

Identifying Social Norms Around Female Genital Mutilation in Mali, Africa

PROCESS

What is the problem?

01

ABOUT FGM

- What is FGM?
- Reasons for practice
- Prevalence and risks

02

WHY IS IT AN ISSUE?

- Risks of FGM
- Reasons for practice
- FGM in Mali

03

SURVEY ANALYSIS

- Is it a social norm?
- Underlying factors
- Reference network identification

04

INTERVENTION

- Alter peripheral beliefs
- Increase awareness

What is the outcome?

Methodology

01

WHAT IS THE ISSUE?

WHAT IS FEMALE GENITAL CUTTING

It is the partial or total removal of, or injury to, the female external genital tissue for non therapeutic procedures. The practice is mostly carried out by traditional circumcisers, who often play other central roles in communities. In many settings, health care providers perform FGC due to the belief that it is safer when medicalized

“200 million girls alive
have undergone FGC in
30 countries worldwide”

UNICEF, 2016

WHY IS FGC PRACTICED? (based on literature)

Reduce Sexual Desire

“Reduced sexual desire ensures virginity before marriage and monogamy after”

Culture, Tradition, Rituals

“We must not forget our roots and our parents”

Social Acceptance

“This just has to be done,' a duty' to perform if you are to be in society”

Prevent Promiscuity

“Remove the ‘cap of prostitution”

Family Honor

“Mother usually tells you that you have to protect yourself and your honour”

Aesthetic and Hygienic

“Female genitalia is unclean. FGC makes it clean, smooth and attractive”

Increase Marriageability

“A girl who is not circumcised will not get married”

Rite of Passage

“Step for young girls to enter womanhood and prepare them for marriage”

Religious Obligation

“Called Sharia circumcision in Egypt to imply that it is consistent with Islamic law”

RISKS OF FGC



Short Term

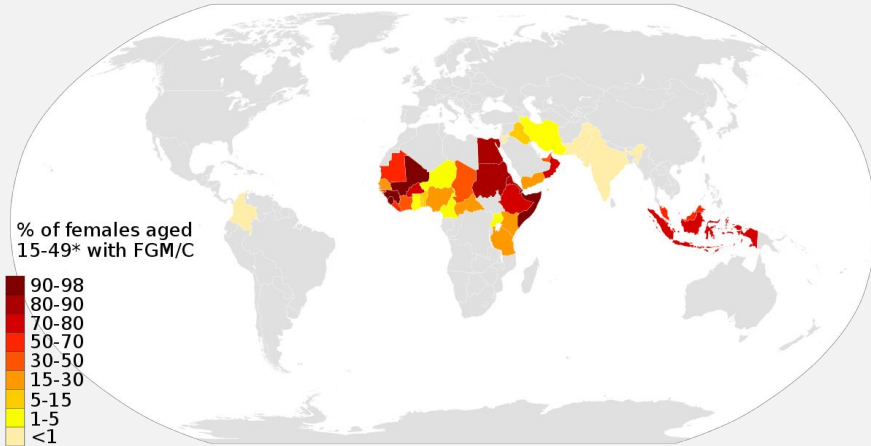
- Acute pain, haemorrhage, shock, anemia, urine retention
- Uncontrolled bleeding, injury to adjacent tissues, sepsis
- Psychological stress and trauma
- Persistent wound, pelvic and vaginal infections

Long Term

- Prolonged labor, lethal complications during childbirth
- Scar tissue and keloid formation, chronic pain, clitoral neuroma
- Emotional trauma, numbness or severe pain during intercourse
- Higher prevalence of HSV (cofactor of HIV) / STIs

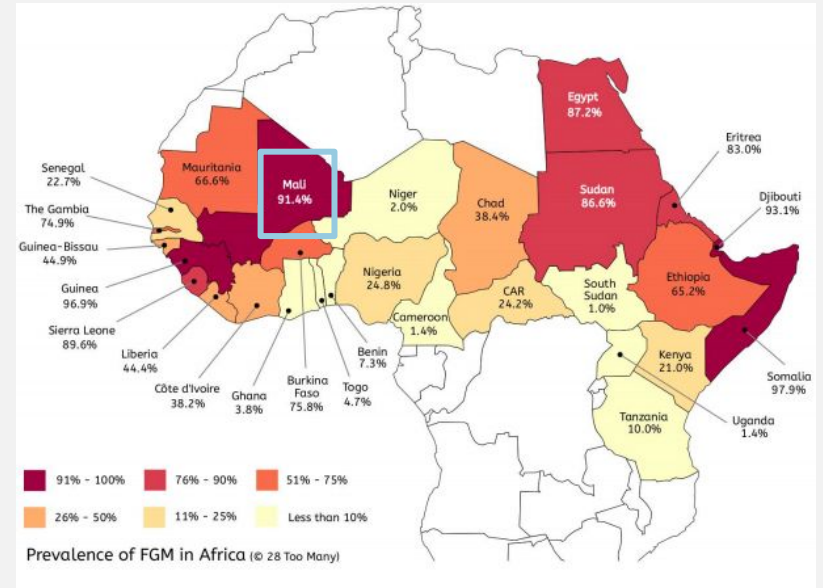
PREVALENCE

GLOBAL



Source: UNICEF (2016)

