any other violence against them. Furthermore, there is no common language to discuss it across cultural lines. Even

scholars have struggled to name it. Another finding is that Somali women are socialized to adhere to rules asserting that they have no ownership over their bodies. Also, Somali women have been misled to believe that some form of FGM is a religious imperative, when in fact there is no such directive. Finally, I have further uncovered the widespread sentiment that FGM is a part of the circle of life. Ultimately, Somali women are resigned to FGM as an inevitability.

Discourse Around FGM

FGM, primarily known as female circumcision, is ingrained in the Somali culture as something considered sacred. This is because the Somali culture, with its patriarchal values, enforces the practice through the norms of the community. These are the norms of marriage and the upkeep of the family name. For example, Salado, the 80-year-old respondent said, “It is a duty to circumcise our girls and that is what I love for them.”

Among the reasons why the Somali diasporas, especially younger women, are attuned to eradicating FGM is their assimilation into the Western culture of individualism. This is opposed to the Somali culture, which advocates for communal ideals of belonging together (Hussein 2008).

FGM has been given a religious imperative, yet research has made it clear that this cultural practice is bigger than one religion or culture and is widespread among many ethnic communities. For example, Mernissi (1991) notes that we should learn the scriptures to educate ourselves about what is a religious duty and what is not. However, since many women can neither read nor write, they are unable to read the Quran or the Islamic Traditions, which makes it hard for them to know for sure what is religious practice even though they have been practicing this forever as cultural knowledge. That is why some of the women say they think

FGM is a religious obligation. Just as Sowa (2017) notes, many elders in Africa have used scriptures as a source of power to control the masses. Somalia is no different, and women especially have been on the receiving end of this misuse of power, as Abdalla (1982) reminds Somali women that they should not allow their bodies to be mutilated for the benefit of men. However, the women have continued to be docile, as they have been taught that is the best recipe for survival. As I have mentioned previously, many who have refused to toe the line have lost their lives as they were mauled by wild animals (Bokore 2013, Abubakar 2013, Abdalla 1982). Salado, the 80-year-old, noted, “today if a girl reaches adolescence without being cut, she cannot read the Quran, because she is not clean.” Not knowing the religion makes it easy for them to be convinced that things like FGM are required.

Much of the research on FGM uncovers scholars who have expressed concern with the name of the procedure. After a decade of research on this topic, I now realize why it is so hard to name. The main reason is because it is a taboo subject among many cultures and many women think it is the right thing to do. For example, Abusharaf (2006) notes that every community calls FGM a special name in their culture. Although it is all FGM, there are types one through four as I have explained in the introduction, so many assume that it is not “bad” if it is mild or not stitched. For example, Salado and Fayow both insist that there is a mild form of FGM which is acceptable. They are not saying it is not painful, or that the girls are willing to be cut; they are, however, saying it is acceptable and normal and nothing to worry about as long as the girls are safe. Khadra noted that “not all FGM women have problems with giving birth and some mildly cut women also have problems with dysmenorrhea and difficult childbirth.” That is almost exactly my point, because what this research is trying to uncover is whether all sorts of cutting can be viewed as problematic.

I think another reason why FGM continues is that it has been difficult for Somali women to understand that FGM is not ordained by Islam simply because the word Sunna is used to denote it as an Islamic practice. As I mentioned earlier, clever use of language is one way of reducing women down to size and making them abide by special rules (Abdalla 1982). Political or other ways of playing with language are usually employed to keep women in check because they do not carry the family name (Abdalla 1982).

Most of the women discussed the FGM procedure in-depth as being painful and forced on the girls. The women knew FGM was not a happy occasion, and that sometimes singing is used to defuse the tension and fear. The venue is described as gloomy, dark, and unfriendly. Older women grabbed little girls and young women and pinned them down to immobilize them. Naseeb, the 30-year-old graduate student, affirms this by recalling, “Well, when we got it done, it was more like in this junk home, I remember I was six or seven, it was in a home that was so nasty, it looked like one of those muddy huts; it was very dark, and the lady had a small window that was not opening.” How did this make her feel? “The place was terror-inducing, it was a terrible place and then they just put us in this bed and people are holding my legs and this old lady came with scissors and started cutting. I just felt violated and unprotected.” After which she released a very long sigh as if she were relieved to say what she said.

After cutting, scrubbing, and stitching/sewing/sealing, girls are tied with a rope from their waist down to their knees during the day and to their toes at night so they would not disturb the healing process. They are also not supposed to drink a lot of liquids to further help with the healing. In addition, if they want to urinate, they must lie on their side, as a newly circumcised girl cannot squat. For 15 days, girls are not supposed to play or do any active work. Some of the participants have younger daughters or nieces born here in the United States who are not

circumcised. They have heard and seen women who have experienced difficulty with childbirth, such as being in labor for days. The participants are aware that FGM makes an already complicated and painful process even more difficult. Many also know that some people use thorns or gum trees to sew the genital area, and there is no medication for pain management or antibiotics. Hubi, a 45-year-old mother of 10, repeatedly said, “When it is performed on a young child, the body/skin easily comes together, then they have to be reopened if she cannot urinate.” Hubi gives a first-person account: “That happened to me personally, because you may not be able to pass urine, it is very problematic and painful. I have gone through it myself; I am not even talking about what happened to other people.” Additionally, she recalls, “I was tied, and I could not move freely, it was a very tough experience for me. I didn’t go anywhere for two weeks, and I could not even drink liquids because they said I wouldn’t heal.” She also adds, “I see FGM as something that is very problem-ridden. I do not see its value and I would like girls not to suffer that anymore. I have struggled with it; you know; you have to be cut when you give birth to a child.” This contradicts what Abdel Halim (2006) notes about Sudanese women who do not readily express displeasure with FGM, especially to a person who has had a similar experience to theirs. Naseeb, the graduate student, says after realizing what happened to her in her early teens, she confronted her mother, and “my mother said, ‘you should be grateful that they sewed you with a thread and a needle, when I got it done, they used thorns to stitch me up.’ So, she is like, ‘you had it easy, what are you talking about?’” This passage demonstrates that the vicious cycle of FGM continues, because every mother does to her daughter what her mother did to her. Girls are not supposed to complain as they are told that what was done to them is normal and expected. It happens to every little girl.

The main reason for FGM according to Lul, a feisty college student, was the fact that Somalis think that girls have unsurmountable libido – “that if a girl does not get that surgery, then she is going to like crave sex more, and she will be considered a whore and she would want marriage more.” According to Abdalla (1982), girls were practically for sale and they cost a hundred or more camels. This fact encouraged the men not to see women as humans, but as property that one had to ensure was worth the price. Many note this mentality has somewhat changed, and although the women are still undergoing FGM, they are not treated like property as such. Salado adds that in the old days, most people lived in rural areas and people knew each other well. And as people followed cultural norms that forbade sexual relations outside of marriage, people trusted each other, and fathers would encourage their sons to marry a certain girl because they knew her family. Salado also says that “as people moved to cities, people lost trust and families were afraid that girls would easily be susceptible to promiscuity.”

