

Towards an understanding of the  
current debates on the Dawoodi Bohra  
tradition of Female Genital Cutting:  
A synthesis of key issues

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## 1.1 What is the context?

As a result of concerns arising from the publication by Sahiyo of 'Understanding Female Genital Cutting in the Dawoodi Bohra Community' (Taher, 2017), an independent review was commissioned which resulted in this report. Its purpose was to examine what has become a polarised debate by placing Sahiyo's research within wider theoretical and practical contexts. By doing so, it aims to contribute to the broader dialogue by addressing the following questions:

- Is the Sahiyo report a valid representation of the views and experiences of Dawoodi Bohra women?
- Is the Dawoodi Bohra FGC (Female Genital Cutting)<sup>1</sup> practice a 'human rights violation' as claimed in the Sahiyo report?
- How do Dawoodi Bohra women understand FGC within their culture and religion?
- What drives the debate represented by Sahiyo on the one hand (human rights) and orthodox<sup>2</sup> Dawoodi Bohra on the other (religious freedom)?

## 1.2 What did the independent review of the Sahiyo report tell us?

The review identified a number of issues including the polarisation of the FGC debate premised on research which was not considered to be robust:

- The aims and objectives of the Sahiyo study are not aligned
- The design was not fully described and lacked rationale; there was no independent review and the sampling strategy resulted in findings that present problems for generalisation
- There remain unresolved ethical issues in the design and methods of research
- The survey analysis was neither transparent nor robust
- The literature review was incoherent, unstructured and not systematic.
- The report is biased towards the wider anti-FGM aim of Sahiyo.

## 1.3 Is the Dawoodi Bohra practice a 'human rights' violation?

Descriptions of Dawoodi Bohra practice are limited due to the secret manner in which FGC is carried out. However, based on what is known, the practice would most likely be classified as Type I or IV (WHO classification), the least invasive forms of FGC classified. The impact of FGC has most frequently been studied in its more severe forms, and particularly in African cultural contexts. Nevertheless, this synthesis also examined the evidence and found:

- reported negative impacts on women and girls having type I and IV FGC in other Asian Islamic cultural contexts. These included immediate physical harm such as wound healing
- no evidence of sexual functioning problems
- some evidence of psychological problems
- that all forms of FGC have social impacts.

## 1.4 Who represents the voice of Dawoodi Bohra women?

A key challenge to understanding women's views and FGC in Dawoodi Bohra culture is that little is known about the procedure outside the community. On the one hand, it is argued that women have choice. However, there is evidence from other south Asian Muslim cultures that FGC is inextricably linked to identity and to being accepted as a full member of a community, meaning women have no choice. To choose to opt out will have implications for full membership. Critical here is the lack of data. What has emerged is that there is no single Dawoodi Bohra women's voice. The newly formed Dawoodi Bohra Women for Religious Freedom (DBWRF) organisation does not claim to be a representative voice. At the time of writing, the website appeared inactive, and interviews for this report did not give any clear direction or sense of momentum. What is known about women's lives is that:

- In some spheres, the Dawoodi Bohra have pioneered equality, especially in education where women are empowered to study and develop professional careers.

<sup>1</sup>The authors have chosen the term FGC (Female Genital Cutting) opposed to FGM (Female Genital Mutilation) to acknowledge the impact of a negative label on women who have undergone procedures and in recognition of the wide range of cutting practices including western surgery and piercing.

<sup>2</sup>The term 'orthodox' is followed from Blank (2001) and is commonly used in the debates around FGC in India to distinguish the majority Dawoodi Bohra religious group (that follow particular religious rules and cultural norms) from a minority group who also identify as Dawoodi Bohra known as 'dissidents' (people who are not now recognised as Dawoodi Bohra by the majority orthodox group) or sometimes by their own definition as 'reformists' or 'progressives'. The term 'orthodox' refers to the high level of homogeneity of belief and values upheld in the community. It is not accepted as an identity by the community but serves as a way to acknowledge the existence of the other group also identifying as Dawoodi Bohra.

- At the same time, women's lives are traditional. The discipline and allegiance of observance within their culture means that choice is not always apparent and can appear contradictory.
- Religion is central to Dawoodi Bohra life and the voice of religious authority is key. The Dawoodi Bohra have argued that their FGC procedure is no worse than Western cosmetic procedures (that are not subject to such scrutiny) and the procedure sits within their religious as well as cultural practice. For some, religion is strongly directive and thus may limit women's ability to voice their choice particularly as FGC is carried out on young girls before they are able to give informed consent.

What emerges is a complex picture regarding the intersection of religion, culture and modernity. This synthesis identifies the need to test the extent to which the anti-FGC campaigners (Sahiyo) may be giving voice to broader concerns in the community.

### 1.5 What are the drivers behind the debate on Female Genital Cutting in this context?

This synthesis identifies key drivers in the debate (Western Imperialism; two patriarchies in dialogue; historical Dawoodi Bohra tensions; and the media and discrimination). Understanding these will help stakeholders find a common language and/or a starting point for moving forward. Gaining an understanding requires the willingness to see, hear, and understand these drivers as historical and political forces in complex human systems in which all social actors are complicit. This section locates the debate within both global and local political agendas.

### 1.6 What will the findings of this synthesis mean for the orthodox community and those who wish to abolish Female Genital Cutting?

The majority orthodox Dawoodi Bohra community has found itself feeling exposed, vulnerable and in a defensive position. Current thinking on FGC suggests the time is ripe for robust dialogue rather than remaining defensive in the framework of the polarised positions that currently exist. This debate on FGC is part of a global dialogue about women and children's rights, religious freedoms, power and politics that the Dawoodi Bohra cannot easily retreat from.

For the orthodox community:

- There is a need to consider accepting evidence of negative impact. Current clinical evidence may not prove that this practice FGC is a human rights violation but this does not necessarily imply it has no impact.
- The Dawoodi Bohra may consider using an entirely symbolic practice to replace any actual cutting.
- They can use this synthesis as a way to locate their beliefs and practice in wider contexts in order to be better prepared for dialogue.

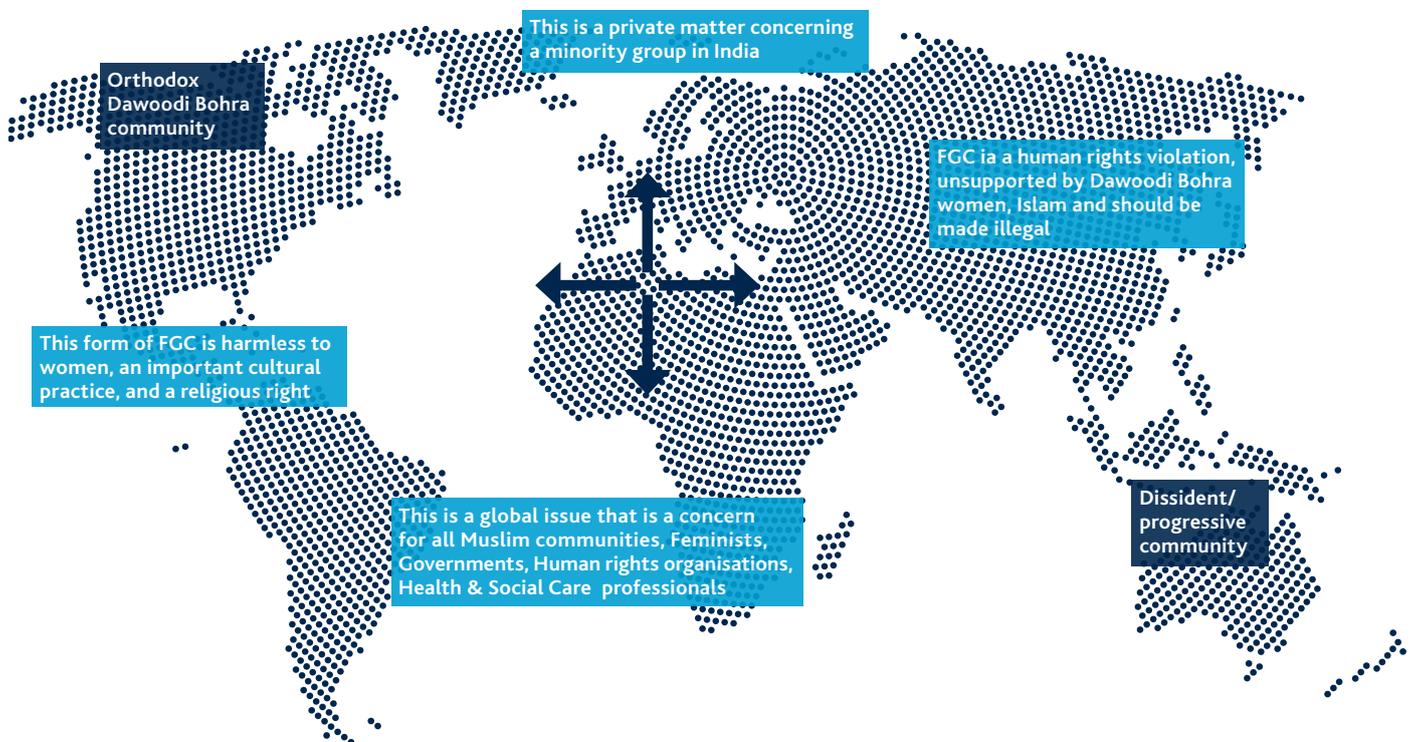
For critics of FGC:

- There is a need to recognise that separating individual rights from cultural rights is a distraction from the core issue.
- They can increase their understanding of the context of this practice in relation to cultural rites of passage.
- There is evidence that zero tolerance of FGC will not stop the practice: thus other responses need to be identified.

For both groups, the need for dialogue is reiterated throughout this synthesis in an attempt to achieve greater understanding and, ultimately, choice on an individual and group level.

As a result of concerns about discrimination arising from the publication of 'Understanding Female Genital Cutting in the Dawoodi Bohra Community' (Sahiyo, 2017), representatives of the orthodox Dawoodi Bohra community requested an independent review by the Tavistock Institute of Human Relations.

The differences in views about FGC presented by the orthodox Dawoodi Bohra and those who identify as reformist Dawoodi Bohra<sup>3</sup> have resulted in a polarisation of the debate. By identifying these positions, this synthesis sets out to place the Sahiyo report within a wider context of theoretical and practical debates pertaining to FGC practice, both in and beyond the Dawoodi Bohra community. In addition, by asking a number of questions, this synthesis attempts to set out a route to a less polarised - albeit still complex - understanding of the current situation and suggests future work to open up dialogue across different positions.



## Can understanding the context shift the debate from polarised positioning?

This synthesis focuses on five key questions:

- Is the Sahiyo report a valid representation of the views and experiences of Dawoodi Bohra women (in the UK)?
- Is the Dawoodi Bohra FGC practice a 'human rights violation' as claimed in the Sahiyo report?
- How do Dawoodi Bohra women understand FGC within their culture and religion?
- What drives the debate represented by Sahiyo on the one hand (human rights) and orthodox Dawoodi Bohra (religious freedom) on the other?
- How can the findings of this synthesis shift the conversation into a more open space?

<sup>3</sup> Also known as dissident or progressives.

## 3

# Independent Review of the Sahiyo Report

Key findings of the review of Sahiyo's research are presented here. The full review, which discusses in more detail the validity of the research and its findings, can be found in Appendix 3.

The issue	The evidence
<p><b>1. The purpose, aims and objectives of the Sahiyo research are not aligned.</b></p>	<p>The aims and objectives are not distinguished from each other. The purpose is said to be <i>'to understand the perceptions, beliefs and rationales of FGC among the global Dawoodi Bohra population'</i> yet the objectives serve the purpose of generating data which will determine what will lead to the <i>'abandonment of FGC'</i>. In particular it is clear that:</p> <ul style="list-style-type: none"> <li>• Both Sahiyo and the report's principal author are open about the impetus for the research and that they advocate 'for the abandonment of the practice of 'khatna' or 'FGC'.</li> <li>• It wishes to identify strategies that will end the practice of FGC in the Dawoodi Bohra community.</li> </ul>
<p><b>2. The Sahiyo research is not as robust as it could, or needs, to be.</b></p>	<p>This is evidenced in the design, sampling methods, and the questions asked which do not directly address the purpose of the study. The research design, methodology and methods of sampling and data collection have resulted in findings which are biased towards the beliefs and purposes of Sahiyo as a campaigning organisation. In and of itself, this may not be problematic but in an area of such sensitivity and where there are opportunities for information to be taken out of context, it opens the way to misunderstanding and misrepresentation.</p> <ul style="list-style-type: none"> <li>• <b>The research design was not fully described. There was no rationale for the design</b> except that an online method was based on knowing about Dawoodi Bohra internet use. No alternative research designs were examined in the report.</li> <li>• <b>The survey design lacked independent review.</b> It was only accessible to women with internet, IT literacy and English language. The piloting was carried out by people known to Sahiyo and thus not independent.</li> <li>• The sampling strategy used a snowball technique and was started through Sahiyo supporters. Inevitably, their contacts were likely to hold similar views. <b>This sampling strategy makes it impossible to generalise to Dawoodi Bohra women as a population.</b></li> <li>• The design of the question on types of FGC procedure gave no option that included Type IV (the least invasive and most symbolic) procedures.</li> </ul>
<p><b>3. Issues with the methodology have ethical implications</b> on the basis that 'good' research, i.e. which meets a set of commonly-agreed criteria, is ethical.</p>	<p>Here, the review of the research methods raised questions about possible sources of bias, transparency, and recognition of possible harm to participants.</p> <ul style="list-style-type: none"> <li>• The research ethics of the study were not fully explored. Given the acknowledged sensitivity of the research, there was no obvious support offered to participants, e.g. a contact name.</li> <li>• The participant information sheet describes the study as being carried out by a graduate student but gives no details, university or how the research had been reviewed.</li> <li>• The methodology, design, sampling and analysis calls into question the independence of the research, particularly since the findings have been published in a decontextualised form.</li> </ul>

The issue	The evidence
<p><b>4. The survey analysis is neither transparent nor robust.</b></p>	<p>Without access to the primary data or the full statistical analysis, these findings cannot be considered valid. In particular:</p> <ul style="list-style-type: none"> <li>• There are several cases of incorrect presentation of data.</li> <li>• There are mismatching sample sizes reported making it unclear what subgroup of the sample answered particular questions.</li> <li>• Relative frequencies and no absolute frequencies have resulted in misleading presentation of results.</li> </ul> <p>Even without the sampling problems and bias of constructs in the survey, in order to validate the findings the data requires:</p> <ul style="list-style-type: none"> <li>• Double checking of percentages reported.</li> <li>• Checking for abnormalities in the data set.</li> <li>• Clarifying what variables with what categories were used to test for significant differences between subgroups of the sample and reporting test statistics.</li> </ul>
<p><b>5. The literature review is incoherent, unstructured and not systematic as claimed.</b></p>	<p>It broadly focuses on three themes. Key biases and gaps in the literature presented are identified in these themes:</p> <ul style="list-style-type: none"> <li>• <i>Dawoodi Bohra FGC practice and other evidence on impact of Type I FGC</i>: The appropriateness of outlining the cross-cutting findings of the impact of FGM/C which are based on studies of Types II, III and IV in largely African populations; <b>the studies citing Type I Asian and literature on Dawoodi Bohra contexts are selectively quoted.</b></li> <li>• <i>Dawoodi Bohra culture and gender relations</i>: studies on women's progress and role in society are not cited. In particular regarding the prominent issue of educational attainment and entrepreneurialism. <b>Some of the literature is selectively cited, focussing on religious control to support Sahiyo's campaign.</b></li> <li>• <i>Human rights vs. cultural relativism</i>: This theme runs throughout the report but the position of Sahiyo is never transparent. The report displays a narrative of human rights and thus is <b>situated in a moral position that prevents a genuine exploration of the issue of FGC in this global context.</b></li> </ul>

## 4 Is the Dawoodi Bohra practice a 'human rights violation' as claimed in the Sahiyo report?

One of the key criticisms of the Sahiyo research is that Female Genital Mutilation (FGM)/FGC is used as a concept that homogenises all forms of cutting. The impact of FGC has been far better studied in its more invasive forms and in African cultural contexts. Widespread in human rights discourse and permeated throughout much of the literature, these impacts have now been extrapolated and applied generically across all forms of FGC. This chapter aims to unpick the evidence on FGC in order to extrapolate a relevant set of impacts that are more in line with the type of FGC practised within the Dawoodi Bohra community. The aim is not to conflate Dawoodi Bohra specific practice with others but, in the absence of a contemporary published study, to synthesise evidence and offer a transparent and robust independent insight into what has become a polarised debate.