AFRICA



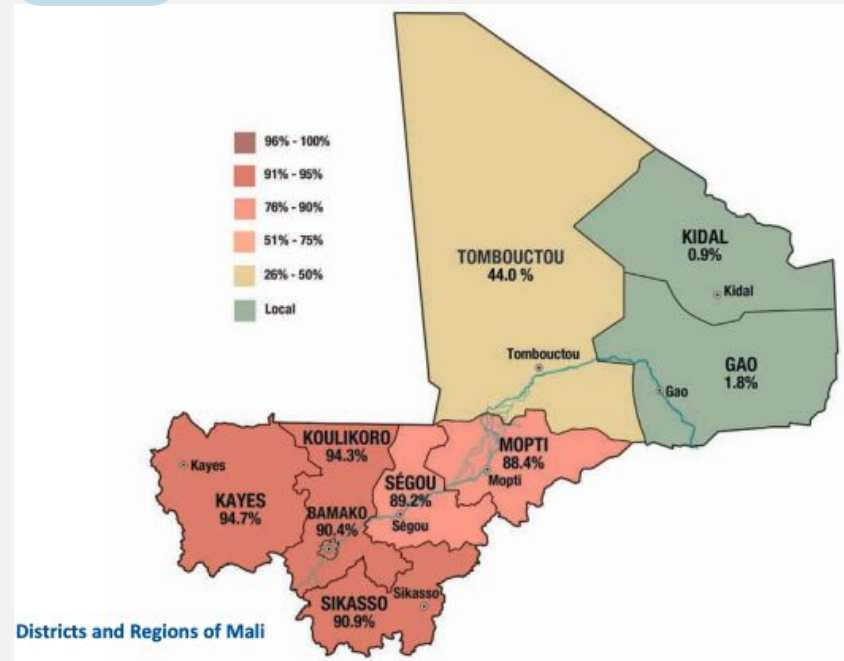
FGC CONTEXT IN MALI

01 **Prevalence: 91%** among women aged 15 to 49 years old

03 **Ethnicity:** Much higher among girls in the **Soninke, Malinke, Senufo, and Fulani** ethnic groups (over 90%) than among Bobo and Songhai girls (less than 50%)

04 **Law:** There is currently **no national legislation** in Mali that specifically criminalises and punishes the practice of FGC

02 Geography



Source: DHS (2012-13)

02

SURVEY DESIGN

FEATURES OF THE SURVEY

What?

- 150 question survey
- Physical copies in English and French

Who?

- Different sections for different members of the household

How?

- Distributed through local partners
- Can be read out by a social worker

Where?

- Different districts of Mali starting with Bamako since Penn SoNG studied that

Demographics

Self reported behavior

Factual beliefs

Personal normative beliefs

Empirical expectations

Normative expectations

Reference network

Vignettes (Conditionality)



EXAMPLES OF SURVEY QUESTIONS

Factual beliefs

Q 43. An uncut girl will easily find a suitable person to marry

Q 44. A cut girl is cleaner than an uncut girl

Q 45. Cutting a girl is the religiously right thing to do

Q 49. A girl who is cut will have better health outcomes than a girl who has not been cut

Q 50. Cutting a girl will not have any lifelong health consequences

Answer options:

1. True
2. False
3. I don't know
4. I refuse to answer

EXAMPLES OF SURVEY QUESTIONS

Personal Normative Beliefs

Q 57. In my opinion, all girls should be cut

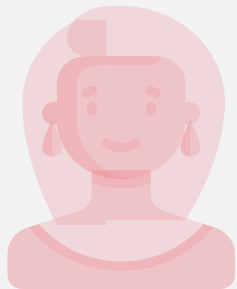
Q 58. In my opinion, a girl should be cut before she reaches puberty