The research also showed a relationship between the literature reviewed and the findings from the field. For example, James and Roberts (2002) state that the operations vary in extent and severity, from nicking of the clitoris to draw blood to its complete removal, and from the sewing together of the labia minora to the complete removal of the labia minora and the inner surface of the labia majora with the stitching together of the remaining tissue so that the genital area heals to form a solid wall of flesh over all but a small portion of the vaginal opening. The women in this research project talked of having different kinds of FGM, from Sunna, which is cutting off the clitoris, to Pharaonic, often involving complete cutting and stitching of the whole genital area. Khadra, a 40-year-old, said “in involving girls’ genitalia, there is cutting, and there are different kinds of cutting.” She personalizes it by saying, “my older sister was cut severely, but I haven’t gone through the severe form myself. However, my mother has always talked about

and regretted my sister's operation." According to the WHO (2000), the procedures are mostly performed on young girls between infancy and age 15. This is partly true in Somalia, as many of the women said they were circumcised before age 10. However, not many of them were aware of the circumcision of infants. Hayes (1975) points out that infibulations are painful, and many times circumcised women must undergo surgery before marital sexual intercourse and almost always to enlarge the birth canal for a child to be born. The older women and some of the married young women have talked about this difficulty, and some had to be opened to make it easy for urine and menstrual blood to come out. In a prior study, some women had to undergo surgical removal of a cyst that was covering their genitals as a direct result of FGM.

Utz-Billing and Kentenich (2008) assert that FGM is a very delicate topic that is deeply rooted in the tradition and culture of a society. As such, it is an interwoven web that cannot and will not go away that easily. Rather, more efforts are needed to empower women through dialogue to help them realize their power in unity. Similarly, the female participants of this study have said they love their culture, and although some have said they would like FGM to go away, none of them have forcefully used their voice to make that happen. Some have said it is okay to have some form of FGM, and significantly have given the example of the type they underwent as being "okay." These statements send mixed messages to the younger generation; for example, Lul, the 22-year-old, said, "I feel like that is not okay. I feel like that is not okay, right? That shouldn't happen to girls, right?" But then when her mother walked by the window, even though she could not hear us, Lul said, "My mom told me that I only got a little bit cut, so mine is okay because I don't feel anything. I pee properly and nothing hurts in my urine, so I use the bathroom perfectly, so I don't have any problems." Therefore, telling young women that your FGM is better than others because a mild form was performed just makes it harder for them to let go. Lul

seemed to be appeasing her mother and convincing herself that what was done to her was okay, even though in the back of her mind she felt it was wrong. She could not stand up to her mother and the older generation. There was a discussion between Lul and her friend, and then Lul and her mother; when she discussed the struggle her friend is facing, she came back to talk to her mother about it. This passage came directly before she said that it was not okay for this to happen to girls:

I remember my friend, she was telling me she got hers cut, she got her surgery when she was very, very young. And she remembers the pain and going through it and everything. She said it hurts for her to use the bathroom. Like it hurts to pee and things like that. And um, I asked my mom. I didn't want to be disrespectful or anything. I just asked her about people who get this surgery ... and she was like, you know when you are having a kid, they will have to cut you up for the baby to come out. And when you are having sex, it would be harder for you and things like that.

This passage is very raw, but the truth of the women must be told even though we do not have the best words to describe them. This young woman was animated when talking to me, she was raising her voice, she almost seemed like she would stand up. However, Lul is still respectful of her culture and her mother.

Ownership of Women's Bodies

Denniston and Milos (1997) assert that among communities that practice FGM, community members' bodies are considered communal property. Hence, they view the sexual organs as not

belonging to the individual but the herbalists, elders, and community leaders. These same people shape the culture and the social rhetoric that goes with it. They create the culture and enforce its practice through these social scripts by which members know they must abide. The women know they are treading on the thin ground because they are weighing their options, especially about what to accept and what to refuse specifically here in the United States (Abdi 2014). The women did not say this themselves, but from observations, review of the literature, and prior studies, women do not own their bodies, because they are mutilated for the pleasure of men (Abdalla 1982).

Most of the women said they would have loved to not be cut, or they would have preferred not to have cut their daughters. For example, Fayow, a 60-year-old participant, noted “I was too young when I was cut and nobody asked me anything, I would have loved not to be cut.” Fayow was an accountant in the government before the civil war in Somalia. She reiterates how the girls have no choice or explanation for what is happening to them. However, it is not up to them what happens concerning FGM. This is because of the prevailing narrative that every girl must go through this rite of passage.

Nuria emphasized that “courtship is according to the Somali adaptation of Islam, and even here in America, it continues to be, because the proper channels must be followed when seeking marriage which means parents must be notified and bridewealth negotiated, then the knot must be tied by a sheik and the wedding is blessed by calling family and friends to celebrate together.” Naseeb talks about the beauty of marriage as bringing two families together, adding that even when the two who are getting married agree, the elders from the groom’s side must officially visit the elders and family of the bride, to ask for their blessings and acceptance of that

marriage. This event indirectly shows how women's bodies are controlled by elders who exchange them for bridewealth, and therefore ordaining FGM as an undercurrent.

The practice of FGM has become normalized such that it does not surprise anyone. The practice is enforced through Somali culture, with its patriarchal mores, through the norms of the community. In the past, girls were cut in order to be marriageable, and uncut girls did not have that chance (UNICEF 2021). The United Nations Children's Fund updates their information on FGM every year. However, this theme of FGM and its relation to the mores of marriage and rites of passage is a long-standing one. However, nowadays some men say that preference is given to uncut women simply because FGM is not good for either of the partners (Abubakar 2013). In my previous study on FGM, there was an argument between elders who felt that FGM was taboo and should not be talked about in public, and the young men who said they would rather not marry women who had FGM because of all the health problems associated with it. Some women note that FGM is a private matter, and people rarely, if ever, talk to non-Somalis about it. Only Khadra noted that she once helped a man who was trying to find out what the reasoning for FGM is. She said, "I partnered with an Englishman who was interested in finding reasons." However, she said, "I have no clue," to signify that she does not know the reasons behind FGM and to prove the point that the practice is not something that is discussed as freely as some would have us believe. Just like Oyěwùmí (2003) notes, European researchers may want to portray African women, especially those ethnic women from cultures that practice FGM, as victims. Rather, it seems these women do not want to discuss their private issues with foreigners. This is not like the way Gele et al. (2012) portrayed Somali women as discussing FGM with everyone, including men. On the contrary, these are private issues that are not easy to discuss. This is clarified by Gruenbaum (2001), who notes that among communities that mutilate their girls, the practice is

considered an unremarkable part of their lives as well as private and therefore is not readily discussed with strangers. Gruenbaum also (1996) argues that Westerners should not view FGM as a maladaptive cultural practice; rather, scholars must analyze FGM within the larger contexts of women's lives in developing countries. Gruenbaum was brought up in Sudan before she became an anthropologist, and she went back to study the Sudanese culture of which FGM was a part. Even with that understanding and clout, she found it was not easy for Sudanese women to talk to her about it.