In 1997, the World Health Organisation (WHO), the United Nations Children's Fund (UNICEF) and the United Nations Population Fund (UNFPA) classified FGM into four types. In 2007, these 'types' were subdivided into categories to capture the range of practices. Types 1 to 3 are based on the amount of tissue removed and the severity of the procedure (3b being the most severe) and Type IV includes a range of non-removal procedures such as pricking, and piercing (Samuel, 2017:4). (See Appendix 2 for full definition.)

There is insufficient evidence to definitively classify the FGC practice of the Dawoodi Bohra according to the WHO classification. However, from descriptions available from accounts from orthodox Dawoodi Bohra, from those who identify culturally as Dawoodi Bohra (the Sahiyo researchers/campaigners) and the scant published material, the classification would probably range between Type IV and Type Ia - the form of Type IV being an incision on the prepuce and the form of Type Ia being removal of a small amount of skin from the prepuce.

### 4.1 Descriptions of Dawoodi Bohra Female Genital Cutting practice

The Dawoodi Bohra call their practice of female circumcision 'Khafd' which is different from the widely performed male 'Khatna' circumcision. Male Khatna is obligatory in Islamic law and is usually performed in a hospital in the first few days after birth. According to Roy (1984), Khafd is a religious tradition rather than a religious law and is performed by the women of families in a private manner without ritual at around the age of seven.

Blank (2001), in his extensive ethnography of the Dawoodi Bohra in Mumbai, described gender relations as relatively equal and women as empowered in a number of ways, ranging from the equal right to sexual pleasure in marriage through to the high level of educational achievement for women and girls. However, he discovered very little of FGC practice, stating '*sources within the community have given me wildly conflicting testimony*' and '*I have at various times been told the custom is absolutely forbidden, that it is occasionally carried out in secret, and that most Bohra girls are subjected to it*'. (p.57)

In a newspaper article, Ghadially (1991) states that '*the Bohra's practice the sunna variety in which the prepuce or the tip of the clitoris is removed*'. The evidence for this statement is gained from 50 informal personal accounts, and from the experience of one cutter. Ghadially's experience is described: '*It hurt me bad and brought tears to my eyes. The whole thing was over in a matter of minutes*'. From these accounts she concludes: '*Unlike the more severe forms of circumcision, the least drastic form has neither serious health nor reproductive repercussions. In my own sample the most common complaint was the girl's difficulty in discharging urine*'. The description of the cutter's equipment includes '*a pile of 1" by 1" pieces of paper – this is used to wrap up the foreskin which is thrown away*'. Similarly, Zakir (2016) states '*According to the Fatimid Islamic tradition of the Dawoodi Bohras, female circumcision which is called Khafz must be carried out after a girl has turned seven. The word Khafz is Arabic for "to scale down" or "to shorten" (and, it should be noted, does not mean "to remove")*'. Depending on the size of the prepuce, the procedure ranges from a nick, a dorsal cut, or an excision of no more than 2 mm. Additionally, great care is taken to not touch the clitoris, let alone harm the genitals.' (Zakir, 2016). These descriptions suggest Type IV or a Type Ia classification.

With the caveat that some of the statistics from the Sahiyo report are questionable and the text supports the campaigning organisation (see Chapter 4 and Appendix 3), the survey results on the question of '*Type of FGC performed*' (Sahiyo, 2017, pp. 44-45) place the range of classification into Type Ia or Ib. That said, the possible responses to the survey did not include the option of the Type IV range of practices. The results of Sahiyo's research indicate that the majority of the respondents (65%) did not know what happened to them (p. 44) suggesting they may have experienced a milder form of FGC than the options offered (i.e. Type IV). The more recent trials in Australia of people carrying out FGC practices (Guardian, 2015) showed no conclusive medical evidence which also suggests a Type IV procedure in the Dawoodi Bohra. Type IV includes a range of techniques and results in a range of physical consequences. For example, a recent study of children who had undergone confirmed FGC Type IV referred to UK services showed that of 11 confirmed cases, 10 had a visible scar (Creighton and Reisel, 2015).

Without more evidence there may, in practice, be a range of cutting techniques that fall between Type IV and Type I. What is required is a medical anthropological study within the Dawoodi Bohra community itself, ideally combined with an action research approach, engaging wider stakeholders in the issue.

## 4.2 Physiological and psychological impacts

In the absence of a validated or systematic study of the Dawoodi Bohra FGC procedure (or range of procedures), it is reasonable to hypothesise that the impacts identified from other Type I or IV practices (particularly Asian and Middle Eastern Muslim contexts where Type Ia and Type IV FGC have been studied) are similar to the experience of Dawoodi Bohra girls and women. The prevalence in Asia and the Middle East is not known and various practices are documented. The types identified are, for the majority, Type I and IV. For example, Rashid et al. (2009) describe FGC in rural Malaysia and state '*a hospital based study in Malaysia has shown FGM to be a common practice among the Malays but with no clinical evidence of injury to the clitoris or the labia and no physical sign of excised tissue.*' In the description from a traditional cutter: '*The blade is broken in half to produce a sharp pointed end while the other half is discarded*', '*The vagina is opened using the fingers and the procedure is limited to only nicking the tip of the clitoris or prepuce with the blade*', '*There is no major injury to the clitoris or labia. There is only a very small piece of teased out tissue and only a drop of blood from the cut which is then covered with a piece of cotton.*'

In terms of impact data specifically on Types I and IV, there is a lack of information and, where systematic reviews have been carried out, the data is of poor quality, where many studies are small and depend on the memory of participants. Practitioner knowledge of different classifications of FGC is variable. To add to this, many of the impact studies are based in Africa in the contexts of Types Ib, II and III. However, the studies discussed suggest that FGC impacts negatively on women in three key areas: gynaecological, obstetric and psychological. Here we refer to the most recent systematic reviews where an attempt has been made to distinguish by Type. Also we discuss primary studies where impact by Type is known. Particularly Asian Type I or IV studies where it is reasonable to hypothesise that there may be similar impacts in this context (Dawoodi Bohra).

### 4.2.1 Gynaecological impact

Berg et al. (2014) carried out a systematic review and meta-analysis of the effects of female genital cutting. This was based on **185 studies** in 42 different countries. The majority of the studies were of African communities and '*the majority of women had genital alteration that involved the cutting and removal of portion of the external female genitalia, without stitching, corresponding to Type I or II.*' **This study estimated differences in risk across different types of FGC.**

In terms of immediate harm such as pain, excessive bleeding and wound healing problems, they found 'there might be a greater risk of immediate harms with FGM/C type III relative to types I-II', however, with regards to the least invasive types of FGC, 'we found few, and small, differences in risk of immediate complications with FGM/C types I-II compared to type IV (generally 'nick')'. Similarly, a mixed methods study in Indonesia (primarily Type IV practice) concluded: 'The study findings did not reveal any clear immediate or long term physical or psychological complications of FC for girls or women. However, direct observation of procedures showed that FC practice in Indonesia certainly involves pain and real genital cutting in about three-quarters of cases' (Budhiansana et al., 2003).

Results of the systematic review were inconclusive with regards to genitourinary problems such as '*scarring, keloids, abscesses, fistulae, damaged tissue (perineum, anal sphincter), disfigurement, vaginal obstruction and cysts*'. There was evidence that there was risk of vaginal discharge and itching, painful urination and difficulty in menstruation. There was also evidence of risk of urinary tract infections and bacterial vaginosis. Painful sex was found to be more associated with type III than I-II. No impact on fertility was established. The study cautions that the data was largely drawn from retrospective studies.

From these studies, it is possible to infer that there is a greater impact on women who have undergone Type III but there are some gynaecological impacts on women who have undergone the minor forms of FGC compared to women who have not. **We can hypothesise from this that girls who undergo minor procedures (Type I and IV) may experience immediate harm from FGC** such as pain, excessive bleeding, wound healing and urinary problems.

## 4.2.2 Obstetric impact

Berg and Underland's (2013) meta-analysis of **44 primary studies** found that women with FGC were 3.3 times more likely to experience difficult labour and twice as likely to experience obstetric haemorrhage compared to women with no experience of FGC. However, in this study, **the findings cannot be inferred as applicable to Dawoodi Bohra practice** as in the analysis only 22% of participants were classified as having Type I FGC. The authors acknowledged that 'measurement of exposure to FGM/C can be a methodological challenge'. Although the type of FGC was robust with '69% of the comparative studies using a classification based on gynaecological examination', there was no presentation of statistical tests for impact by type.

## 4.2.3 Psychological impact

Whilst there have been limited studies using validated measures or controls on the psychological impact of FGC, there have been many descriptions of the psychological effects including depression, anxiety and post-traumatic stress disorder (Whitehorn et al., 2002). Many studies of FGC psychological impact focus on aspects of sexual functioning. For example, Abdulrahin and Sharifa (2010) carried out a large study on the impact of FGC on sexual function using a validated tool covering arousal, lubrication, orgasm and overall sexual satisfaction. This study like most studies of impact of FGC does not test or show comparative impacts between different types of FGC.

Berg and Denison (2013) carried out a meta-analysis with studies mainly on Type I or II cases and concluded '*it would appear that FGM/C of any type may be associated with sexual problems' but for type IV it is unknown*'. The study does not disaggregate impact by Type because most of the primary studies did not report this data. They conclude, by quoting the WHO 2008 interagency statement on eliminating FGM, that '*In general, the consequences are similar for FGM/C types I, II and III, but they tend to be more prevalent the more extensive the procedure*' (WHO, 2008, p. 11). In the absence of data on Type IV, this appears to be almost a default position in line with the 'one size fits all' human rights discourse.

Thabet and Thabet (2003) looked at the impact on sexual functioning by Type in a study in Cairo. This primary study compared 30 uncircumcised control cases, 30 minorly circumcised, 30 minorly circumcised mutilated, and 57 patients with clitoral cysts (who comprised of 7% Type I, 57.9% Type II, and 33% Type III). The study concluded that '*sexuality was not affected in minorly circumcised cases*'.

It appears that the evidence of the impact of minor forms of FGC on sexual functioning have mostly included data that combines all Types. This gives an unclear picture of any likely impacts on the women who have undergone milder forms of FGC. Where Types have been studied comparatively, no impact of Type I was found, yet in meta analyses (based on the majority of I and II cases), impact is suggested.

A study of the Iraqi Kurdish, who practise Type I FGC on young girls before puberty, found several psychological impacts on girls who have undergone FGC compared with a control group. '*The results of this study indicated that female genital mutilation is likely to cause various emotional disturbances, forging the way to psychiatric disorders*' (Toubia, 1994, p. 98).

From the studies available, the likely impact of FGC on sexual functioning on Dawoodi Bohra women cannot be inferred. However, it would be a reasonable hypothesis that there are some psychological problems resulting from undergoing the procedure.

## 4.3 Social impacts

The literature shows that in cultures where it is the norm, there are wide ranging and considerable social impacts associated positively with having FGC and negatively with not having it. Key themes include a rite of passage, sexual morality and marriageability. From this evidence, we can build a hypothesis that Dawoodi Bohra girls and women (and their families) experience impacts if they had not had FGC, even if it has been difficult to collect a full picture of the cultural specificity of the practice.

### 4.3.1 A rite of passage

For many communities FGC is undoubtedly considered an important rite of passage that transforms children into community members, sometimes described as 'cyclical rites'. Both male and female genital cutting have been noted as key markers of identity formation from some of the earliest anthropological works (e.g. Van Gennep, 1909). After it takes place, children are considered integrated as full humans and thus separated from the spiritual realm. For example, Octavia (2015) describes how in Indonesia, FGC is an important part of Islamic women's identity and marks the becoming of a woman. Similarly, Purtranti (2008) describes the symbolic practice of tetesan in Java carried out on eight year old girls to help '*her to develop her awareness of upcoming changes in her body and behaviour*' (p. 28). With the same concept of identity formation, Newland (2006) argues that banning FGC fails to recognise that the ritual is part of a process of socialisation which results in the full formation of a member of a community. The rite of passage concept is not a dying one, but thrives in the modern world for 'non-western cultures' that do not separate the individual from the social, and the social from the spiritual in quite the same way as is the case in the dominant culture of Europe and North America.

### 4.3.2 Purity and morality

Putranti (2008) studied the socio-cultural contexts of FGC in Indonesia. These include the symbolic practices typical of the Javanese syncretic religions and the Islamic real cutting practices. Both of these have been subject to the process of medicalisation. Islamic practices have been influenced by the rise of fundamentalism, and the symbolic and real cutting within syncretic faiths has become commercialised (typically as baby packages with ear piercing included within hospitals). Both types of FGC are motivated by the notion of purification of the child. *'Both female and male genital cutting significantly determine a person's social identity as a 'true' Muslim.'* (Putranti, p. 26). Isa et al. (1999) in a study from Malaysia shows that FGC is motivated by reducing the sexual desire of women. Putranti (2008) argues that *'women's sexuality and reproduction remain under the control of a religious-patriarchal ideology'* (p. 30). She describes how FGC narratives represented the view that FGC should never cut so much as to hinder sexual pleasure (within marriage) but should cut enough to curb excess female sexual desire. Similarly Budiharsana et al. (2003) cite religious Islamic duty and tradition as reasons for supporting FGC.