Q 66. In my opinion, a young man should reject a bride that is uncut

Q75. In my opinion, a cut girl is honorable

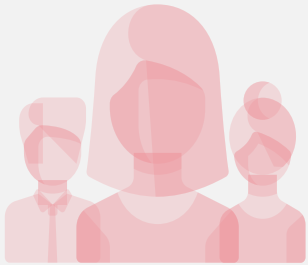
Answer Options

1. Agree
 2. Neither agree nor disagree
 3. Disagree
98. Don't know / Prefer not to answer



EXAMPLES OF SURVEY QUESTIONS

Empirical Expectations



Q 78. In some communities many parents try to cut their daughters in the years before they get their first period; in other communities very few do. **Out of 10 families in your community, how many will try to have their daughter cut in the years before she gets her first period.**

1. Everyone[10] 2. Most[6-9] 3. Half[5] 4. Few[1-4] 5. Nobody[0] 6. Don't know

Q 82. For the parents who don't have their daughters cut, what sort of reaction can they expect from their community? (Select all that apply)

1. Ostracism - won't be invited to community events (marriages, baptisms, etc.)
2. If the family has a business, they will lose clients
3. Other parents in the community, whose sons could have married the daughter, will be angry with these parents
4. They will be chastised by the village chief
5. They will be chastised by the imam
6. Other (Specify)
98. Don't know / Prefer not to answer

EXAMPLES OF SURVEY QUESTIONS

Normative Expectations



Q 93. In some communities people believe girls should be cut to be a good wife; in other communities people believe that a girl does not need to be cut to be a good wife. **Out of 10 families in your community, how many believe that a girl should be cut to be a good wife.**

Q 95. Some people go to the traditional circumciser and some people go to the hospital to get their daughters cut. **How many people in your community believe that families should get their daughters cut by a traditional circumciser?**

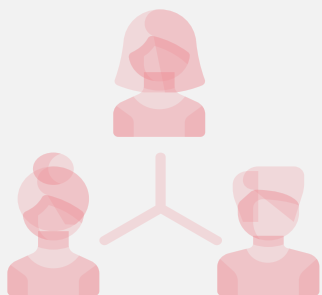
Q 97. Some people believe that families who don't cut their daughters shouldn't be respected and some people don't believe so. **Out of 10 people in your community, how many people believe that families who don't cut their daughters shouldn't be respected?**

Answer options

1.Everyone[10] 2.Most[6-9] 3.Half[5] 4.Few[1-4] 5.Nobody[0] 98.Don't know

EXAMPLES OF SURVEY QUESTIONS

Reference Network



Q 104. Please tell me the people who advise you on decisions about any matters related to female genital cutting. These people can be within your household or outside of it, as long as you value their perspective on cutting questions.

Please name these people in the order of their importance to you, with the first person being the most important, the second the next most important, etc. Try to think of five different people.

What is the most important person's relationship with you ?

Possible options: Husband, wife, sister wife (husband's other wife), mother, mother-in-law, father, father-in-law, sister, sister-in-law, brother, brother-in-law, aunt, uncle, cousin, daughter, daughter-in-law, son, son-in-law, grandfather, grandmother, neighbor, friend, imam, village chief, midwife, doctor, nurse, health worker, other

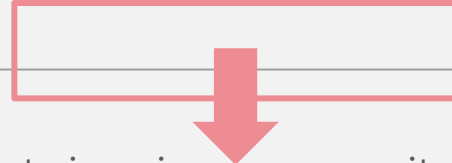
Q 105. Does this person approve/disapprove of girls getting cut?

1. Disapprove 2. Approve 98. I don't know / Prefer not to answer

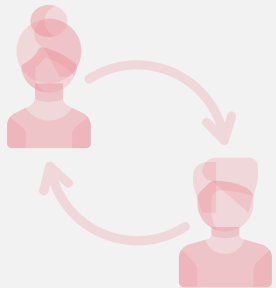
EXAMPLES OF SURVEY QUESTIONS

Vignettes (Conditionality)

	Low Normative Expectations	High Normative Expectations
Low Empirical Expectations		
High Empirical Expectations		



Q 106. I would now like you to imagine a community similar to your own. A man named Ahmadou, who you don't know, moved from your area to this community one year ago. In this community, the parents arrange for their daughters to get cut. Also, in this community, the parents believe that a good father should not organize his daughter to get cut. **What do you think Ahmadou will do?**

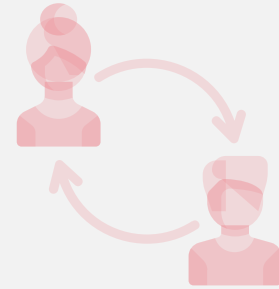
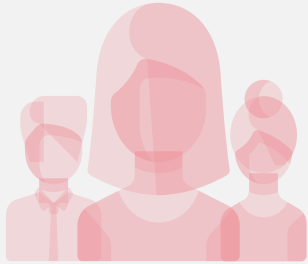


1. Arrange for his daughter to get cut
2. Equally likely to get cut or not cut
3. Not arrange for his daughter to get cut
4. Other
98. I don't know / Prefer not to answer

03

ANALYSING SURVEY

IS IT A SOCIAL NORM?