Khadra, the 40-year-old, does not think that FGM preserves a Somali woman's cultural identity since uncircumcised girls feel as Somali as circumcised girls; she says, "I don't like it at all." Why doesn't she like FGM? Khadra reiterates that "I haven't personally experienced this problem, and I thank God for that. But there are other people who I have seen suffering." Hubi, a 45-year-old, fully supports her by noting that "you may not be able to pass urine [after the surgery], it is very problematic and painful." However, Somali women still practice their culture and take pride in it. They appreciated the fact that in the Somali culture, elders are respected, and the young are taught to revere the old. This reverence may be the path for discussion, because younger people who have been taught to respect their elders cannot easily disagree when it comes to cultural practices such as FGM and tell the elders how they feel about it. The Somalis believe that caring for one's parents reigns supreme in one's list of good deeds, next to worshiping one God. Most Americans may not have their parents live with them and may instead take them to a nursing home when they get older, whereas the Somalis will happily care for their parents and live with them. The Somalis, Fayow notes, do not think of their wealth and worldly belongings as their assets, but their children are. The biggest calamity that Somalis are trying to avoid is being dumped in a nursing home when they get old, where they cannot get the specific

help, support, and tolerance that they need. The Somali people also value their relatives, close or distant, far or nearby. Salado said that one visible and huge difference between the American and Somali cultures is how Somalis treat their elders and especially their parents.

Siraad, a 38-year-old, says that “girls are cleaned, given gifts, and showered with attention so they can accept and feel good about it, their young minds are manipulated.” She adds, “All the girls I saw being circumcised including myself were taken to the cutting position while struggling to free themselves and fighting.” Although women understand that their parents were under a lot of pressure to fit in and be part of the community and were also looking out for their children’s best interests, they do not have to deal with anyone looking down on them as circumcised women, so most of the women feel that parents have no excuse anymore. The women agreed that the mothers do not want their daughters to be talked about. Social pressure and the fear of not finding a mate for their daughters makes mothers carry out the dreaded FGM, but also, the mothers seem to be unwilling to adjust their radar to the situation in the United States. This is what Abdi (2014) notes is hard for many people to understand when thinking about other ways that Somali women have made forward strides. However, as is common among people who have lived under dictatorships for a long time, some of the women are still afraid of repercussions.

Misuse of Religious Power

I have always heard that the justification for female circumcision was based on Islam, mainly because many of the people who practice it are Muslim, and those who do not care much for the practice or advocate for its eradication are secularists. I, therefore, want to make it clear that religion is very important to the people that I interviewed. For that reason, if the basis for

carrying out FGM is religion, it is certain that it will be even harder to discuss the practice, let alone eradicate it. Therefore, religiosity and secularism constituted a measure of the attitudes toward FGM, as secularism was negatively correlated with practice, meaning a religious person was more likely to practice FGM. But, in fact, this turned out not to be the case. I also thought it had something to do with the education level of the parents, or their level of urbanization. Therefore, the question of regional differences was important. The unanimous answer was no. This project found that many assume that people have stopped practicing FGM, although I kept asking the question, there was no clarity whether they were considering a shift to Sunnah as though it was a shift away from FGM. However, that is how it sounded. For example, Fayow, a 60-year-old former accountant, notes that “there was a time when many Muslims practiced this culture (FGM), but now it is getting less favorable among them.”

Khadra, 40 years old, notes that “Actually it is against Islamic teachings and as people learn the religion more, they seek forgiveness and move away from FGM. It hurts you in this world and the hereafter, mothers may be punished for practicing FGM.” She adds, “My older sister was cut severely, and my mother was always talking about it and regretting it, I have always known it is a bad thing.” Though her older sister has received a type 3 procedure which is a severe form of FGM, and her mother regrets this action, Khadra still received a type 2 procedure, which is cutting without stitching. This is a big finding: among Somalis, even when they move away from the severe form of the practice, they keep the mild form which is cutting part or all of the clitoris and the labia and not stitching to form a seal. Therefore, when one first hears these women say that they are against FGM, one naturally assumes that is FGM in totality. However, what most are in fact saying is that they want to have the mild form left intact as a way of keeping the connection to their culture and to those who do not know the facts, the connection

to the religion. Therefore, when a Somali woman tells you that she does not support FGM, she means type 3, the severe kind of FGM. This continues to happen because mothers still believe that their daughters can be accepted only after cutting. Hubi, the 45-year-old, says, “For some, it is a death sentence, either they die from bleeding, or when they get married especially during childbirth.” As Mernissi (1991) suggests, many Muslims do not understand Islam, hence they do not know where or how certain things are discussed. This is problematic because Islam is a way of life in which every facet of daily life has been determined. Not knowing firsthand what is encouraged and/or forbidden is a problem, and Mernissi notes that religious texts are used as power to control those who do not know what is written therein. Although some of the women studied were educated, most were not, which makes Mernissi’s work very relevant to this research. This does not mean that the women are not doing their utmost to help their children succeed, but that they fall prey to those who use the knowledge of religion as power (Mernissi 1991).

The women agreed that parents’ education strongly affects the children, but especially when the mother is not educated. Salado, the 80-year-old, says “the environment back home helped educate the children as one would adapt by looking around.” She also notes that “if parents are not educated and do not value education as such, the child may not do well in school.” She continues, “Unfortunately, I grew up in the nomadic culture, where I didn’t get any education,” but, “I have six daughters, and each can teach her kids the Quran and help them with homework. I am very proud of them.” Even though their mother was not educated, after seeing how important education was, Salado’s daughters put a lot of effort into helping their children get an education. This is what Oyěwùmí (2003) is talking about when she notes that in FGM discussions, it is important not to portray African women always as victims. Instead, one should

look how this woman with no education or any formal job skills has gone out there to fend for her children and make sure they get to where they are supposed to go. Salado says, “I even carried firewood and water on my back to sell. This was dangerous because women got raped when they went out of the camp, especially if they were alone.” This is what Balakian (2016) emphasizes in her piece about the difficult lives of refugees in Kenya.

All the women spoke about how Islam is such a huge part of Somali culture that it is not easy to differentiate between religious and cultural practices; for example, prohibitions on food, ways of dressing, and general interactions are all prescribed by Islam, and the Somali culture has wholly taken them in. In trying to differentiate between practices, I have repeatedly asked the women to separate themselves from other Muslims who also cover and eat halal. For example, they noted that although cleanliness is encouraged by Islam, Somali women continuously burn incense in their homes, giving their homes that special smell. Fayow said, “circumcision was originally from Islamic culture.” Yet the circumcision that is mentioned in the Quran is for men only (Mernissi 1991).