### 4.3.3 Marriageability

One of the most important factors in the moral discourse around FGC is that it opens the way for women to marriage (an important cyclical rite) with its ensuing financial stability, and further status through motherhood and their role in a wider family. FGC can be openly celebrated, e.g. in some African contexts, and linked to a girl's virginity and thus bride price and marriageability (e.g. Dandesh et al., 2001; Finke, 2006; Jones et al., 2004; Whitehorn et al., 2002). This is also the case in Islamic South Asian contexts; Clarence-Smith (2008) describes how FGC in South Asia can be traced to Islam and states that *'The main justification for FGC put forward by SouthEast Asian Muslims, both men and women has long been that it marks the entry of a woman into the Islamic faith'* (p17). The example of FGC in syncretic Islamic cultures, such as in Java, is described as representing *'transition to adulthood through menstruation, facilitated marriage and childbirth, protected from bad luck, and cleansed from various kinds of pollution'* (p. 18). Thus it appears that in South Asian Islamic contexts, FGC is clearly linked to marriageability and therefore non-conformity would carry a high price.

There is no specific evidence that marriage is linked to FGC in the context of the Dawoodi Bohra or indeed as part of any cyclical rites or life phases. However, with a plethora of global evidence linking FGC to morality, sexual fidelity in marriage and the attainment of womanhood, it is a reasonable hypothesis. The qualitative data in the Sahiyo report finds marriage to be a reason for FGC and the film 'A pinch of skin' by Goswami (2013) includes narratives linking the practice to marriage.

## 4.4 Conclusions

These studies illustrate that where it is practised around the world, the social and cultural impacts of not having FGC are considerable, thus making the pulls to conform very powerful. In the absence of a validated primary study of FGC as practised in the Dawoodi Bohra communities, this synthesis provides a robust basis that allows us to hypothesise that FGC in this culture is also part of cyclical religious/cultural rites and does not exist in isolation from other beliefs and values.

This can be interpreted in two ways. First, that it is a violation of religious right or culturally insensitive to make FGC illegal. This is the position of many scholars and activists from the 'cultural relativistic' camp, e.g. *'accepting de minimis non-therapeutic FGC procedures that generally do not carry long-term medical risk is culturally sensitive, does not discriminate on the basis of gender and does not violate human rights'* (Arora and Jacobs, 2015 or Brux, 2007). One of the best descriptions of valuing FGC is the well-known study by Boddy (1982) in Sudan, where Type III FGC infibulation represented the notion of 'enclosure' which was valorised wider in the social and material culture as a way of separating society from nature and fundamentally being human.

The second interpretation is that a cultural norm is not always what is desired or universally accepted. For example, Gruenbaum (2001, 2005) explores the socio-cultural dynamics of FGC in a wide range of contexts, arguing that the male dominance and female victim argument is too simplistic and the narratives of pro, anti and indifference to FGC are fluid. Gruenbaum also points out that culture is never static and that understanding cultural values is not an end-objective but can provide useful launching points for reflection, change and new ideas.

In 2017, a new group called the Dawoodi Bohra Women's Association for Religious Freedom (DBWRF) was established and positioned itself as the authentic voice of orthodox (and thus the majority of) Dawoodi Bohra women. Understanding the role of women in their culture and religion - and how women perceive and experience FGC - is of critical importance here. To set this in context, based on key texts and discussions carried out for this synthesis, this chapter examines how the Dawoodi Bohra presents itself to the external world and where women sit within this community. The literature available about the Dawoodi Bohra is sparse which may reflect the community's desire for privacy. This presents something of a challenge when attempting to describe and make sense of cultural and gender relations from the inside. In this chapter, the discussion focuses on the concept of modernity for the community; women's lives within Dawoodi Bohra; the role of religion; and where, how and with what impact, religion, culture and modernity intersect.

The Dawoodi Bohra is a small Ismaili sect within Shia Islam (approximately one million population). What distinguishes this community from other Shia groups is that members follow a single spiritual leader or Da'i-al-Mutlaq. His role is to govern or oversee the community with complete authority, unlike the leaders of other Muslim Shia groups. The Dawoodi Bohra is further distinguished from other groups in its commitment to modernity (see 5.1 below). Central to the community is the mithaq or oath of allegiance to the Da'i the meaning of which has been the cause of controversy and internal power struggles (Blank, 2001, p. 63).

The Dawoodi Bohra is also one of a very small number of Shia groups which perpetuates Khafd or FGC.

## 5.1 Modernity

Central to Islamic faith is the belief that women perform the same duties as men in relation to their religion and, despite preconceptions that women are treated as less than equal, Islam has promoted women's equality in many ways (Esposito, ed., 2018). At the same time, women's status in and outside the home has remained subject to a prevailing patriarchy found in its most extreme within Islamic states, such as Iran and Afghanistan. (Moghadam, 1992).

Part of modern Dawoodi Bohra identity, and the way in which they wish to be perceived, is as being a group which has attempted to be progressive while maintaining its traditions, for example, in its pursuit of educational equality (Ghadijally, 1994). It is not representative of all Muslims, nor specifically of Shi'a, communities. Unlike some groups, they argue that members can adhere to their faith while accepting most aspects of modernity as well as a pluralist civil society, yet also following apolitical quietism (the religiously motivated withdrawal from political affairs) (Blank, 2001, p. 272).

Blank argues that the senior clergy and leaders have reconciled tradition with modernity. He says '*perhaps the most important lesson the Bohras can teach outsiders is that Muslims can indeed embrace modernity while remaining true to their traditions and core beliefs. The decision about how much or how little modernity to accept is one for Muslims themselves to make and many Muslim communities are following paths similar to that of the Bohras*' (Blank, 2001). However, he also makes clear that although, whenever possible, the Dawoodi Bohra combines tradition with modernity, and if there is conflict '*the Bohra clergy opts for the former. Modernity can support tradition, but here tradition will trump modernity*' (Blank, 2001, p. 252).

Modernity emphasises rationality, knowledge, human rights and representative politics and has been a critical concept in the community's responses to change from the 19th through and into the 21st century (Giddens, 1990; Giddens, 1991; Blank, 2001, pp. 258-267). As Giddens says: '*The modes of life brought into being by modernity have swept us away from all traditional types of social order, in quite unprecedented fashion*' (1990, p4). This has been especially important in attempts to reconcile Islamic faith with modern Western values and practices, and it remains contested as an appropriate position for Muslims to take (Blank, 2001, pp. 260-7). Modernity is often associated with the questioning or rejection of tradition which some fear will lead to the erosion of faith through secularisation, the development of the nation-state, education and even surveillance – all of which have been rejected by Islamic states (Zubaida, 2005). However, there are variations of modernity and the Dawoodi Bohra illustrate how one small sect appears to have assimilated a form of modernity into its more traditional culture (Blank, 2001, pp. 285-6). Specifically, this is illustrated through its attitude to women; most are educated, work outside as professionals or run businesses from their homes. Women (and men's) power is extended through pilgrimages which present opportunities for business development and social networking (Ghadijally, 2002). Thus, remaining outside mainstream politics may have enabled the Dawoodi Bohra to be both modernist and traditionalist.

The literature suggests that the community's culture, while reserved and conservative, is also outward-looking, progressive and embracing of change, including for women. The Dawoodi Bohra are seen to be progressive in matters which pertain to equality and thus women's lives within the community. This appears to manifest itself across three key domains which include education; family and marriage; and the segregation of men and women. There remain, however, questions both about what happens 'on the inside' for women, e.g. in relation to the role of patriarchy (there are no women spiritual leaders) and FGC, and 'on the outside', about dissenting progressives' voices, and especially those who do not see FGC as compatible with modernism. Ghadially, in her review of Blank's book, cautions that *'overall, the author makes a strong case for how the sect and its leadership has demonstrated that it is possible to modernize and yet remain deeply rooted in one's traditions. This is true provided the word modernity is used in a narrow sense of adoption of information, communication technologies and secular education.'* (Ghadially, 2002)

Concerns have been raised that secularisation and Westernisation are at odds with Muslim beliefs. As recent as 1979 and emanating from the leader's concerns that Dawoodi Bohra were over-assimilating with non-Muslims and others, the da'i made beards, burqas (rida) and a dress code for men compulsory in ritual settings (McLain, 2010). Nevertheless, Blank among others, argues that the Dawoodi Bohra have successfully integrated these seemingly opposed positions. There also exists a small yet vocal break-away group known as 'dissidents' (Blank, 2001) or 'progressives', as they call themselves. The 'progressives' do not accept submission to the Syedna's dominance and argue that in secular matters, the leader should not have control. This group is also affiliated to the anti-FGC lobby and distances itself from the argument that the orthodox Dawoodi Bohra can be authentically traditional and modern.

## 5.2 Women's lives from the inside

Dawoodi Bohra women - and how they function within and outside their community - may contribute to changing stereotypical beliefs about Muslim women. Women are involved in areas of life including rituals and FGC which exclude clergy and men more generally (Roy, 1994, p. 105; Blank, 2001, pp. 123-8). The community is committed to women's education, independence in work and in choices affecting their lives including marriage (Blank, 2001, p. 118). None of these are seen as contradictory to their cultural or religious beliefs yet each is complex and, when viewed through a different lens, appear to embody contradiction.

Women's education has been of critical importance among Muslim groups and within this, the Dawoodi Bohra have not only emphasised education for women including attendance at co-educational madrasas but pioneered girls' schooling in India from the early 20th century (Ghadially, 1994). Ghadially notes that *'the championing of girls education was essentially a male activity'* as well as one which created tensions between the orthodox and those seen as early reformist Dawoodi Bohra. By the 1990s, according to Blank (2001, p. 126), 88.8% of survey respondents reported agreement with the concept of 'educational parity' and that, while many women remained as homemakers at that time, those that chose to work outside the home were not stigmatised. Literacy is close to 100% in the Dawoodi Bohra community illustrating that they take seriously their Muslim obligation to seek knowledge.

Since Blank's study, women have continued to expand their professional and work roles. They have access to loans for business start-up as well as for education in the same way as their male counterparts. Described on The Dawoodi Bohra website, *'For Bohras there is no discrimination between the education of boys and girls. All of the community's madrasahs and schools and the Al Jamea tus Saifiyah Academies cater to both and in virtually equal numbers. The same is true of the sons and daughters of Bohra parents in secular education. Girls are encouraged to pursue the highest level of education they wish as much as boys are. This has led to a high number of women from the community becoming professionals in a variety of fields, a great number of businesswomen and many, many more in gainful employment.'* (The Dawoodi Bohras)

However, even within a sphere where the community's approach appears straightforward, it is more complex. In the wake of Syedna Mohammed Burhanuddin's death in January 2014, and amidst the succession battle which followed, the question of women's education caused controversy. The new Da'i was criticised for his attitudes to women and members of the mainstream or traditional community privately and publicly voiced their concerns. These included questioning the advice that women should study home science, not attend university and not work outside the home. According to press reports (e.g. Scroll-In, 2014) and discussions for this synthesis, women spoke out and saw this as a manifestation of the liberal views of the Dawoodi Bohra: *'I am a supporter of Syedna Saifuddin and I attend as many of his sermons as I can, but I do not agree with some of his views on women and their education. He has said, on multiple occasions, that girls should not be sent to universities or work outside, and that they should be taught how to stitch and make rotis. But I believe education is for all. Why should women only work at home?'*

The Dawoodi Bohra have chosen to keep a low profile, out of the spotlight of the press in particular, and not been activists in political arenas. Despite this, some women felt able to voice their concerns and protest, even though this appeared to be counter to the da'i's pronouncement, thus illustrating contradiction both within and outside the traditional Dawoodi Bohra community. (Ibid.)

Reconciling tradition with modernity has had most success in education. However, with the increased level of education and spread of information technology, encouraged as a means of connecting people to their community, runs the risk of exposing traditional Dawoodi Bohra to thinking and experience which challenges the orthodoxy of their beliefs and practice.

### 5.2.1 Family and marriage

Family and marriage are fundamental to Muslim and Dawoodi Bohra lives. Blank provides a detailed description of kinship, sex and married life (pp. 111–133). From this, it is clear that the community coheres around close relationships within local, compact geographical zones. Boys and girls form mixed friendship groups (Roy, 1994, p. 109) although these are likely to become single sex as they grow up. Dawoodi Bohra women have achieved considerable independence and autonomy, arguing that they experience greater equality and freedom within the community in relation to the choices they make in both domestic and professional spheres when compared to many other Muslim groups and this has empowered them.

In Islam, women are considered equal to men in relation to their religion but this is not necessarily the case within the law and in general practice. Shia attitudes to family, and in their marriage practices are often considered to be less traditional than Sunni Muslims. However, according to Blank (2001, p. 111), the Dawoodi Bohra are traditional about family and marriage, and matchmaking is common practice although young people are more likely to play a part in the final decision. Families are tight-knit as is the whole community which contributes to the perception of Dawoodi Bohra as both private and secret where they do not need to go outside their own group to find marriage partners. Within the family context, women are involved in rituals, such as FGC, as a separate domain from men thus creating the argument that this is a private woman-to-woman activity.

Existing literature has not illuminated how women reconcile their apparent empowered status with the deep seated traditions of the community.

### 5.2.2 Women and Religion

Religion is central to Dawoodi Bohra life as is observance to and discipline in religious practice. The community is unusual in its central focus on the living Syedna and the (so-called) royal family (McLain, 2010). The da'i holds the most significant role, has power over Dawoodi Bohra practice and thus plays a role in the continuation and type of FGC used by members. While Dawoodi Bohra members are required to keep to the law of their country, those community members living in countries where FGC has not been banned have argued that the type of procedure they use is no more than other cosmetic procedures practised to enhance women's sexual experience. Critics from breakaway groups including Syedna Fakhruddin, a Dawoodi Bohra sect leader, say that FGC is un-Islamic (e.g. Menon, 2017) and should not be practised. However, he also said that chaffs or the Dawoodi Bohra FGC procedure should only be carried out on reaching adulthood. There is no evidence to suggest that women would choose to go ahead with it at that point in time. The voice of religious leaders is central to how FGC is perceived and viewed despite the argument that women make the decision.