**EMPIRICAL
EXPECTATIONS**



**NORMATIVE
EXPECTATIONS**



**CONDITIONAL
PREFERENCE**

Do people expect that others (that matter to them) conform to the practice of FGC?

Do people expect that others think they should conform to the practice of FGC?

Is the preference to conform to the practice of FGC conditional on those social expectations?

UNDERLYING FACTORS (EXAMPLE)

Q 82. For the parents who decide to have their daughter cut, why do you think they do it? (Select all that apply)

1. A young cut girl will find a husband
2. Brides family will find a better husband for cut bride
3. Can't afford to keep daughter in household
4. Fear that daughter will get pregnant out of wedlock
5. Fear that no man will want an uncut bride
6. Fear that family will lose respect in the community
7. Fear that daughter will not satisfy her husband
8. Fear that daughter will not be loyal to her husband if she is uncut
9. Fear that she will lose her virginity
10. The girl is behaving immorally (flirting with boys, disrespecting parents)
11. For religious reasons
12. So she will begin having children sooner

INTERPRET



REASONS

SCHEMAS

SCRIPTS

IDENTIFY REFERENCE NETWORK



Who is the decision maker?

What is that persons reference network?

“Networks as variables approach” using egocentric data

Analyse centrality, betweenness, degree, closeness and density

04

INTERVENTION

Some peripheral beliefs associated with FGC

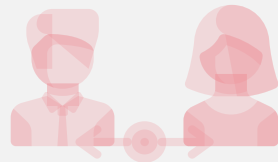
Pre-marital investment to secure a good groom



Islam advocates FGC



Guarantee of fidelity



Conceptual framework to alter peripheral beliefs

Show that some central values conflict with common beliefs (Bicchieri and Mercier, 2014)



The TOSTAN Program

01

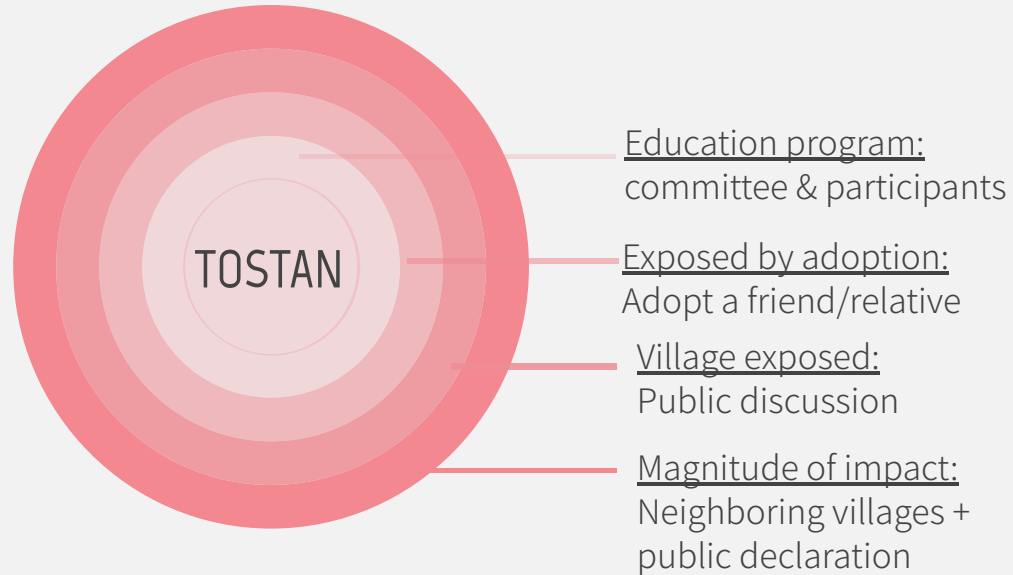
A **rural village empowerment program** originated in Senegal to improve villagers' literacy, life skills, and socioeconomic conditions. Participants, **both men and women, learn about the harmful effects of FGC** in a relaxed atmosphere.

03

Effectively improve critical attitude to FGM and **reduce the practice**. Recognized by WHO and UNICEF as a model program

02

A Model for Social Change



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