When it comes to FGM and weighing it against other religious practices, most of the participants drew a sharp line between culture and religion, saying that FGM belongs in culture and not religion. On the question of whether FGM is an Islamic duty, most women say no. Some of them went further to say that it is wrong and is prohibited. First, it is taking away the girl’s rights, causing her so much pain during menstruation and childbirth, and so it is unfair to her. Issues of fairness are important in Islam (Mernissi 1991). There are also a lot of other problems related to FGM that impact women individually and society in general. Most of the women interviewed are against FGM and would not take part in practicing or supporting it. Some of the women did not know that other non-Somali communities also practice FGM. What was more

surprising is the issue of taking one's daughter from the United States to be circumcised back home. The women said that families were afraid of harsh penalties if they did that to their daughters. It was also the general feeling that there should be more discussion within the community to emphasize the good aspects of the culture and let go of negative aspects such as FGM. Two older women said that Somali culture was perfect and FGM should be left intact, especially the nicking or cutting the tip of the clitoris, or what is known as type 1. Salado, the 80-year-old, believes that after adolescence, uncut girls cannot be clean. However, she has no Quranic verse or any traditions that support her claim. She told us that she was raised in a nomadic setting, and cannot read or write, which puts her among those who do not understand Islam well due to their illiteracy. Salado also says, "my daughter is my teacher now and each one of my six daughters can teach her children, I am very proud of them." Hiba, a 32-year-old woman noted, "I don't know how to read or write, and I can't help my children with their homework." To reiterate, AFROL online (afrol.com) notes that illiteracy is rampant in Somalia with only 18% of men and 13% of women able to read and write, even in their language of Somali.

Ceesh, the 73-year-old participant, says that "cultural practices such as FGM are drawing a lot of controversy of late." Then she says, "especially as Muslims we are now learning that it is against Islamic teachings to practice FGM, but it is part of our culture and now most people understand that and are starting to move away from it." This connects with Hussein (2008), who notes that some Somalis have changed their attitudes on FGM after meeting with other Muslims who do not practice FGM; that made them change their minds.

The women interviewed, at least those who were educated, realize that this subject of FGM has no bearing in Islam; in fact, they believe that FGM is against the teachings of Islam.

They do not think it is the duty of a Somali woman or even a Muslim woman to be circumcised because there is no clear command to carry out FGM in the Quran or even in the Prophet's (PBUH) teachings. In their view, therefore, FGM was part of popular culture in other countries and had come to Somalis through interactions with others, and therefore did not originate in Somalia. They also believe it is a wrong cultural practice that was delivered to the Somalis through a misinterpretation of Islam. As this is the 21st century, and technology and globalization are reaching a peak, these women do not see how FGM can be useful, or why the Somali people should continue practicing it. Some of the women who were learning about Islam such as Saida from the pilot project, confirmed that it is not a religious duty to carry out FGM, and not cutting the girls is not considered a sin. So did a prominent sheik.

It is interesting to note that for the respondents, both in this study and my previous study, it was not a choice between religion and FGM; rather, it seems that some of the women were opposed to the practice due to their faith and knowledge of Islam. However Salado, the 80-year-old woman – since older women were stewards of the culture – insisted on a mild form of FGM, because she thought it was an Islamic duty. She kept asserting that the girls would be unclean. However, knowing that it is not a religious prescription has helped most of the women to loosen their grip on the practice of FGM, or at least the severe forms. However, many scholars agree that not all women study or know their religion well (Abdalla 1982, Mernissi 1991). For this reason, they are not able to positively identify FGM as unacceptable in Islam (Abubakar 2013). Many of the participants talked at length about the culture shock that the Somali immigrants are going through, and how some are further shocked by their children becoming American and are unable to communicate with their children whom they are raising in the United States. Some spoke about how hard it was to teach their children the Somali culture, as it gets watered down

by what the children learn and see outside the home. Nuria, a 48-year-old mother of five, said that she took her kids back to Somalia for five and a half years for them to learn her culture, as they did not know anything. For that, she is very grateful. Lul, the 22-year-old college student, gave the example of her friend who thought America was New York and everyone lives like the people they see on TV. However, some talked about how it is possible to teach their children when they are young, as they learn through imitating their parents and practicing their culture. This means that they need more people to understand and encourage their culture because that is what will help them thrive.

The inability to talk about FGM with everyone is because talking about sex and sexual organs is discouraged as taboo subjects in Somali culture. In earlier research, some said FGM-practicing communities find it unremarkable due to its commonness. If every woman has undergone it, what is there to talk about? Gruenbaum (1996) in her research and life experience in Sudan discusses this, explaining that due to that feeling of normalcy, women find it hard to freely discuss FGM among themselves. However, in this research study, most of the participants have said they think something needs to be done about FGM as more women of a mix of ages have strongly come out against it.

For unknown reasons, some of the women in this study thought I worked with the government, and they took this opportunity to show their gratitude for being resettled here in the United States of America. Although they asked me in the beginning and I clarified that I did not work for any institution but was a graduate student, and also assured them that no one would listen to the tapes apart from me, they believed that I would somehow get this message to the government. Most of the women were current and former homemakers or stay-at-home mothers. Some of them had gone through English as a second language (ESL) classes, but few of them

were going to school at the time. Even so, the women wanted to be seen as people who were attached to their communities. Most of the women were not trained and so they did not have any job skills; the older women had never worked outside the home, even back in Somalia. Most of the women were not formally educated; rather, they were unofficially taught by mothers, grandmothers, and aunts throughout the day and sometimes during story-time at night. However, there were a few who had gone through high school and even one college student and one graduate student.

When I executed my Internet survey and could hardly find anyone to speak with me about FGM, I assumed that no one would speak out on this sensitive subject face to face. However, participants in the focus group discussions for my thesis project were very eager to share their feelings and thoughts in a group setting. I was able to speak with a lot more people than I was planning on, or even imagined possible. In a way, this turnout shows that Somalis are tired of cultural practices that do not add value to their current lives. As a population living outside Somalia, this seems to be a diaspora effect; although many Somalis came to the United States through family reunions, some Somalis came for and through other means and not as refugees, for example, the electrical engineer in my thesis research. Therefore, these Somalis could also be the open-minded people who were willing to travel to foreign lands for “brain circulation” (Patterson 2006). For this dissertation research, the women freely talked about their culture, and many said they thought FGM should be discarded as a painful and valueless practice. However, though they said education is needed, they wanted me – the researcher - to take the leadership role; none of them went as far as talking to their family members about this issue. They all mentioned that getting US passport made traveling easy, and most had traveled back to Africa to visit family and to reconnect with their culture. This appears to be another sign

that they are outgoing people who are open to changes that are useful to their lives as long as they do not go against Islamic teachings.