It is not clear in the literature where the orthodox community stands on whether FGC is un-Islamic or not (see News In Asia June 4 2017) where doctors say Khafz is performed for reasons of religious purity) but if it is considered to be so across many or most Muslim groups, what are the justifications for the practice if not religious? Further to this is the question of choice and anxiety that women may be excluded from their community if it is known that the procedure has not been performed. Blank's chapter on dissidents outlines 'Baraty', a form of social boycott where individuals and families who were non-compliant were barred from religious services and from contact with orthodox members (Blank, 2001, pp. 229–257). Here too the role of religion was highlighted as a form of control.

In conclusion, it appears that there is likely to be a rather more complex picture than presented by the Dawoodi Bohra community, regarding the intersections of religion, culture and modernity, on which the concept of 'Izsak' (family honour) also intersects. The DBWRF have been critical of the anti-FGC movement on the grounds that there is insufficient evidence that their practice is harmful. Anthropologist Sulkin (quoted in an article from News in Asia 2017) says:

*'I think that many Westerners simply do not imagine that female genital cutting can have such positive moral associations, or be part of a respectable or admirable way of life.'*

Given how little is known, there are clearly further questions to ask within the mainstream Dawoodi Bohra community to test if the anti-FGC dissidents/progressives may be giving voice to broader concerns among women within the community. There appears to be no single voice for women and an exploration of the more subtle issues identified here may lead to more productive lines of inquiry with which to inform the debate.

# 6

## Understanding the drivers to the debate on Female Genital Cutting in this context

Understanding the forces which drive this debate will help stakeholders identify a common language and a starting point for moving forward. To understand the issues requires the individual to have an open mind to recognise these drivers as historical and political forces in complex human systems in which all are complicit. This section aims to locate the debate within both global and local political agendas.

There are four interlinked key areas that can be seen as 'drivers':

- Western Imperialism
- Patriarchy in the dialogue
- Historical Dawoodi Bohra tensions
- The media and discrimination.

### 6.1 Western Imperialism and Islamophobia

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The review of the Sahiyo research identified the need to be clear about the polarised positions of human rights vs. cultural relativism and the field of enquiry this debate has created. Is it really true, as suggested in the Sahiyo research, that FGC can only be understood either in terms of a human rights abuse or as a cultural practice of which an outsider objection can only be considered as racist? This synthesis argues that taking either position denies entry into the complex international system in which debates around FGC are being played out.

It is important to present the evidence for a key driver for the polarisation of the debate and that is a historical Western imperialist project as well as a modern manifestation, now known as 'Islamophobia'.

FGM human rights violation positions have been linked to an imperialist narrative. For example, Wade (2009a) describes FGM as a construct that is a 'colonial imperialist narrative' used to avert any oppression of women in the West (Wade, 2009b). This is reminiscent of the way veiling was constructed by western human rights feminist discourse as 'oppression of women' that should be rescued by western countries (e.g. Morrie, 2005; Werunga, 2016; Korieh, 2005). FGM has been studied as a human rights abuse or as a cultural process. It could also be argued to be part of long established 'orientalism' *'This ethnocentric culture relentlessly codified and observed everything about the non-European or peripheral world, and so thoroughly and in so detailed a manner as to leave few items untouched, few cultures unstudied, few peoples and spots of land unclaimed'* (Said, 1993, p. 268).

Islamophobia can be defined as fear of Islam and its followers. The European Commission against Racism and Intolerance (ECRI) uses the Council of Europe definition of Islamophobia as *'the fear of or prejudiced viewpoint towards Islam, Muslims and matters pertaining to them'* (2008). The term came into use following the Runnymede Trust report in 1997 and then as a way of describing the growing discrimination against Muslims after the 9/11 and 7/7 attacks, when Muslims (conflated with radical Islamic terrorists) became a greater focus of policymakers in the UK and around the world (Poole and Richardson, eds., 1997).

### 6.2 Patriarchy<sup>4</sup> in the dialogue

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There is a wide range of literature - particularly from anthropology - from veiling to FGC that describes the use of human rights discourses as a neo-colonial device to impose western values in the name of rescuing women. Monagan (2010) argues that FGC in all its forms is a patriarchy: it is carried out by women, but for men. This argument extends to (and includes) western practices of FGC surgery more commonly presented as 'choice' (Braun, 2009).

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<sup>4</sup>Theoretically the concept of patriarchy is simplistic and implies that women's oppression depends on a universal conspiracy of men to dominate resources. We use the concept here, problematized with italics to acknowledge the limitation of it as a 'grand theory'. It is used here to describe human systems that are generally dominated by men who promote economic systems that generally privilege men.

However, there is also a wide range of feminist critiques of the anti-FGC human rights view. These argue that anti-FGC discourses are dominant, patriarchal and colonial (e.g. Jambi, 2000, 2004). In particular, it has been argued that medical and legal discourses homogenise different practices which overlook the particular power dynamics at play in the culture as well as the subjective experience of FGC (Grande, 2004; Manderson, 2004; Bell, 2005).

The dominant construct of FGC results in women being cast as victims creating a loss of agency for themselves and their communities. This is particularly the case for less invasive types of FGC (Type IV) that are included in the construct of 'FGM' (Shell-Duncan, 2008). Wade (2011) argues that this dominant human rights narrative has the effect of overshadowing non-western opposition to FGC and the centrality of transnational power asymmetry in women's oppression.

Other more relativist perspectives draw the analogy of FGC and male circumcision (Earp, 2013) and, as previously noted, legal western forms of female genital modification such as piecing and cosmetic surgery (Sullivan, 2007). They draw attention to the ethnocentric and patriarchal drivers of the reification of 'FGM' and argue instead for a focus on informed consent and autonomy.

Those who agree the practices are harmful argue that informed consent and autonomy will only be possible by acknowledging the subjective experience of women and their communities as well as entering into a dialogue on ways to end the practices (Lewis, 2009; Smith, 2011; Schweder, 2000).

The issue in this debate is that both the human rights/criminalisation agenda and the cultural/religious freedom argument represent patriarchies in the dialogue. This suggests there needs to be a space in which to honour the articulated experience of women and the willingness to listen, reflect and collectively unpick the motivations and aspirations of girls, women, and their families affected by FGC.

### 6.3 Historical Dawoodi Bohra tensions

An essential point in the current debate about FGC in the Dawoodi Bohra tradition is that claims put forward by anti-FGC campaigners in India (Sahiyo) about the enthusiasm for the Dawoodi Bohra women's support for their campaign are highly contested. There exists a small yet vocal break-away group which considers itself as 'progressives', but is referred to by others as 'dissident' (Blank, 2001). The 'progressives' do not accept total submission to the Syedna's dominance and argue that in secular matters, the leader should not have control. This group is broadly affiliated to the anti-FGC position and distances itself from the argument that the mainstream Dawoodi Bohra can be authentically traditional and modern. The mainstream community strongly objects to any claims the 'progressives' make to representing the voices of the people.

The lack of published literature on the Dawood Bohra community is evidence itself of an introspective, closed culture. This puts them in a difficult position when the minority group of 'progressives' are more open to discussion and, amongst their number, have proactive social activists with a strong history of media engagement and awareness. Blank's study confirms this by saying *'the reformist camp has been very successful at dominating discussions of the Bohras in the wider Indian society. Indeed, virtually every mention of the Bohras made by outsiders, whether popular or scholarly is traceable to dissident rather than orthodox sources'* (Blank, 2001, p.233). It is clearly the case that in the current FGC debate the same dynamics are at play.

### 6.4 The media and discrimination

Where the community has traditionally shunned the limelight through a belief in political quietism, there has been a flurry of reports covering the publication of Sahiyo's research as well as the legal case brought against three people in Detroit for practising FGM against United States law and the prosecutions in Australia. There has been almost no response from the Dawoodi Bohra community.

Media coverage of the Dawoodi Bohra FGC issue in 2016/17 can be broadly classified into four positions:

- the portrayal of Dawoodi Bohra women as victims and the culture as secretive and barbaric
- reports on the politicisation of the issue in the leadership
- reports which contextualise the practice in the wider global debate
- reports which conflate all forms of FGC and report the Sahiyo research findings uncritically.

The main sources of press coverage have been in India although there has been some in the UK and the US covering the current legal case. In Australia, as in the UK, the press reported on three Dawoodi Bohra community members involved in one case (a local spiritual leader, the mother of the child concerned and the retired nurse involved in performing the FGC) who were sentenced in 2015 to 11 months each for FGM under Australian law. In this case, the Dawoodi Bohra responded with a letter to all community members asking that they obey the law of the land. It appears there was no corresponding media response from the Dawoodi Bohra which is no surprise given the community's desire to maintain its low profile.

A key difficulty with the media coverage has been the misuse of the statistics and the conflation of FGM impacts, suggesting opposition to FGC to be the majority opinion of Dawoodi Bohra women. The widely quoted statistic in the media is that 70% of Dawoodi Bohra women responded to the survey and said they had had FGC performed on them. In fact the survey had less than 400 respondents of whom 70% had FGC performed on them. In addition, impacts of FGM are reported in the press as general statements rather than evidenced experience, e.g. *'There are grave health repercussions. In the short term there may be pain, excessive bleeding, fever, infections, shock or even death. In the long term there may be urinary or vaginal problems, pain during intercourse and complications at childbirth'* (The Indian Express, May 17 2017).

The effect of this media coverage results in the discrimination of a highly visible (due to the women's distinctive dress) ethnic minority in India and the provision of fuel to a wider Islamophobia discourse.

However, there are also reports in the media that discuss the nuances of the context and describe the complexity of women's voices. The traditional silence of the Dawoodi Bohra is no longer a protective factor.

### 6.5 Conclusion

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There are different drivers which raise the question about how to engage a highly visible group of Dawoodi Bohra women when they have been perceived as victims. Presenting women in this way is about discrimination via media discourse and feminism which shows that the anti-FGC view can also be problematic. At the same time, women's voices need to be heard alongside the voices of those who support FGC. The Dawoodi Bohra have felt discriminated against, persecuted, labelled by people outside their community, as well as seen as backward and in a defensive position.

The Sahiyo research report quotes but does not evaluate or position itself in relation to the WHO current policy of understanding FGC in its context and the need for cross-cultural dialogue. This synthesis attempts to address an inter and intra cultural dialogue approach to this issue. There is no one voice on the issue of FGC in Dawoodi Bohra; there is no one 'traditional view' or a 'woman's view': *'I argue that rather than seeking to "save" others (with the superiority it implies and the violence's it would entail) we might better think in terms of (1) working with them in situations that we recognize as always subject to historical transformation and (2) considering our own larger responsibilities to address the forms of global injustice that are powerful shapers of the worlds in which they find themselves'* (Abu-Lughod, 2008).

## 7 What do the findings of this synthesis mean for the mainstream Dawoodi Bohra community and those who wish to abolish Female Genital Cutting?

The purpose of this synthesis has been to locate the interests of the Dawoodi Bohra community and the critique of Sahiyo's research about FGC within the broader cultural and political contexts that surround historical and contemporary debates. The Dawoodi Bohra have perhaps come to a turning point, through history and circumstance. The Sahiyo research can be interpreted to have cast the community in a negative light and initially put them into a defensive position with regards to opening the conversation about the role of FGC in religion, culture and its impact on women. However, the illegal status of the practice across the diaspora suggests that the spotlight now turned on the community cannot be ignored. Dialogue appears unavoidable.

This synthesis aims to be impartial, with the intent of acting in the best interests of the whole community by providing material to help understand and open new conversations.

It concludes that the Dawoodi Bohra practice may not fall clearly into Type I or IV of the WHO definitions of FGM. However, irrespective to which it were to be assigned, there is evidence of negative impact on women who have undergone similar procedures. The view from those who represent the mainstream community stresses the 'harmlessness' of this FGC practice. The finding from this synthesis of evidence is that the picture is complex and cannot be classified simply as a matter of right and wrong. In addition, there are clearly gaps in knowledge and further research is recommended.

Whilst some researchers conclude that the practice is in decline with increased social movement and globalisation (e.g. Berg et al., 2012), there is a concern that medicalisation and Islamic fundamentalism are providing contemporary justifications (e.g. Finke, 2006; Newland, 2006). If Dawoodi Bohra women are supportive of FGC, as suggested by the DWBRF group, this appears to be an anomaly since this community has been regarded as more advanced than other Islamic groups in terms of gender equality and their embrace of modernity. If FGC in the Dawoodi Bohra context represents a cyclical rite that is crucial to the imbuing of personhood, as important indeed as marriage, it is crucial to communicate this to those who hold a blanket anti-FGC position.

Within this context, the implications of these findings are multiple. For the majority mainstream Dawoodi Bohra, the findings provide sufficient evidence to be able to hypothesise that there is a negative impact for girls and women, despite the community's cultural belief and practice. The evidence may not 'prove' that FGC in the Dawoodi Bohra context is a human rights violation, but this does not mean it has no impact on women. Evidence provided has suggested that FGC is embedded in the community but this has not been accompanied by further and clear evidence that demonstrates cutting as 'good practice'. This synthesis further suggests that the Dawoodi Bohra should place their beliefs and practice within wider contexts. There is a new open dialogue where they can exchange understandings with others by inviting wider communities to learn about their culture. The synthesis has also demonstrated the modernist approach of Dawoodi Bohra, e.g. in relation to gender roles. It is thus in a strong position to prevent the common, difficult impacts of FGC through educating girls in the community. In addition, consideration might be given to other practices which are equally symbolic and used by cultures where a legal ban has been enforced.

For **critics of FGC**, it is important that they recognise their assumption of human rights violation is based on a false dichotomy between the individual and culture. Part of becoming a 'moral being' and pursuing the rite of passage into adulthood tends to include religious and/or cultural practice. However, this passage often occurs when the individual is old enough to give their consent, and in contexts where its occurrence involves debate and discussion (for example, confirmation into the church in Christianity). A ban of FGC has implications for the community and could be seen as an affront to a culture and an individual's right to personhood. Sulkin (2017), speaking on the social aspects surrounding circumcision for News in Asia, said *'it is important to underscore that there should be some recognition of the fact that persons' moralities – what they really value, their sense of what is important in life, their sense of how they ought to live, look, and behave—are products of their own life processes, in particular social contexts and at particular times in life.'*

The adoption of a zero tolerance policy towards FGC risks that it goes underground, where cultures under the spotlight might associate FGC with political resistance (as seen in the case of the Dawoodi Bohra Women's Association for Religious Freedom). There is an argument that less severe types of FGC should be considered more in their cultural context (see for example, Newland, 2006; Arora and Jacobs, 2007). The United Nations concluded that, rather than a blanket ban, what is needed is to involve the culture in a genuine way and be dealt with sensitively.

On the one hand, there are oppressive cultures and leaders fighting for FGC continuation without modification. On the other hand, the practice runs deep in the cultural norms and individual rights of people. Hence, there is a polarisation of discourses across different invested groups. All of these sit at the intersection of their local and then global contexts. This synthesis has set out to describe the extent of polarisation, complicated by debates about individualism versus culture and traditional versus modern – both of which present further false dichotomies. Within a wider political agenda of Western hegemony and different feminist perspectives interacting with historical and local Dawoodi Bohra politics, creating the conditions of dialogue will be ultimately more productive than criminalisation.

There is a need to consider further research which will facilitate the Dawoodi Bohras and others' understanding of FGC. This includes:

- **Independent qualitative research** with women and men, cutters and medical professionals to explore in-depth questions about cultural understanding; how FGC is perceived; and how issues raised need to/can be addressed
- **Independent survey** of Dawoodi Bohra women and girls, cutters and medical professionals ideally based on a representative or random sampling method.
- **Participatory research/action learning or dialogue events** to learn from the findings and foster wider understanding of the issues.

# Appendix 1: Methodology

This synthesis is based on two interconnected stages, an independent review of the Sahiyo report and a realist informed narrative synthesis of evidence on what emerged as the key issues in the current debate on FGC as it is practiced in the Dawoodi Bohra tradition. These stages are described in detail below.

## Stage 1: The independent review

The Tavistock Institute of Human Relations (TIHR) provided an independent review which offers an impartial assessment of the quality and integrity of the Sahiyo report. A structured assessment by two Principal Researcher/Consultants and a quantitative researcher was carried out to examine the validity of the Sahiyo research. This examined:

- the literature cited and identification of gaps in research
- the methodology and methods used for their appropriateness to the study
- the data presented
- the analysis of the findings
- the interpretation and conclusions and their consistency with the questions asked.

The method included:

- identification of three researchers to conduct the review covering key qualitative and quantitative skills as well as knowledge of the substantive area
- identification of key (standard) quality criteria
- three-way triangulation – each researcher created an independent review
- the three reviews were collated to identify congruence and divergence for further exploration.

The review (see Appendix 2) provides a digest of key findings which addressed:

- purpose and design of Sahiyo's research
- research ethics and how they were addressed
- the literature review
- methods: their appropriateness and clarity of data collection and analysis
- reliability; validity and generalisability of the data
- the relationship between the presentation of the findings and the subsequent discussion.

## Stage 2: Realist informed narrative synthesis

A major challenge in the area of FGC, from those advocating for legal change and those arguing that the practice is culturally specific, is the complexity of the issue due to multiple, diverse yet interconnected factors. Understanding these factors and what drives opinion, policy, legislation and practice, underpins this synthesis.

A realist-informed approach enables the synthesis of research which is explanatory and identifies the mechanisms or drivers which lead to outcomes. In this context, a realist-informed (Pawson and Tilley, 1997) approach assumes that *'nothing works everywhere or for everyone, and that context really does make a difference'* (Westhorp, 2014). A realist synthesis recognises that social systems are open, fluid, constantly evolving and adapting to changing conditions, making for a messy and complex social reality. The Sahiyo report takes a theoretical position that FGC is always unacceptable and introduces evidence to support this proposition. A realist-informed review allows for the introduction of research which helps to locate divergent theory and evidence in relation to core questions enabling a fuller examination of the multi-dimensions pertaining to this discussion.

Public discourse on quality evidence appears to favour the apparent certainty of evidence generated from RCTs (the 'gold standard' in the 'hierarchy of evidence' model such as the Maryland Scale). Whilst this method, when applied appropriately, offers strong evidence **that** an intervention works, it cannot tell us **why** it works (including the theories underpinning it) or whether it will work in different contexts, with different target groups and struggles with non-standardised and complex interventions (Nutley et al., 2012). A more suitable quality framework for this analysis is one employing a more inclusive understanding of evidence: a matrix approach which rates evidence quality generated by using a range of methods in relation to the research questions. *'A realist synthesis (or realist review - these terms are synonymous) applies realist philosophy to the synthesis of findings from primary studies that have a bearing on a single research question or set of questions. For each idea, reviewers seek out the contextual (C) influences that are hypothesized to have triggered the relevant mechanism(s) (M) to generate the outcome(s) (O) of interest.'* (Wong et al., 2013.)

Narrative review consists of critical analysis of the literature published in books and electronic or paper-based journal articles. However, this type of review does not describe the methodological approach that would permit reproduction of data nor answer to specific quantitative research questions.

'Narrative' synthesis' (Popay et al., 2006) refers to an approach to the systematic review and synthesis of findings from multiple studies that relies primarily on the use of words and text to summarise and explain the findings of the synthesis. Whilst narrative synthesis can involve the manipulation of statistical data, the defining characteristic is that it adopts a textual approach to the process of synthesis to 'tell the story' of the findings from the included studies. As used here 'narrative synthesis' refers to a process of synthesis that can be used in systematic reviews focusing on a wide range of questions, not only those relating to the effectiveness of a particular intervention.'

Starting from the analysis of gaps in the Sahiyo report, missing or misrepresented topics were identified as key themes for the data search. The key areas of literature were medical, human rights, anthropological, political and media narratives on FGC in the Dawoodi Bohra and other cultures that may provide comparison and/or a proxy, e.g. in Asia and about Types 1 and 4. In addition a set of orientation conversations and

meetings were held with men and women from the Dawoodi Bohra community who have challenged the Sahiyo report to understand the less publicised side of what we are now describing as a debate on FGC.

The search concentrated on existing literature and meta-reviews/analyses, then individual studies, and included searching bibliographies of relevant sources. Academic databases used included PsycINFO, PsycARTICLES, ERIC, Education Research Complete, Humanities International Complete, SOCIOLOGICAL ABSTRACTS, Social Science Citation Index (SSCI), Dissertation Abstracts International, JSTOR, SocINDEX, and British Library Main Catalogue. 'Grey literature' including newspapers, human rights websites, legal documentation, were sourced from a range of websites relevant to the topic area (national and local government, research organisations, think tanks, and voluntary and community sector).

The search criteria were broad and included the following:

Theme	Issues
FGC practice; evidence on impact of Type I FGC and IV Relevant literature from other Asian contexts	<ul style="list-style-type: none"> <li>• Psychological</li> <li>• Physiological</li> <li>• Cultural/social/economic</li> </ul>
Dawoodi Bohra culture and gender relations	<ul style="list-style-type: none"> <li>• Modernity</li> <li>• Women's lives</li> <li>• Religion and control</li> <li>• Intersection of religion, culture and modernity</li> </ul>
Human rights vs. cultural relativism Dawoodi Bohra practice and the campaign located in the broader human rights agenda	<ul style="list-style-type: none"> <li>• Media discourse</li> <li>• Feminist perspectives</li> <li>• Local and global political agendas</li> </ul>

### Stage 3: Consolidation: Force Field Analysis

The review of existing studies, data and other evidence has offered an opportunity to apply a brief Force field analysis provides a framework for looking at the factors (forces) that influence a situation. Understanding the forces or pressure for and against change helps to determine how progress can be made from often conflicting starting points. This was carried out as an iterative process, mapping the forces underpinning the debate that emerged from the evidence synthesis. The results of this exercise inform the final chapter and our suggestions for further work.

# Appendix 2: International classification of FGM (2007)

Female genital mutilation comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons (WHO, UNICEF, UNFPA, 1997) .

- **Type I** — Partial or total removal of the clitoris and/or the prepuce (clitoridectomy). When it is important to distinguish between the major variations of Type I mutilation, the following subdivisions are proposed:
  - **Type Ia**, removal of the clitoral hood or prepuce only;
  - **Type Ib**, removal of the clitoris with the prepuce.
- **Type II** — Partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (excision). When it is important to distinguish between the major variations that have been documented, the following subdivisions are proposed:
  - **Type IIa**, removal of the labia minora only;
  - **Type IIb**, partial or total removal of the clitoris and the labia minora;
  - **Type IIc**, partial or total removal of the clitoris, the labia minora and the labia majora.
- **Type III** — Narrowing of the vaginal orifice with creation of a covering seal by cutting and appositioning the labia minora and/or the labia majora, with or without excision of the clitoris (infibulation). When it is important to distinguish between variations in infibulations, the following subdivisions are proposed:
  - **Type IIIa**, removal and apposition of the labia minora;
  - **Type IIIb**, removal and apposition of the labia majora.
- **Type IV** — All other harmful procedures to the female genitalia for non-medical purposes, for example: pricking, piercing, incising, scraping and cauterization

# Appendix 3: Review of Sahiyo Report

## 1. Context

As a result of concerns about discrimination arising from the publication of 'Understanding Female Genital Cutting in the Dawoodi Bohra Community' (Sahiyo, 2017) representatives of the community requested an independent review by the Tavistock Institute of Human Relations (TIHR). The review represents stage one of a wider piece of research. TIHR provided an independent review which offers an impartial analysis of the study. TIHR will also be locating the Sahiyo research and other studies within a wider context of theoretical and practical debates pertaining to FGC.

## 2. Our Approach

This review has examined the following:

- the literature cited and identification of gaps in research
- the methodology and methods used for their appropriateness to the study
- the data presented
- the analysis of the findings
- the interpretation and conclusions and their consistency with the questions asked.

TIHR uses a quality assurance approach to research which identifies core criteria on which to determine the quality of individual studies. Our method has included the following stages:

- identification of three researchers to conduct the review covering key qualitative and quantitative skills as well as knowledge of the substantive area
- identification of key (standard) quality criteria
- three-way triangulation – each researcher created an independent review
- the three reviews were collated to identify congruence and divergence for further exploration.

This review provides a digest of key findings. It addresses the following areas:

- purpose and design of Sahiyo's research
- research ethics and how they have been addressed
- the literature review
- methods: their appropriateness and clarity of data collection and analysis
- reliability; validity and generalisability of the data

- the relationship between the presentation of the findings and the subsequent discussion.

Section 4 offers conclusions from this review and finally, section 5 considers further research requirements to provide a comprehensive understanding of the issues related to 'khatna' and the Dawoodi Bohra community.

## 3. Key findings from the review

Sahiyo's report provides an insight into the work of the organisation and the experience of women who participated in an online survey (the basis of the research). Sahiyo says: *'Our mission is to empower Dawoodi Bohra and other Asian communities to end female genital cutting and create positive social change through dialogue, education and collaboration based on community involvement.'*

Both Sahiyo and the report's principal author are open about the impetus for the research and that they advocate 'for the abandonment of the practice of 'khatna' or FGC'. It wishes to identify strategies that will end the practice of FGC in the Dawoodi Bohra community.

### a. The purpose and design of Sahiyo's research

**Definition of purpose:** the purpose of social research is understood to include exploration, description and explanation of a topic.

**Why this is important:** how the purpose is defined and presented may have a significant impact on the design of the research as well as the data collection, analysis and presentation. The purpose and objectives are where the reader returns to see if the research has achieved what it set out to do. Thus it is critical that the purpose and the drivers which sit behind it are clearly articulated. Empowerment and personal interest often provide the drivers for research and offer an important platform for learning. However, this presents a challenge to researchers where their beliefs and commitment may influence the research direction and interpretation of findings.

In the acknowledgements to the Sahiyo report (p.1), the main author is identified and is a co-founder of the NGO as well as a campaigner for the end of FGC in the Dawoodi Bohra community. The research is described as **exploratory** and the report states that:

*'The purpose of this research project is to understand the perceptions, beliefs and rationales of FGC among the global Dawoodi Bohra population.'* With an increase in migration, Sahiyo states that it is *'crucial to understand the cultural, ethical, mental, and physical aspects of FGC as they encounter it in practice.'* (p.9)

The aims and objectives of the study are set out as:

- *'To obtain credible statistics about the nature of Dawoodi Bohras who have undergone FGC and the numbers who continue to practice it.*
- *'To obtain objective data on the perceived harmful and/or beneficial physical, psychological and sexual effects of FGC.*
- *'To examine the various justifications given within the Dawoodi Bohra community to continue the practice of FGC.*
- *'To determine community-based interventions that can lead to the abandonment of FGC based on findings of the study.'* (p.9)

No distinction is made between an aim and an objective where the aim will describe the overall purpose and the objectives describe the activities or steps which need to be taken to achieve the aim. Additionally, here if the aim is synonymous with the purpose as outlined above, there is a mismatch between the two. The objectives clearly serve the purpose of generating data which will help determine what will lead to 'the abandonment of FGC'. However, as activities it is difficult to see how they would lead to achieving the stated purpose: *'understand the meaning behind the continuation of the practice of FGC'* (p.24). Less clear is how this relates to the objectives and to the design of the survey/survey questions.

**Definition of design:** design in social research is understood to provide a description of the overall approach or strategy. It includes the reasons for the design and makes links to the purpose of the study.

**Why this is important:** a description of the research design provides the key to linking purpose to data collection as well as offering understanding of why this approach rather than another was taken. The design makes explicit the chosen framework (e.g. quantitative, qualitative or mixed methods) and how those decisions were arrived at. This usually includes a pilot of the study in order to assess the appropriateness of and adapt the research design. Design and its limitations need to be explicit.

The report does not provide a dedicated discussion of research design. However, the creation of the questionnaire and its limitations are provided (pp. 24, 27). This section needed to include a description of and rationale for the design (an online method was selected based on known Dawoodi Bohra use of the internet) as well as alternative or additional approaches, e.g. a qualitative study to help determine the content of the survey or to examine the survey findings in more depth.

A pilot study was carried out prior to finalising the research and to test for reliability and validity of the instrument. Sahiyo invited FGC experts and other NGOs to read through the set of questions to assess for bias and to make sure the questionnaire was a culturally acceptable tool for the exploratory study (p. 24). The main author's Master's thesis also provided a source of questions. The design cannot be claimed to be unbiased given the pilot group.

## b. Research ethics and how they have been addressed

**Definition of research ethics:** to describe research as high quality, it needs to meet a high ethical standard<sup>6</sup>. Research sets out to maximise the benefit of learning while minimising the potential risk of harm throughout the 'life-cycle' of the study.

**Why this is important:** in order to demonstrate the quality of the research, consideration of ethics (and sometimes formal review) is essential. This also needs to be explicit and research design, as well as reports, need to discuss how they will/have addressed ethical issues.