Summary

This chapter focused on the findings of this research, which include connectivity, socialization, the silencing of women, and the persistence of FGM. For connectivity, I have discussed how the Somali women remain steadfast in their culture and seek to continue staying close to their culture. Regarding socialization, I have discussed the fact that it takes a village to raise a child and that Somali women, young and old, participate in caring for children. Women also took care of the elderly and the sick. The women continue to get employment that extends their care work outside the home in daycare centers, in eldercare, and professionally as nurses and nurse aides. Regarding silencing women, I have discussed the fact that unfortunately, even though the women are the keepers of the culture, they do not have a lot of power. They may have more power here in the United States and in other Western countries, but they do not seem to know it. Based on the literature, this may be because women are afraid of the unknown because people who have lived under dictatorships, especially in countries that have been colonized, are fearful. It is also because the Somali cultural connection and patrilineage runs deeper, and women who get connected properly through FGM are not going to easily let go of the practice, which was discussed under the unceasing experience of FGM. Women end up seeing FGM as an inevitability.

A study by Morison et al. (2004) found that Somali women living in Britain from an early age were associated with increased assimilation in terms of language, dress, and socializing. The same results came from the Columbus study, as many Somalis, especially those

born or brought up in the United States, had their attitudes toward FGM drastically change from the attitudes of the older generation or those who came here when fully grown. Although it should not be completely left to the medical community, the subject of FGM should also be included in the health and social education in schools. Mothers and grandmothers should be targeted for popular education, too, but so should other groups such as Somali youth through information sharing and civic education. A sheik in my previous study thought that people should be educated, but a good way of encouraging it would be to show those who continue practicing FGM will not get any support from the rest of the community. In other words, those in the country who continue practicing or condoning FGM should be ostracized. He also thinks that mosques can be used as platforms to inform people that FGM is not a religious duty and that people who do not practice it are not committing any sin. In this age of social media blasts, the media should be used because many people have their views shaped by watching TV and listening to the radio and social media. Edutainment media could be used to provide the Somali community with comprehensive knowledge about FGM.

This chapter discussed the five major findings or themes that came out of this research. Theme 1 covered issues related to the desire of Somali women to maintain religious practices. All the women in the study talked in-depth about practicing different forms of worship. Theme 2 had to do with the belief in and commitment to cultural norms. These comprises the system of values practiced and encouraged among Somalis. Theme 3 discussed the need for belonging and identity, which covers issues of coming together and includes the desire of Somalis, especially women, to move closer to areas where there are more Somalis, such as Columbus, Ohio. Theme 4 has to do with socialization of the next generation; this entails an extension of norms as values have to be taught to the young so that they can be Somalis and help their parents pass the mantle

down to them. Theme 5 had to do with the cycle of FGM practices. Again, this is considered a valuable norm that is passed from mother to daughter whereby daughters are taught that this is a rite of passage that cannot be bypassed.

Drawing conclusions from my study, it appears that the themes of religious practice, cultural norms, identity, and socialization of the next generation reinforce the commitment to continue FGM to a significant degree. The desire to hold fast to the Somali culture while being surrounded by a very different American culture is strong among the sample of immigrant women I interviewed. Instead of becoming more acculturated and open to more feminist approaches to their roles while in the United States, they spoke more of holding on to their identity as Somalis—and the practice of FGM is part of being a Somali and continuing the Somali way. Even in the United States, these themes are interrelated as there is no a clear-cut boundary between them.

In the final chapter, I will discuss the recommendations of the women who took part in this and previous research. My personal experiences were very similar to those of the women and men who took part in both studies. However, I have not included them for reasons of objectivity. I will also summarize what all the chapters have discussed as a conclusion.

CHAPTER 7

RECOMMENDATIONS AND CONCLUSION

I started my career as a human rights and peace activist before becoming an academic. Although there are many things I can study that are both interesting and dear to me, I chose female genital mutilation (FGM) because I felt it was a tool that was used by my own and similar cultures to control women. In working with and among professionals within NGOs and UN agencies, I came face-to-face with many sides of my culture that I would personally like to change, but that I have no power to do so. For example, I have known since childhood that women are not forgiven for their mistakes or seeming mistakes (Abubakar 2013; Abdalla 1982). Many times, women are forced into marriage, and if they want to refuse the arrangements to marry someone peacefully, they have no power to do so. This is because women fetch bridewealth, which is fertile ground for the practice of FGM. I have also seen young Somali girls who have been ridiculed by their people to the extent of seeking FGM services themselves, even though they came to refugee camps as unaccompanied minors. For these reasons, I decided to go to school to study, to understand, and try to make a change through academic activism (Collins 2013) even before I knew its name. At the University of Toledo, when I was finally able to do academic research for my thesis, it was very natural for me to choose FGM as a topic. I know that I cannot change the

world alone, but I intend to continue to take a shot every day with my research and through conversations that I have with Somali and other African women who have immigrated to the United States. This dissertation is a first step in bringing women's voices to the public. In discussing FGM, it is necessary to talk about Somali culture which requires women to undergo FGM if they are to be accepted as a member of their community (Abdalla 1982).

The aim of this research project continues to be examining how women's bodies have remained publicly contested spaces. Further, this study also explores the systems of domination, exploitation, and manipulation that lead to control and policing of women's bodies. In this chapter, I will summarize the ideas from the previous chapters and suggestions about how to move forward in the future. These include ideas from the women who participated in this study, but also ideas from prior research. This is because not only is FGM a prominent subject, but it is associated with so many other issues that are important to Somali women, including their survival.

This dissertation is divided into seven chapters. The first chapter introduces FGM and continues to explain what it is, its background, and the kinds of discourse that it is related to and where in the dialogue FGM research fits. The research question raised in this chapter seeks to understand how FGM is related to other parts of the Somali culture, how women continue the relationship they have with it, and what networks or tools women have to maintain their support for FGM. Related questions include ways the narrative can change to include women in societal issues and to give them rights to their bodies.

The second chapter discusses the existing literature: what other scholars have written about FGM, especially the studies carried out within FGM practicing countries and those that took place in Western countries where practicing communities have brought their cultures with

them. Some may call this the current state of knowledge about FGM. Since FGM is a multifaceted phenomenon, I have also pulled literature from health, immigration, and others fields related to Black bodies and activities, especially intersectional feminism both African and Western. In chapter 2, the giants of FGM research, such as Hayes who is one of the first scholars to write about FGM in 1975, was introduced. I have also discussed Abdalla, a Somali sociologist who carried out a study in 1982. Although other scholarship supported and brought to light issues related to FGM, such as whether the practice is a religious imperative, how it affects education, and the fact that FGM is a tool of patriarchy to control women, the Hayes and the Abdalla studies constitute historical scholarship that must be acknowledged and cited by others who study FGM. I have also tried to illuminate that first, that there are gaps that exist in the knowledge base, which my study is trying to fill, and second, many communities consider FGM important to their culture, but Somalis do so more than others. This very fact begs for more research. Sociologist and ethnographer Dorothy Smith (2005) notes that knowledge creation should include the voices of those who are being studied without hurting them or creating problems for them, an action I worked hard to achieve in this study.