The Sahiyo report provides a welcome discussion of ethics and confidentiality (p. 25). This refers to the potential risk of harm; the freedom to withdraw and how confidentiality and anonymity were addressed – all core ethical issues for any research. However, there are a number of areas where the report needed to be more discursive in order to describe the issues and demonstrate what steps were taken to ensure the integrity of the research. These areas include the following:

- **Risk of harm:** the report says that there *'were no physical or psychological risks related to this study'* (p. 25) but acknowledge that there *'was the possibility that some questions would make participants feel uncomfortable'*. The email invitation to participate (Appendix B, p. 93) further acknowledges the sensitivity of the subject often not spoken about and hence the importance of the research. Given this and that some women, through the survey and other ways they have talked about their lives, described having had harrowing experiences – the psychological risk may be higher than assumed. This is not to rule out the research but explore what else can be put in place to support participants, e.g. a contact name (none given in the email invitation or the information at the beginning of the survey) and links to support agencies including those that support women who have been through FGC.
- **Inconsistency between purpose and objectives:** the study has objectives that establish, a priori, a context where FGC is detested by Dawoodi Bohra women and it is oppression that stops them from speaking out. Thus the research does not meet its purpose as an exploratory study of the cultural context despite the statement *'the outcome of this research is focused on understanding the nature of this practice within the community, thereby contributing knowledge to the field of gender violence, public health, and social work'* (p.8).
- **Participant information:** the invitation letter to participants (p. 93) says that this was 'graduate' research of a friend/colleague of the letter's author. This is not stated elsewhere and does have ethical implications in terms of transparency (no name is given only an info@email address, confidentiality (not clear who is seeing the research) and possible support – for the researcher from, e.g. a supervisor or for participants who are affected by the topic. The pre-questionnaire research description needed more information including a précis of the objectives in addition and to clarify that *'the purpose is to understand the extent, purpose and impact of khatna'* (p. 84).

<sup>6</sup> RC <http://www.esrc.ac.uk/files/funding/guidance-for-applicants/esrc-framework-for-research-ethics-2015/> (accessed 25.05.17)

- **Methodology:** appropriate design and methods are cited as important when considering the quality of research. This review raises a concern about the design and the content of the questionnaire in relation to the findings. While it is not always possible to control the use of findings, it can be unethical to allow their publication in context free situations.
- **Researchers and the pilot:** many campaigning organisations carry out research with the explicit purpose of supporting a cause. The research can still be of high quality and ethical in approach. Here the report is clear about the main author (an anti-FGC American campaigner), the nature of Sahiyo and the group involved in piloting the questionnaire. All of these raise questions about the independence of the research and thus the integrity of the findings. This is particularly concerning where others use the findings, e.g. press and media.

### c. Wider framing through the literature review

#### Definition of a literature review:

Key reasons for a literature review in research are to:

- position the research
- map the field
- ensure the study is up to date
- consider methods others use
- see if suitable comparisons can be made

Key steps are typically:

- framing a research question
- searching relevant bodies of literature
- managing search results
- synthesizing the research literature
- writing an assessment of the literature

There are different types of literature review for different purposes or to assess different types of evidence with particular criteria. For example, a narrative literature will often be used to assess studies in a field that may be less developed where 'promising practice' is suggested whilst a systematic review typically hierarchizes types of study (prioritising randomised control trials) and uses a pre-determined set of criteria to evaluate the evidence.

#### Why this is important:

The literature cited in the report provides an important contextual framing for the key messages and influences the way in which the findings are interpreted. The literature is not contained in one section but scattered through the report. Particularly confusing is that new literature is introduced in the conclusion section. The study claims that '*an extensive review of literature focusing on multiple facets of Female Genital Cutting (FGC) was conducted*'. However, there is no methodology for a literature review outlined.

#### Discussion of themes and gaps in the literature:

There are three key themes apparent in the literature cited in the Sahiyo report:

- Dawoodi Bohra FGC practice and other evidence on impact of Type I FGC
- Dawoodi Bohra culture and gender relations
- FGC discourse: human rights vs. cultural relativism

Each theme is discussed below outlining gaps or potential bias in the way the literature has been chosen. Finally, areas of evidence are highlighted that would assist in the understanding of the Dawoodi Bohra FGC practice and the wider socio-political context that the current issue is being framed within.

#### Dawoodi Bohra FGC practice and other evidence on impact of Type I FGC

The section on literature review in the Sahiyo report concludes that opposed to '*a plethora of academic papers about FGC as it occurs in Africa and in Western societies where African immigrants from FGC practicing countries are settled*' there is '*a dearth of knowledge about the physical, psychological, and sexual ramifications of Type I FGC as it is performed amongst the Dawoodi Bohras*' (p. 11). This statement assumes that FGC in the tradition of this community would be classified as Type I. There is no evidence to support this conclusion.

An initial scan of the published literature confirms this position. This, however, brings into question the appropriateness of outlining the cross-cutting findings of the impacts of FGM/FGC which are based on studies of Type II, Type III and Type IV FGC in largely African populations. This in particular pertains to the sections: 'Justifications Given for FGC' and 'Physical Consequences of FGC'.

The studies that are cited that provide insights into Type I, Asian context FGC and Dawoodi Bohra FGC, are selectively quoted. The Sahiyo report summarises the studies of Ghadially (1991) and Srinivasan (1991) in the following way:

*'The information that does exist regarding harmful medical complications of the least severe forms of FGC comes from anecdotal evidence and small-scale case studies. These reports cite bleeding, pain, discomfort, burning sensation while urinating, swelling, and infection as short-term complications. Long-term effects are cited as partial or total absence of sexual arousal during intercourse, fear of intimacy and the act of sex, as well as psychological concerns such as post-traumatic stress disorder, depression and anxiety (Ghadially, 1991 and Srinivasan, 1991).'*' (p. 16 Sahiyo report.)

Although the studies are described as 'anecdotal and small-scale', the citation description is a misleading portrayal of the actual studies. Although there may indeed be negative implications the studies actually describe limited evidence of negative health and psychological impacts:

1. Ghadially (1991) said that 'unlike the more severe forms of circumcision, the least drastic form **has neither serious health nor reproductive repercussions**. In my own sample the most common complaint was the girl's difficulty in discharging urine. **According to one Bohra doctor, there have been cases of infection, swelling, severe bleeding, shock, tetanus.'**

### Dawoodi Bohra culture and gender relations

The Sahiyo report brings to the reader's attention the following cultural elements:

Progressiveness:

*'The Dawoodi Bohras also stand out because of their distinct attire, their food and their reputation as a largely wealthy and well-educated community.'* (p.7)

*'In western India, Dawoodi Bohras are known for having a more "progressive" attitude towards women – most Dawoodi Bohra women are educated, work in various professional fields and are also known to run home-based businesses even if they do not work outside.'* (p.7)

The Sahiyo report cites the work of Jonah Blank (2001), outlining the outward looking progressiveness of the culture and in particular the way in which technology is embraced. However, this point is not developed or problematized in relation to the claimed prevalence of FGC in the community. Studies on female emancipation or empowerment in Dawoodi Bohra are not cited, e.g. Ghadijally (1994) on the rise of educational attainment for women of the culture; Ghadijally (2001) on the importance of pilgrimages for women as spaces to develop business and social networking opportunities; or Pio (2010), on women's spheres of influence in a modern diaspora context.

An important contextualising point that could be developed from this literature is that the culture, although reserved and conservative, is also outwards looking, progressive and embracing of change including change for women. Women's power is extended through pilgrimages which present opportunities for business development and social networking. Thus it appears that there is likely to be a rather more complex picture regarding the intersections of religion, culture and modernity which the concept of 'Izzat' (family honour which is linked to FGC) intersects. These more subtle points will lead to more productive lines of inquiry.

### Religious control

The discussion on progressiveness above has already highlighted religion as a vehicle of progress not a contradiction. The Sahiyo report puts forward the idea that religion and tradition are more aligned, for example:

*'In Ghadijally's study, the most commonly cited reasons for practicing khatna were that it is a religious obligation, a tradition, and that it curbs a girl's sexuality (1991).'* (p. 67)

*'amongst Dawoodi Bohras, FGC is often considered to be an unspoken tradition mandated by the religious clergy.'* (p. 14)

A more rigorous examination of the literature in conjunction with consultation of experts could reveal a more nuanced understanding of the role of religion in relation to women's lives and how this is linked to local, national and global ethnic politics. For example, Khan concludes that *'restrictions imposed on Muslim women by their own community are closely linked to the exclusion of the Muslim community as a whole'* (Khan, 2007).

It appears that Ghadijally's work is selectively cited to suit the campaigning stance of Sahiyo - that the religious hierarchy is enforcing FGC. For example, Ghadijally's study referred to in the report points out that according to the cutter interviewed *'Because of this practice, Bohra women, unlike other Muslim women, are permitted in cemeteries, mosques and can touch the stone of Kaaba in Mecca.'* When linked to the study on pilgrimages, this places the FGC issue in a very different dynamic to a 'tradition' opposed to women's progress.

### Human rights vs. cultural relativism

This theme runs throughout the report and remains ambiguous. The author(s) claim they are uncommitted to either episteme. Instead, the arguments are externalised in a discussion of 'Interventions Used to End FGC' and there is an absence of positioning of Sahiyo's objectives within these discourses. Sahiyo thus presents a polarised debate where FGC can only be understood in terms of a human rights abuse or a cultural practice of which an outsider objection can only be considered as racist/ethnocentric/orientalist. Taking either position closes entry into the complex international system in which debates around FGC are being played out.

Key here is the absence of a discussion of power that is won and lost in the interface of race, ethnicity, class, and gender politics. There is a wide range of literature, particularly from anthropology, from veiling to FGC that describes the use of human rights discourse as a neo-colonial device to impose western values in the name of rescuing women. Framing the issue within the current religious/political local, national and global picture for the Dawoodi Bohra is an important part of understanding the cultural dimensions of FGC and the implications of research/campaigns that, once published, become influential in social policy, law and media discourse.

We believe that overall the Sahiyo report falls short of contributing to a cultural understanding of FGC in this community. It fails to evaluate or position itself in relation to the WHO current policy of understanding FGC in its context and the need for cross-cultural dialogue. We argue for an inter and intra-cultural dialogue approach to this issue, that there is no one voice on the issue of FGC in Dawoodi Bohra, there is no one 'traditional view' or a 'woman's view'. The position of anthropologist Abu-Lughod on veiling provides a useful approach to a study of FGC in the Dawoodi Bohra communities, saying *'I argue that rather than seeking to "save" others (with the superiority it implies and the violences it would entail) we might better think in terms of (1) working with them in situations that we recognize as always subject to historical transformation and (2) considering our own larger responsibilities to address the forms of global injustice that are powerful shapers of the worlds in which they find themselves.'* (Abu-Lughod, 2008.)

Overall the literature cited in the study is relevant but presented in a disorganised way, often creating confusing and contradictory messages.

#### d. Methodology: methods appropriateness and clarity of data collection and analysis

**Definition of methodology:** methodology typically describes the overarching approach to a study, e.g. quantitative or qualitative. Within this, methods are the specific activities associated with the research.

**Why this is important:** the methodology reflects a position on the nature of knowledge and what counts as evidence. The subsequent selected methods of data collection and analysis are critical to the credibility and integrity of research. These need to be 'fit-for-purpose' and justified in any report.

The Sahiyo report says that an online method of data collection was deemed appropriate with reference to Blank (2001) who described the culture as an example of Islam and modernity. Reflection on the choice of method (an on-line survey sent to a snowball sample) could have included further review of what other research approaches have been taken in the FGC arena. Using surveys provides an opportunity to include people in distanced geographical locations and snowballing offered a pragmatic way to contact women.

The report provides a clear description of the selected method, the sampling strategy and recruitment process (pp. 24, 25). Using key contacts (those willing to start the process) and a snowball sampling method was likely to have been the only way an online survey could be promoted. The preference for an on-line survey could have been further substantiated and why this was selected compared to other methods including a mixed-method design. It is likely also to have resulted in bias as noted in the report and therefore the findings needed to be caveated.

The method of data collection and subsequent analysis were fit-for-purpose given that the research was carried out by and for a campaigning organisation. However, the approach and the method also raise a number of methodological issues as follows:

- **External or internal researchers** have an impact on the methodology and the research outputs and outcomes. External, independent researchers would have provided a more neutral starting point and base for this study.
- **Sampling** for this study was inevitably biased. Ideally, a random sample or a sample representative of all Dawoodi Bohra women would have been used to create stronger findings. Clearly this was not possible. The implications are that the findings should always be presented in context as they are accessible in the public domain.
- The **survey design** and specifically, some **questions** are problematic. The order of the questions asks first for respondents to think about their experience (the pain they went through and the impact on their life), second to consider if they would do the same to their daughter and then finally to say if they want the practice to continue. This order may have influenced how some respondents answered. Most questions were descriptive. However, two questions with negative/positive responses (Q24, Q29) may have been leading as illustrated below.

Q29) *What would your Dawoodi Bohra relatives and friends think if they knew a Dawoodi Bohra woman had not undergone khatna?*

The question is already asked in a negative way 'had **not** undergone khatna' and it is likely that respondents would prefer negative answers.

They would think nothing of it	negative
They would be very surprised	negative
They would be upset	negative
They would not want that woman to marry their son	negative
They would think that the woman was unclean	negative
They would think that the woman is not a true Dawoodi Bohra	negative
We don't discuss khatna	positive
I don't know	neutral
Other	neutral

- Triangulation would be possible between open and closed questions. For example open-ended responses to Q28 could be used to check responses to Q27. Potentially, also Q22 which provides details that appear in Q23 or Q24.
- The survey attracted only **women who have internet access**, IT literacy and English language thus findings can only be applied to this group of women. The questionnaire was not translated into other languages (p. 24) although some respondents answered open-ended questions in Gujarati or Lisan-al-Dawat. Offering a translated questionnaire administered in other ways would have widened participation.
- The **survey findings** could have been explored in more depth through interviews, i.e. women could have been invited to a follow-up discussion - although this would be subject to the same concerns about bias.
- The **qualitative data analysis** was carried out using Word. Other software, e.g. NVIVO, might have offered a more sophisticated and nuanced approach to this aspect of the research.

In terms of the data, it is unlikely that any further analysis would be appropriate because of the limitations due to the level of measurement of most closed questions and the nature of the study. Further analysis of the open-ended questions would require translation as some respondents completed the questions in Gujarati or Lisan-al-Dawat. However, it would be helpful to carry out the following:

- **Double-checking some of the percentage figures** from the raw data as there are mistakes in the presentation of findings.
- **Checking for anomalies in the data-set**, e.g. checking if participants have answered the questions consistently by comparing responses to various survey questions.

- **Revisiting the analysis** where the report says that chi-squared and Fisher's exact tests were performed (p. 27) but no statistical results are reported in the key findings section of the report (e.g. p.37). In some cases, it is simply reported whether or not a significant association between two variables was found. There is also no general statement about which questions were used to test for differences.
- One further step could be to perform **logistic regressions** for key questions. While chi-squared tests assess relationship between two variables (e.g. Q7 - Current religion and Q35 - Khatna Continuation in the Community), logistic regression examines if there are one or more variables that predict the response to another (mostly binary) variable (e.g. Q35: Khatna Continuation in the Community). Rules apply to the number of predictor variables that can be included in one logistic regression.