The third chapter continues the discussion by explaining the frameworks for my argument, which further includes different intersectional theories, both Western and African, that have been a basis and a springboard for my study, and ethnography, which has been a tool for my research. These frameworks have provided an entry point for my study into the conversation about women's bodies. This was done by getting inside the frameworks and applying them to my study. For example, when my study participants said that they are dealing with different issues than many Western women, intersectional theories supported their voices by noting that being

different is not necessarily a bad thing, and being from a Third World country should not mean that the woman is sub-par.

The fourth chapter covers the methodology, which explains the qualitative method that I used from identification of the subjects, the sample itself, the interviews, and the thematic analysis, as well as observation of the culture, as I lived among the women in my study. As an insider, I had a window into the women's lives and experiences, a role that would have been very difficult for an outsider. For example, as a neighbor and teacher, I was able to secure interviews with participants who may otherwise have been ignored or not valued. I wish to continue this line of research for other issues affecting Somali and other immigrant communities.

The fifth chapter started by introducing the Somali culture as based on clans and subclans that use councils of elders and dia-paying groups in nomadic pastoralist economies. Also, I briefly discussed the precolonial, colonial, and postcolonial Somalia and factors that contributed to the civil conflict in Somalia, and how clan warfare resulted in millions of Somalis seeking refuge in second and third countries and even being resettled in Western countries. I discussed how Somalis had their systems of governance which were based on subclans, primary lineages, and dia-paying groups in which elders – all men –took on a shared responsibility instead of having a singular head of clan. I also talked about how external powers with divergent agendas divided and colonized Somalia, and how a youth group led by a religious scholar, poet, and orator brought the Somalis together against the same. Further, I discussed how the united Somalia under Barre tried to bring back territory from Ethiopia, which created an untenable situation. This was because Somali refugees from Ethiopia created a huge burden on the Somali economy on top of pressures from the World Bank, the IMF, and the United Nations to liberalize it. These led to much tightening of the rules and targeting of political dissidents that blew up into

full-fledged clan warfare. This chapter also addresses the cultural connection Somali women have while they are here in the United State including the networks and tools that women use both in Somalia and abroad to strengthen their new roles as the keepers of the culture. This chapter also explained women's agency in Somalia, in refugee camps, and the West, all very important background for the continuation of FGM.

The sixth chapter continued to analyze and connect the current literature to this specific research while weaving in the voices of the participants in the general introduction. In this chapter, we hear the women's voices and learn how they experience life in the United States. Here I have tried to illuminate the support women have for their culture, as many of them are afraid of the mainstream culture and put a lot of effort into socializing their children to do the same. However, we also learned that they admire parts of American culture, which many of them have incorporated in their own lives, for example, taking advantage of educational opportunities available to women even at older ages, including mothers. This is something that would be impossible or even unthinkable in Somalia.

The final part is this chapter, which recommends steps to further inform, gather, and share information and conclude my dissertation. In this chapter I have laid bare the reasoning behind why I chose this topic and how important it is for me and my community. I have also discussed how disingenuous it would be for me not to discuss it as a colonization of the mind and body of women by their own culture, or to ignore such an important subject completely.

This dissertation research contributes to the sociological knowledge base in several important ways. Since many FGM studies are outside sociology, this research study will be one of a few sociological studies of FGM: first, by addressing questions regarding the factors associated with the continuation of FGM; second, by creating dialogue around an important

social phenomenon that affects Somali immigrant women's lives; third, the study is an empowering tool as it seeks to center the concerns of women whose voices have not been heard before; and fourth, it bridges the gap between academics and non-academics by speaking in a language that can be understood by both. For these reasons, through public sociological knowledge creation and intellectual activism, this study can serve as an ethnographic conversation generator for those interested in the eradication of FGM.

The findings of this research can inform policymakers, NGOs that work with communities, and individuals who value women's health within the community. It can also help the women support each other to encourage continued dialogue for self and community empowerment.

This study has also uncovered serious gaps in the existing literature where certain ethnic and social groups have been left out. Although studies targeting mostly Southeast Asian immigrants, including Indians and Chinese Americans, and Hispanic immigrants including Mexican Americans, are abundant, there is very little about African immigrants and specifically on Somali American immigrants. Like many other growing immigrant populations, African immigrants are a growing population whose needs must be taken into consideration. This research study will contribute to this goal.

FGM is a menace, both in the literature as well as in the research that I have carried out for my dissertation. It is not enough to assume that laws and legal frameworks will do the work of eradicating FGM. It starts from changing the narrative on how that can happen, and it involves women talking about their ideas on how to move forward. Below are some of the suggestions from the literature and my research participants.

The very first one is research, and more research. Like what I have done in this study, it will be important to carry out the research not only as a scientific and sociological endeavor, but also as an empowerment tool. This was done by centering the women's voices and making them an important part of the process because they are experts in their lives and their culture. Before starting the interviews, I made a point of telling this to the women, and I told them their stories were important. Salado, the elderly participant, started very slowly because she did not believe her life was important as she was uneducated in the sense of formal schooling. However, I made her realize that, as Shindays put it, learning through the school of life experience is informal but just as important because it teaches life skills that are practical to their lifestyles. This helped open Salado up to telling her story freely and openly. This also emboldened her to include me in her responses as a witness to my own culture. However, I gently steered her away by asking her to please answer my questions, as I wanted to know her responses.

A second suggestion has to do with creating awareness through workshops or gatherings to exchange ideas and talk about issues that affect the Somalis in Columbus specifically and in the United States generally. Even though I have used the excuse that a graduate student is not able to organize such meetings due to lack of funds, to the Somali women, such a highly educated person has ways of finding funds. This was also important because it gives me confidence and permission to speak on the women's behalf to bring them together and unify their voices.

A final suggestion has to do with public sociology through telephone, radio, and television. As previously stated, a big percentage of the Somali population both in Somalia and abroad are illiterate. This makes it hard for Somalis to keep up with reading about important topics, including those that are helpful to their well-being. For that reason, expecting people to

learn about things through publicly available resources, even the internet for free, is a tall order. In a civic education project sponsored by the United Nations Educational, Scientific and Cultural Organisation (UNESCO) and the United Nations Development Programme (UNDP), two radio programs were used to help reach people. One was a soap opera that used Somali storytellers to tell stories appropriate to the Somali culture in order to improve relationships between clans in an imaginary village called Hamadhowr. The other was a factual magazine program that picked up issues raised in the stories and interviewed people to create feature programs for better understanding. Issues included a local narcotic called *khat*. In the dramatized program, actors portrayed village life and how everyone became excited, from the sellers to the chewers. Meanwhile the magazine producers interviewed the women whose husbands chew khat inside Somalia and in refugee or returnee and displacement camps. They interviewed all the affected or impacted parties to understand the effects it has on the community. These modes of presentation were chosen because most Somalis like to listen. In much the same way, using media such as the radio can be effective in finding a soft spot among Somalis. This is especially so when employing proper and culturally appropriate storytelling, poetry, and other oral methods.