The overall presentation of the findings would have been improved by using the quantitative and open ended data together in such a way that the open ended is illustrative of similarity or difference in the broader findings. There are also a number of gaps in the analysis and mistakes in the reporting. This makes it difficult to assess the findings. More specifically, the following illustrate inconsistency and questions about the data:

- **Incorrect presentation of findings:** One example is Q2 - Education Level. The report states that 80% of the respondents have at least a bachelor's degree (p. 30). The figure on the same page shows that 37% only have a primary/middle school degree. These two findings are inconsistent.
- **Mismatching sample size:** In some cases it is not clear what subgroup of the sample answered particular questions. As an example the figure corresponding to Q18 – Taken out of country (p. 42) shows that 385 participants answered this question, however only 309 respondents had undergone FGC (p. 37).
- **Misleading presentation of results:** As some questions are only answered by a subgroup of respondents it would be helpful to report absolute frequencies in addition to relative frequencies. For example Q28 is only answered by respondents who had undergone FGC and reported an impact on their sexual life. According the text above the table on p.52, 83 participants responded to this question while the table shows that 38 provided details in relation to question 28. 'Heightened physical stimulation' is reported by 83% of this subgroup as apparent from the table on p. 52 which equates to 69 or 31/32 respondents. Applied to the total survey sample these represent only 18% or 8%.

## e. The reliability; validity and generalisability of the data

### Definition of reliability, validity and generalisability:

these three concepts need to be considered and are essential to demonstrating confidence in a research study's findings. According to Denscombe (2014), these are defined as follows:

**'Reliability:** *relates to the methods of data collection and the concern that they should be consistent and not distort the findings. It refers to the ability of a research process to provide results that do not vary from occasion to occasion and that do not vary according to the particular persons undertaking the research.*

**Validity:** *this concerns the accuracy of the questions asked, the data collected and the explanations offered. Generally it relates to the data and the analysis used in the research. It refers to the quality of data and explanations and the confidence we might have that they accord with what is true or what is real.*

**Generalisation:** *Do the findings from this specific piece of research apply more generally to other comparable situations? (Concerns include) the empirical matter of how far the characteristics of the people, events or data chosen for the study are to be found elsewhere through-out the class of thing being studied. The second reason centres on the researcher's wish to produce generalized knowledge in the form of theories.'*

**Why these are important:** the credibility of any research is linked to the reliability and validity of the data as well as, in some instances, how far the findings can be generalised to wider populations. They provide key criteria for determining the quality of research and as such need to be reflected on within the report.

There are specific ways in which the research is compromised and cannot be used for generalisation, as follows:

- The sample of experts invited to pilot the questionnaire is likely to have compromised the reliability and validity of the research. The report does not provide information about what proportion of the population the sample represents and it is difficult to draw conclusions from the data that can be applied to all Dawoodi Bohra women. Piloting of the questionnaire would have been helped by involving people who are not necessarily expert in or connected to the topic of study in order to ensure that the tool is understood and unbiased in, for example, question wording.
- The sample is not representative of the Dawoodi Bohra community. Nearly one third (31%) did not consider themselves part of the community and the major part (66%) resided outside India where the community is concentrated.

Sahiyo's report provides a discussion of the limitations (p. 26) of the survey including (and as also noted in 2.4 above) the snowball method of recruitment; the restrictions of language and internet access and thus excluding women from lower income groups. However, there is no subsequent discussion of how these limitations impacted on the data analysis and presentation of findings. **This has resulted in selective and misleading reporting in the media**, for example in the Hindu and Times of India.

## f. The relationship between the presentation of the findings and the subsequent discussion

Sahiyo's report concludes with a discussion of the findings in the context of other existing research. Some of these references have not been noted in the literature review which would have been helpful. The discussion acknowledges that there is a paucity of evidence related to FGC and specifically the Dawoodi Bohra community and what there is has been limited to very small scale research in addition to Ghadijally's study involving 50 women in interviews. This presents a challenge when examining how far and in what ways, and with confidence, the findings can be seen to corroborate other research.

A number of critical issues are raised in the discussion which go some way to help address the research's overall purpose of gaining understanding of FGC within the Dawoodi Bohra community, e.g. where the data provided examples of how FGC practice 'can become highly valued by some members of the community and thus strongly protected' (p. 67). However and in addition to using the open-ended data differently, the discussion relies on evidence from other studies which corroborates Sahiyo's findings or helps to fill some of the gaps in their research. In some instances it is not clear how the findings have led to a conclusion, for example, about the need (which may well exist) for support services (p. 65).

Under the heading Narrative Elements of the FGC Survey (p. 62), a substantial proportion of this final section is given to the presentation of research findings from the open-ended questions in the Sahiyo survey. As findings, these would have been more helpful if triangulated with the survey data. For example, p. 49 provides the response to Q25 with the post-coded data on p. 50 but lacking the case on p. 64. The narrative provides an illustration of what women said about the emotional impact of FGC. Presented separately, there is a risk that the one 'case illustration' may appear to have greater weight and be used out of context.

## 4. Conclusions from this review

This review set out to provide an independent response to the Sahiyo research on FGC and the Dawoodi Bohra community. Using a systematic, quality-criteria based approach, the review has examined the research design, methods, analysis and presentation of findings. In conclusion, the review has identified the following:

- The Sahiyo report has opened the discussion on FGC within the Dawoodi Bohra community. However, this has not been on their own terms and may have been at the cost of discrimination as well as creating a defensive position.
- The research design, methodology and methods of sampling and data collection have resulted in findings which are biased towards the beliefs and purposes of Sahiyo as a campaigning organisation. In and of itself, this may not be problematic but in an area of such sensitivity and opportunities for information to be taken out of context, it opens the way to misunderstanding and misrepresentation.

- Issues with the methodology have ethical implications on the basis that 'good' research, i.e. which meets a set of commonly-agreed criteria, is ethical. Here, the review raised questions about possible sources of bias; transparency and in recognition of possible harm to participants.
- Questions about the independence of the research and thus the integrity of the findings are of particular concern where others use the findings, e.g. the press and media, out of context.
- The research is not as robust as it could, or needs, to be. This is evidenced in the design, sampling methods, and the questions asked which do not directly address the purpose of the study.
- Within a number of caveats, the data would have benefitted from further and different analysis to understand the results of the survey and what conclusions can be drawn.
- The chosen use of literature is not transparent or complete. Specifically literature has been selected which supports a view that religious control is upholding FGC as a tradition and women are opposed to this. In addition, the relative value of literature cited is not made clear, e.g. newspaper articles and studies of African FGC contexts. There are gaps where wider literature could situate the nuances of the cultural, religious and political context in a way that would be genuinely exploratory and set the scene for dialogue.

## 5. Further research

*'Conclusions made in this report are best considered as suggested trends that warrant further research and more sophisticated data collection techniques.'* (p. 27)

Based on Sahiyo's report and studies they cite here, there is clearly a strong argument for further research. On the basis of this review, the report would have benefitted being part of a group of studies which include:

- **A realist synthesis** of the research, grey literature and key experts.
- **Independent qualitative research** with women and men, cutters and medical professionals to explore in-depth questions about cultural understanding; how FGC is perceived; and how issues raised need to/can be addressed.
- **Independent survey** of Dawoodi Bohra women, cutters and medical professionals ideally based on a representative or random sampling method.
- **Participatory research/action learning or dialogue events** to learn from the findings and foster wider understanding of the issues.

# Appendix 4: Media analysis

Searched by year/country/FGC/Khatna

Colour coded content:

- Red** = to portray Dawoodi Bohra women as victims and the culture as secretive and barbaric
- Grey** = to report on the politicisation of the issue in the leadership
- Green** = to contextualise the practice in the wider global debate
- Orange** = to conflate all forms of FGC and report Sahiyo findings uncritically

Media name	Date	Coverage	Content
<b>India</b>			
<b>Hindustani Times</b>	17 April 2017	<a href="https://web.archive.org/web/20170417023611/http://www.hindustantimes.com/static/fgm-indias-dark-secret/">https://web.archive.org/web/20170417023611/http://www.hindustantimes.com/static/fgm-indias-dark-secret/</a> Harinder Baweja	Interviews with women from DB community who were 'petitioners' of Anti-FGC. Language of women as victims. 'Tradition is not easy to slay. Slaying young girls is easier.'
<b>The News Minute</b>	9 Feb. 2017	<a href="http://www.thenewsminute.com/article/it-scarred-me-life-dawoodi-bohra-women-speak-out-trauma-female-genital-cutting-57050">http://www.thenewsminute.com/article/it-scarred-me-life-dawoodi-bohra-women-speak-out-trauma-female-genital-cutting-57050</a>	Personal stories and Sahiyo findings. Misleading statements: 'For a significant portion of women subjected to khatna, sexual pleasure becomes difficult and elusive to achieve'
<b>Times of India</b>	29 April 2016	<a href="http://timesofindia.indiatimes.com/city/mumbai/Bohra-cleric-urges-female-genital-mutilation/articleshow/52031699.cms">http://timesofindia.indiatimes.com/city/mumbai/Bohra-cleric-urges-female-genital-mutilation/articleshow/52031699.cms</a>	Syedna (Trad) speech does not say but implies and was open to interpretation. Comments where people pleased that khatna made illegal in US but confused by the leader.
<b>The Hindu</b>	7 Feb. 2017	<a href="http://www.thehindu.com/news/cities/mumbai/Dawoodi-Bohra-women-say-%E2%80%98no%E2%80%99-to-female-genital-mutilation/article17206136.ece">http://www.thehindu.com/news/cities/mumbai/Dawoodi-Bohra-women-say-%E2%80%98no%E2%80%99-to-female-genital-mutilation/article17206136.ece</a>	Reports on Sahiyo research findings balanced with comments from a community member re bias/skewed sample. However, the report also describes the procedure as Type I unquestioningly and frames the arguments to read as women from the community support a ban on FGM.
<b>Mid-day.com</b>	17 May 2016	<a href="https://web.archive.org/web/20160626061233/http://www.mid-day.com:80/articles/i-unequivocally-condemn-fgm-syedna-fakhruddin/17241182">https://web.archive.org/web/20160626061233/http://www.mid-day.com:80/articles/i-unequivocally-condemn-fgm-syedna-fakhruddin/17241182</a>	Syedna Taher's response to FGM (anti). Illustrating the local ethnic politicisation of the issue.
<b>Mid-day.com</b>	7 Feb. 2017	<a href="https://web.archive.org/web/20170514033413/http://www.mid-day.com/articles/syedna-taher-fakhruddin-first-interview-dawoodi-bohra-dispute-mumbai-news/17972160">https://web.archive.org/web/20170514033413/http://www.mid-day.com/articles/syedna-taher-fakhruddin-first-interview-dawoodi-bohra-dispute-mumbai-news/17972160</a>	Interview with Syedna Taher (leader) speaking about split between two factions and anti-FCG (as above)
<b>Indian Express</b>	17 May 2017	<a href="http://indianexpress.com/article/explained/understanding-female-genital-mutilation-the-practice-and-the-issues-fgm-4659216/">http://indianexpress.com/article/explained/understanding-female-genital-mutilation-the-practice-and-the-issues-fgm-4659216/</a>	Discussion of FGM/WHO types, where practiced and impact. Conflates the impacts of all types: <i>'The inhuman practice of female genital mutilation (FGM) — seen in parts of Asia and Africa, including among the 2 million-strong Bohra community in India — is currently in sharp focus worldwide.'</i>

Media name	Date	Coverage	Content
<b>India</b>			
India Today	9 May 2017	<a href="http://indiatoday.intoday.in/story/supreme-court-female-genital-mutilation-muslims/1/949121.html">http://indiatoday.intoday.in/story/supreme-court-female-genital-mutilation-muslims/1/949121.html</a>	Petition to supreme court to make FGM illegal based on DB practice. Various ministries in several states asked to comment and case will be heard after summer vacation. Factual reporting on process and details.
<b>UK</b>			
BBC	14 April 2017	<a href="http://www.bbc.co.uk/news/world-us-canada-39597062">http://www.bbc.co.uk/news/world-us-canada-39597062</a>	Report of US case ' <i>But prosecutors said she had performed "horrifying acts of brutality on the most vulnerable victims"</i> .' Strongly privileging the voice of the trial.
Guardian UK	18 Mar. 2016	<a href="https://www.theguardian.com/society/2016/mar/18/three-sentenced-to-15-months-in-landmark-female-genital-mutilation-trial">https://www.theguardian.com/society/2016/mar/18/three-sentenced-to-15-months-in-landmark-female-genital-mutilation-trial</a>	Report of Australia case.
Independent UK	16 May 2017	<a href="http://www.independent.co.uk/life-style/health-and-families/how-different-are-female-male-and-intersex-genital-cutting-fgm-circumcision-a7738016.html">http://www.independent.co.uk/life-style/health-and-families/how-different-are-female-male-and-intersex-genital-cutting-fgm-circumcision-a7738016.html</a>	<p>Interesting piece on perspectives and impact of making FGC illegal.</p> <p>"In other words, what happens when moral considerations centre around medical necessity, autonomy, and respect for the bodily integrity of all children – regardless of their sex or gender? We see three practical advantages to this approach:</p> <ol style="list-style-type: none"> <li>1. It deflects accusations of sexism by recognising that boys and intersex children – just like girls – are vulnerable to genital alterations that they may later come to seriously resent.</li> <li>2. It reduces the moral confusion that stems from Western-led efforts to eliminate only the female "half" of genital cutting rites in communities that practice both male and female forms in parallel.</li> <li>3. It neutralises accusations of cultural imperialism and anti-Muslim bias by avoiding racially tinged double standards.</li> </ol> <p>This is because the same moral concern would apply to medically unnecessary genital cutting practices that primarily affect white children in North America, Australasia and Europe, as to those affecting children of colour (and immigrants) from Africa, the Middle East and Southeast Asia."</p> <p><i>Rebecca Steinfeld is a visiting research fellow at Goldsmiths, University of London; Brian D Earp is an associate director of the Yale-Hastings Programme in Ethics and Health Policy at Yale University</i></p>
Daily Mail	2 Aug. 2016	<a href="http://www.dailymail.co.uk/news/article-3719294/Battle-tiny-Indian-Muslim-sect-circumcising-girls.html">http://www.dailymail.co.uk/news/article-3719294/Battle-tiny-Indian-Muslim-sect-circumcising-girls.html</a>	Example of the ethnic politics. Circumcision has become a battleground for the two Dawoodi Bohra men vying for succession, the half-brother and the son of the former Syedna. The half-brother says it is time to end the practice. The son, whom most Dawoodi Bohras accept as their new leader, says the tradition must continue and notes that Bohra men are also circumcised. He declined to comment, but laid out some of his views in an earlier speech.