From the extensive review of the literature for this project and my previous project and the participants of both studies, a major recommendation is further research into this topic. For example, it would be useful to interview Somali men individually to understand how they keep the connections to their culture and how they keep women on a tight leash. Perhaps interviewing more women would be useful. It would also be interesting to organize focus group discussions that include both men and women and young and old Somalis and understand how talking to each other has changed. This is because such research will always require mixed qualitative

methods; for example, in-depth interviews supported by ethnographic observations or interviews supplemented by focus groups.

Respondents felt that something should be done about FGM, and steps to eradicate it start with dialogue like those fostered in the focus groups. Slowly increasing the number of people who take part in the gatherings to a seminar, and later into a large conference and on to community meetings, is likely a winning strategy. Discussions can occur at common areas such as the mosque, schools, and any place where Somalis gather. Participants recommended that during such discussions there should not be assumptions about having the same position on, or reasons for carrying out FGM. Also, radio and television programs should be organized to engender community dialogue about FGM or on other social problem issues, and even talking to a few imams and using the mosque as a platform. The participants said that they realize some older imams may not be ready for this type of discussion, but that it should start with the ones who agree that FGM is a problem. Generating healthy and honest dialogue among diverse demographics of Somalis may be easier said than done. For instance, Naseeb, a 30-year-old newlywed, thinks the code of silence among Somalis may be a problem, because of the reverence for the elderly. Conversely, since the elders cannot be changed, some think that to some extent, they should not be included in discussions. However, Ceesh, the 73-year-old new arrival from Somalia who said she is seeking forgiveness from her daughters for cutting them, suggested that since people listen to them, elders should be included in the conversation, even if it means finding the ones who are against FGM, especially if they are educated. The issue of who should be involved in the discussions is a very emotional one, with many promising to stand with those who are creating awareness. Some of the women also suggested that we have smaller groups for elders and larger groups for younger women when organizing the meetings.

After the interviews, women felt much better about themselves and felt like they were bringing about change. All of them said they benefited from talking about different issues after the interview, and that change should come from within the community rather than being dictated to them by voices outside the community. This more than anything else enforces Collins's (2013) advice that more women of color should research their people, which is what I have been striving for. For example, Schrock (2008) struggled with pushing the boundaries of Somali culture because she was afraid of losing her participants. Conversely, I knew exactly how to appropriately approach my participants and gave them due respect. I did not have to pretend, because this is my culture and I have been socialized in it.

The men and women who participated in my previous study were diverse in age, education, employment, and time of arrival to the United States. For this reason, their thinking and responses were very diverse. It also goes well with the African feminist advice that African women should not be considered as victims only, but as experts on their lives and experiences (Ahikire 2008; Mohanty 2003). However, many of the cultural artifacts such as language, food, and dress were among the things about which everyone felt the same way. The loss of culture for the youth was mourned by all, but praise was given to those who had taken the good part of American culture and joined it with the parts of the Somali culture that were seen as admirable. These included, but were not limited to, female education, work ethic, respect for others' privacy and, to some extent, self-sufficiency. However, for this study I decided not to interview men in order to elicit more information from the women.

Even though some have said that FGM is not mutilative, most agree it is. The participants pulled out type 3, the type commonly practiced among Somalis, as too severe and against Islamic teachings. Although some of the participants have said that FGM type 1 is not as mutilative as

Westerners or others want people to believe, most of them agreed that extreme mutilation is unnecessary. Therefore, unfortunately, not all older women support the eradication of FGM, but they are willing to let go of the severe forms and, although they may not encourage it, they would not be shocked to know younger women who are not circumcised at all. I have not known one yet among my research participants. There is also the belief among younger women that more education and information for the older women would help them relax their grip on FGM even more. The relationship between communalism and female circumcision may not be clear to a person from non-FGM communities. However, to Somalis, it is much clearer and deeper than may be realized through one study.

Based on the literature and the interviews with Somali women, not all Somalis know Islam very well even though the Somali culture is based on Islam. FGM gains its staying power in part because many Somalis mistakenly think that FGM is an Islamic imperative. It is also because many people use Arabic culture that was imported to Somalia to justify FGM as ordained. The Islamic knowledge that these people possess has been weakened by Arab culture. Many in Somalia believed it is an Islamic duty to cut their girls and even today some still think that it is true. It is important to reiterate this point due to its weight. The Somali cultural continuum resonates in the hearts and minds and rituals among the Somali diaspora in the United States. Somali diasporas who believe that FGM is derived from Islamic doctrine are more inclined to advocate for its continuation, whereas those diasporas who do not associate FGM with Islam are more likely to advocate for the eradication of FGM. This concluding proposition from the interviews suggests both an area for future research and a strategy for eradicating FGM among Somalis in the United States and in their ancestral homeland.

Even though Somalis and especially women avoid alienation and loneliness by moving closer to other Somalis, they are still alienated from their voices because they are not unified. They have been taught that they should obey and not ask questions. Being fearful of new cultures pushes the women toward their own culture, which makes the fear of being ostracized or shunned real and making this a tangible threat. Bringing Somali women together through research can be a way of relieving such alienation.

Finally, I was not able to speak to as many Somali women as I had set out to, even though more offers were on the table. Therefore I think it would be better to interview more women. It would also be more useful to have more targeted questions about people's feelings about FGM eradication. This is because my study was geared toward understanding where women are right now. Most of the Somalis whom I spoke with support the eradication of the severe form of FGM. However, as I have been able to interview women in just one city, it is difficult to generalize the results to the rest of the United States, to other Western countries, or to the Somali population as a whole. Therefore, my findings are at best generalizable to propositions, which can help inform larger empirical studies. FGM is not an issue that can be looked at exclusively, nor can it be eradicated easily; this requires careful planning, scheming, time, and money to work on its eradication. I was able to interview 14 women out of the 30 I originally planned to interview because someone broke into my car and ransacked my handbag. Because I immediately reported the theft to the local police and the property managers, I found my recorder after two days. When I talked to my advisor, we decided to analyze the 14 interviews that I had due to ethical issues that may arise. These events show the problems faced by migrant communities and non-traditional graduate students, as their circumstances do not allow them to live in safer areas due to prohibitive costs.

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APPENDIX A

INTERVIEW PROTOCOL

Interview Questions

Let us start by talking about your journey to and life in the US.

1. Can you tell me a little about your history and how you came to the US/Ohio?
2. How long have you lived in the US/Ohio?
3. How similar or different is it from where you have lived before?
4. Tell me how you feel about living in America?
5. What does being American mean to you?
6. What is the difference between your culture and the American culture?
7. How do you see popular American culture?
8. In what ways do you think American popular culture affects/influences Somali youth?
9. Can you tell me specific aspects of the American culture that you admire?
10. Can you tell me how you have incorporated these parts of the American culture in your daily life? If you have not, why haven't you?

Let us talk a little about your neighborhood.

11. Can you describe your relationship with your neighbors?

12. How did the relationship you described come about? Or is there something you can do to initiate a relationship with your neighbors?
13. Do you feel included in community activities in your area?
14. Could you describe for me the kinds of activities in which you engage or would like to engage?
15. Do you cooperate with your neighbors?
16. In what ways do you cooperate?
17. Why have you not cooperated with your neighbors yet?

I am going to start asking you questions concerning your religion.

18. Are there specific religious practices in your religion that you take part in?
19. How is that similar or different from other religions?
20. Can you describe an instance when you felt negativity was directed toward you because of your religion, or someone in your family or friend's circle felt this way?
21. How do you feel about practicing your religion in the US?

I would like to shift to your culture now.

22. Tell me a little about your culture?
23. What are some main cultural practices among Somalis?
24. How important is keeping these cultural practices to you?
25. How important is teaching your children their culture to you?
26. How do you teach your children and other young relatives your culture?
27. How easy or difficult is teaching your children and other young relatives your culture?

Please explain further.
28. Can you tell me specific aspects of the Somali culture that you would like to discard?

29. Can you talk about whether there are parts of your culture that you no longer practice or teach your children?
30. How did you arrive at this decision or what made you change your mind?
31. Have you discussed this decision with anyone?
32. How difficult or easy was it for you to get to this decision?
33. What kind of help did you need to change your mind about this issue?

I would like to talk about FGM now.

34. Can you describe FGM to me and what it entails? (The issues of age at circumcision may be used as follow-up question here)
35. Tell me how you view FGM, i.e., what does it mean to you?
36. Can you describe any regional or clan difference in the practice of FGM among Somalis?
37. What do you think are the main reasons behind FGM today?
38. Which of the reasons do you agree with?
39. Can you describe the value of these reasons to you and your family?
40. Could you please describe to me what you would do if you had the chance for a do-over?
41. Can you tell me about your daughter(s)? (Among Somalis, nieces may be included here.)
- Circumcising them and the type of circumcision can be asked as a follow-up question
42. Can you tell me about Islamic teachings concerning female circumcision?
43. Can you tell me about other cultures that practice circumcision?
44. What would you say if you knew that other people who are non-Muslims also practice FGM?
45. Do you think anything should be done about FGM? if so, what should be done about it?

46. Are you willing to participate in doing something about FGM? How far are you willing to go?

47. Is there anything else you would like us to know to make this study more meaningful?

Thank you very much for your time and for answering my questions. If you have any questions, or if you want to know more about the findings of this research at any later time, please do not hesitate to call me or my advisor at the numbers listed on your consent form.

Appendix B

SELECTED CHARACTERISTICS OF PARTICIPANTS

Ceesh

73 years old

Young at heart

Believes it is a woman's job to stay at home with kids

Raised her children by herself as her husband passed away before two of her children were born

Has felt pressure due to having more girls than boys

Can read Quranic Arabic

Says she asked her daughters for forgiveness for cutting them

Somehow supports some mild FGM

Very kind and considerate

Nafiso

26 years old

Got married just before the interview

Very progressive

Finished high school in Somalia; educated in Arabic and is learning English and trying to get her
GED

Very kind and considerate

Is embarrassed by certain behaviors such as loudness and unruliness

Siraad

A 38-year-old mother of four; married twice

Very spirited

Three jobs: warehouse and cab driver, small business

Welcoming

Progressive thinker

Khadra

40 years old; married three times and the mother of five

Very spirited

Shared that she is a starter and not a finisher

Had mild FGM

Is against all forms of FGM

She has not and will not cut her daughters' one was two years old at the interview time

Very progressive thinker in one way, yet a little afraid of pop culture for her children

Salado

An elderly woman of 80 years, with six daughters and two sons

Has faced pressure due to having more girls

Nomadic lifestyle

Believes a woman should do all domestic and aid work

A strong supporter of FGM

Takes time to warm up; needs to be reassured

Didn't believe her story is important

Keeps wanting her statement to be validated

Illiterate and believes her experience isn't worth teaching, even though she taught her children
and is teaching her grandchildren

Saida

A 35-year-old mother of two, recently divorced

Married young in the refugee camp

Literate in Quranic Arabic and Quran

Afraid of the American culture being taught to her children

Very soft-spoken

Was not sure her story is important

Hiba

A 32-year-old mother of five, and pregnant

Married at a very young age

Has a very clean and well-kept home, with incense burning

Completely illiterate

Encouraged to go to ESL school

Looking for a job at a daycare

Very considerate

Sharifa

A 40-year-old mother of four; her oldest is 22 years old

Had a child in Africa and three in the United States

Also married a little young

Was illiterate, but is learning ESL and Quran

Very health-conscious (runs every morning and eats healthy)

Is trying to get over the fear of other cultures in order to keep an open mind

Encourages friends to go to ESL and even drives them to school with her

Works at a daycare

Naseeb

30 years old; a newlywed, no children yet

Husband is in Africa; is working on bringing him over

College educated

Has lived in Kenya, so conversant with multicultural ideas more than the other women

Interviewed in English, as Kenya was colonized by the British and that is her first language

Works in an office

Lul

22-year-old college student

Interviewed in English

Was born in Somalia but brought up in the United States

Moved to Ohio from another state, and was not happy about it

Passionate about what she believes

Afraid of the elders, especially her mother (i.e., changed her tune after seeing her mother walk by the window)

Hubi

A 45-year-old mother of ten, six living; the oldest is 26 and youngest is 11 years old

Works at a warehouse

Passionately hates FGM

Believes it is very hard to change attitudes

Moved from another state but likes Ohio

Believes we should take the good parts of the American culture and add them to our own

Nuria

A 48-year-old mother of five

Very soft-spoken and religious

Literate in Quranic Arabic and Quran

Kind and welcoming (non-judgmental)

Took her children to Somalia for five and a half years to learn their culture

Passionate about traditional Somali food

Shindays

A 48-year-old mother of ten and a grandmother. Her oldest is 28 and youngest is 6 years old

Born and brought up at the border of Somalia and Kenya

Went to school until 8th grade; got sick, and was married the next year

Interviewed in English

Also literate in Quranic Arabic and Quran

Started a job at daycare after the interview, but a year later she stopped

Her family owns their home which is well-kept

Always gives food to the people who come to her home

Avoids TVs and things like that to prevent too much acculturation.

Passionate about her dislike for early and forced marriage; says forced marriage is against

Islamic teachings

Fayow

A 60-year-old mother of three who lives alone with her husband

One of her sons was killed in a drive-by shooting

She is a former accountant

Willing to teach people math and literacy skills

She would like to give back to her community

Very kind and considerate

She gathered women and made them popcorn and traditional ambullo (a mixture of corn and beans), and made tea and coffee, so we could share stories

Believes severe FGM has no place in our lives today