Media name	Date	Coverage	Content
<b>USA</b>			
<b>New York Times</b>	10 June 2017	<a href="https://www.nytimes.com/2017/06/10/health/genital-mutilation-muslim-dawoodi-bohra-michigan-case.html?hp&amp;action=click&amp;pgtype=Homepage&amp;clickSource=story-heading&amp;module=second-column-region&amp;region=top-news&amp;WT.nav=top-news">https://www.nytimes.com/2017/06/10/health/genital-mutilation-muslim-dawoodi-bohra-michigan-case.html?hp&amp;action=click&amp;pgtype=Homepage&amp;clickSource=story-heading&amp;module=second-column-region&amp;region=top-news&amp;WT.nav=top-news</a>	Report about woman who went public when case emerged. Report is balanced and nuanced reflecting a range of feelings and responses from women in the community.
<b>Metro Times Detroit</b>	22 April 2017	<a href="https://www.metrotimes.com/news-hits/archives/2017/04/22/muslim-sect-known-for-female-genital-mutilation-responds-to-charges-against-local-docs">https://www.metrotimes.com/news-hits/archives/2017/04/22/muslim-sect-known-for-female-genital-mutilation-responds-to-charges-against-local-docs</a>	Reporting on the US case/arrests.
<b>Detroit Free Press</b>		<a href="http://www.freep.com/story/news/local/michigan/wayne/2017/06/25/genital-cutting-victims-get-backlash-condemning-taboo-ritual/375712001/">http://www.freep.com/story/news/local/michigan/wayne/2017/06/25/genital-cutting-victims-get-backlash-condemning-taboo-ritual/375712001/</a>	Fairly in depth and multi-perspective report. Women who spoke out say been excluded/looked on badly by DB. DB accused of attacking women.  According to Dariwala, the movement to ban genital mutilation in India seemed to gain momentum following a declaration last month by India's Women & Child Health Ministry that the practice is illegal and should be banned in India. However, she said, the government official has since met with Bohra religious leaders and said the government has decided to handle this sensitive issue on its own.  <i>"Needless to say, we are not very hopeful on the outcome of this promise now. There is serious doubt of any legal ban on FGM coming through in India, with the recent developments on the legal front," Dariwala said, noting pressure to preserve genital mutilation is coming from all over. "It's not the just the Bohra community in India, but from all over the world, who have come together to fight for their rights to practice their religious beliefs. Herein lies the biggest problem."</i>
<b>CNN</b>	11 May 2017	<a href="http://edition.cnn.com/2017/05/11/health/fgm-us-survivor-stories-trnd/index.html">http://edition.cnn.com/2017/05/11/health/fgm-us-survivor-stories-trnd/index.html</a>	Brings DB story together with other communities – African and white Christian. DB tell members not to break law clearly.
<b>Australia</b>			
<b>Scroll in</b>	11 Feb. 2016	<a href="https://scroll.in/article/803391/stop-female-circumcision-dawoodi-bohra-authorities-tell-community-members-in-australia">https://scroll.in/article/803391/stop-female-circumcision-dawoodi-bohra-authorities-tell-community-members-in-australia</a>	Clear statement from DB to not do Khatna and not take girls out of the country.
<b>Daily Telegraph</b>		<a href="http://www.dailytelegraph.com.au/news/nsw/female-genital-mutilation-muslim-sect-leader-sent-to-jail-in-legal-uturn/news-story/ae225721093731c77a7964cb0c61d827">http://www.dailytelegraph.com.au/news/nsw/female-genital-mutilation-muslim-sect-leader-sent-to-jail-in-legal-uturn/news-story/ae225721093731c77a7964cb0c61d827</a>	Coverage of prosecution.
<b>Other</b>			
<b>Al Jazeera</b>	7 Mar. 2016	<a href="http://www.aljazeera.com/indepth/features/2016/02/fighting-female-genital-mutilation-india-bohra-160225093408129.html">http://www.aljazeera.com/indepth/features/2016/02/fighting-female-genital-mutilation-india-bohra-160225093408129.html</a>	Anti-FGM report very strong anti-FGM sentiments. Pictures of DB women in traditional dress. Portrayal of women as victims. Uses the Sahiyo survey findings to establish prevalence.

# Appendix 5: References

- Abu Lughod, L. (2008). *Do Muslim Women Really Need Saving? Anthropological Reflections on Cultural Relativism and Its Others* AnthroSource
- Abdulrahim, A. R. & Sharifa, A. A. (2010). *Sexual function in women with female genital mutilation*. *Fertility and Sterility* pp. 722 – 724
- Arora, K.S and Jacobs, A. (2015). *Female Genital Alteration - A Compromise Solution* *Journal of Medical Ethics* 42(3) January
- Bell, K. (2005). *Genital cutting and Western discourses on sexuality*. *Medical anthropology quarterly*, 19(2), pp. 125 – 148
- Berg, R. C., Denison, E. (2012). *Does Female Genital Mutilation/Cutting (FGM/C) Affect Women's Sexual Functioning? A Systematic Review of the Sexual Consequences of FGM/C*. *Sexuality Research and Social Policy*. Vol. 9(1), pp 41 – 56
- Berg, R. C., Denison, E. (2013). *A Tradition in Transition: Factors Perpetuating and Hindering the Continuance of Female Genital Mutilation/Cutting (FGM/C) Summarized in a Systematic Review*. *Journal Health Care for Women International*. Vo 34(10). Pages 837 – 859
- Berg, R. C., Underland, V. (2013). *The Obstetric Consequences of Female Genital Mutilation/Cutting: A Systematic Review and Meta-Analysis*. *Obstetrics and Gynecology International*. Vol 2013. pp. 1 – 15
- Berg, R. C., Denison, E., Fretheim, A. (2010). *Psychological, social and sexual consequences of female genital mutilation/cutting (FGM/C): a systematic review of quantitative studies*. Report by Kunnskapssenteret (Norwegian Knowledge Centre for the Health Services)
- Berg, R.C., Underland, V., Odgaardjensen, J. et al. (2014). *Effects of female genital cutting on physical health outcomes: a systematic review and meta-analysis*. *BMJ Open* 2014; 4: e006316. doi:10.1136/bmjopen-2014-006316 Downloaded from <http://bmjopen.bmj.com/> on August 14, 2017 - Published by group.bmj.com
- Blank, J. (2001). *Mullahs on the Mainframe: Islam and Modernity Among the Daudi Bohras* University of Chicago Press
- Boddy, J. (1982). *Womb as oasis: The symbolic content of pharaonic circumcision in rural Northern Sudan*. *American Ethnologist*, 9, pp. 682 – 698
- Braun, V. (2009). *The women are doing it for themselves: The Rhetoric of Choice and Agency around Female Genital Cosmetic Surgery*. *Australian Feminist Studies*. [online] Vol 24(60: Genital Modification). pp. 233 – 249
- Brux, C.M. (2007). *Abandoning Pursuits of Transcendent Truth and Celebrating Multiple Subjectivities, in From Theory to Practice in Postmodern Times: Female Genital Operations as a Catalyst for Interrogating Imperial Feminisms and Decolonizing Transnational Feminist Politics*. Women's, Gender, and Sexuality Studies Honors Projects.
- Budiharsana, M., Amaliah L., Utomo B., (2003). *Female Circumcision in Indonesia: Extent, Implications and Possible Interventions to Uphold Women's Health Rights*. Jakarta: Population Council and USAID, Research Report
- Clarence-Smith, W.G. (2008). *Islam and Female Genital Cutting in Southeast Asia: The Weight of the Past*. *Finnish Journal of Ethnicity & Migration*, 3(2).
- Council of Europe (2008). *Islamophobia and its consequences on young people* Council of Europe
- Creighton, S. M. & Reisel, D. (2015). *Long term health consequences of Female Genital Mutilation (FGM)*. Maturitas.
- Daily Telegraph Australia June 9 2016 <http://www.dailytelegraph.com.au/news/nsw/female-genital-mutilation-muslim-sect-leader-sent-to-jail-in-legal-uturn/news-story/> (accessed November 2017)
- Dawoodi Bohra Women's Association for Religious Freedom <https://dbwrf.org/> (accessed November 2017)
- Dasl, M. (2017) February 7 2017 <http://timesofindia.indiatimes.com/city/mumbai/survey-80-of-bohra-women-subjected-to-genital-mutilation/articleshow/57011229.cms> Times of India (accessed November 2017)
- Denscombe, M. (2014). *The good research guide* Open University Press
- Earp, B.D. (2013). *Female genital mutilation (FGM) and male circumcision: Should there be a separate ethical discourse?* Practical Ethics. University of Oxford.
- Esposito, J.L. Ed. (2018) "Women and Islam." *The Oxford Dictionary of Islam* Oxford Islamic Studies Online <http://www.oxfordislamicstudies.com/article/opr/t125/e2510> (accessed May 4 2018)
- European Commission Against Racism and Intolerance [https://www.coe.int/t/dghl/monitoring/ecri/default\\_en.asp](https://www.coe.int/t/dghl/monitoring/ecri/default_en.asp)
- Gender & Development Network, ActionAid UK, Womankind International Planned Parenthood Federation, Orchid Project (2009). *Harmful Traditional Practices Affecting Women & Girls*. Afrirep
- Ghadially, R. (1991). *All for "Izzat" The Practice of Female Circumcision among Bohra Muslims* manushi-india.org No.66

- Ghadially, R. (1992). *News Women's Global Network on Reproductive Rights*. January-March; (38): pp. 7 – 8
- Ghadially, R. (1994). *Daudi Bohra Muslim Women and Modern Education: A Beginning* Indian Journal of Gender Studies 1:2
- Ghadially, R. (2002). *Review of Blank, Jonah, Mullahs on the Mainframe: Islam and Modernity Among the Daudi Bohras*. H-Gender-MidEast, H-Net Reviews. November, <http://www.h-net.org/reviews/showrev.php?id=6915>
- Ghadially, R. (2001). *Women Pilgrims Boons and Bonds*. ISIM Newsletter 1 (8)
- Giddens, A. (1990). *The Consequences of Modernity*. Cambridge: Polity Press
- Giddens, A. (1991). *Modernity and Self-Identity. Self and Society in the Late Modern Age*. Cambridge
- Goswami, P. (2013). *A pinch of skin* <https://www.youtube.com/watch?v=iSrVlqmoVPO>
- Grande, E. (2004). *Hegemonic Human Rights and African Resistance: Female Circumcision in a Broader Comparative Perspective*. Global Jurist Frontiers. Vol.4(2). Article 3.
- Gruenbaum, E. (2001). *The Female Circumcision Controversy: An Anthropological Perspective*. University of Pennsylvania Press.
- Gruenbaum, E., (2005). *Socio-cultural dynamics of female genital cutting: Research findings, gaps, and directions*. Culture, Health and Sexuality. Vol 7(5):. pp. 429 – 441
- Jones, S. D., Ehiri, J., Anyanwu, E. (2004). *Female genital mutilation in developing countries: an agenda for public health response*. European Journal of Obstetrics & Gynecology and Reproductive Biology
- Khan, S. (2007). *Negotiating the Mohalla: Exclusion, Identity and Muslim Women in Mumbai* Economic and Political Weekly Vol. 42, No. 17 (April 28 - May 4), pp. 1527 – 1533
- Korieh, C. (2005). "Other" Bodies: Western Feminism, Race, and Representation, in *Female Circumcision Discourse*. In Nnaemeka, O. *Female Circumcision and the Politics of Knowledge: African Women in Imperialist Discourse*. Greenwood Publishing Group.
- Lewis, H. (2009). *Female Genital Mutilation and Female Genital Cutting*. Encyclopedia of Human Rights, Vol. 2, pp. 200 – 213. Northeastern University School of Law Research Paper No. 40
- Manderson, L. (2004). *Local rites and body politics: Tensions between cultural diversity and human rights*. International Feminist Journal of Politics. 6(2), pp. 285 – 307
- McLain, K. (2010). *Mullahs on the Mainframe: A Review Essay* India Review, 2:1, pp. 103 – 115
- Menon, S. (2017). <https://thewire.in/106134/fakhruddin-fgm-khafz-dawoodi> Accessed 4 May 2018
- Moghadam, V. M. (1992). *Patriarchy and the politics of gender in modernising societies: Iran, Pakistan and Afghanistan* International Sociology March 1
- Monagan, S. L. (2010). *Patriarchy: Perpetuating the Practice of Female Genital Mutilation*. Journal of Alternative Perspectives in the Social Sciences. Vol 2(1). pp. 160 – 181
- Newland, L. (2006). *Female circumcision: Muslim identities and zero tolerance policies in rural West Java*. Women's Studies International Foru. Vol 29(4). pp. 394 – 404
- NewsIn Asia June 4 2017 <http://newsin.asia/female-circumcision-communities-call-religious-freedom-upheld/> (accessed November 2017)
- NewsIn Asia November 17 2017 <http://newsin.asia/khafz-exaggerated-activists/> (accessed November 2017)
- Octavia, L. (2015). *Circumcision and Muslim Women's Identity in Indonesia*. Studia Islamik. Vol.21(3), pp. 419 – 457
- Pawson, R. & Tilley, N. (1997). *Realistic Evaluation* Sage
- Pio, E. (2010). *Islamic sisters: Spirituality and ethnic entrepreneurship in Sweden* Equality, Diversity and Inclusion: An International Journal, Vol. 29 Issue: 1, pp.113 – 130
- Poole, E. and Richardson, J.E. (1997). *Muslims and the news media* I.B. Taurus
- Popay, J. et al. (2006). *Guidance on the Conduct of Narrative Synthesis in Systematic Reviews A Product from the ESRC Methods Programme* Economic and Social Research Council
- Pratiknya, A.W. (1988). *Female circumcision in Indonesia: a synthesis profile of cultural, religious and health values*. Associazione Italiana Donne per lo Sviluppo [and] Somali Women's Democratic Organization
- Putranti, B.D., (2008). *To Islamize, Becoming a Real Woman or Commercialized Practices? Questioning Female Genital Cutting in Indonesia*. Finnish Journal of Ethnicity & Migration, 3(2).
- Rashid, A., Patil, S., Valimalar, A. (2009.) *The Practice Of Female Genital Mutilation Among The Rural Malays In North Malaysia*. The Internet Journal of Third World Medicine. 2009 Volume 9 Number 1.
- Roy, S. (1984). *The Dawoodi Bohras – An anthropological perspective* B.R. Publishing Corporation Delhi
- Sahiyo (2017) <https://sahiyo.com/> (accessed 25.05.17)
- Said, E. (1993). *Culture and Imperialism* Vintage Books
- Schweder, R. A. (2000). *What about "female genital mutilation"? And why understanding culture matters in the first place*. Daedalus, 129(4), pp. 209 – 232
- Scroll-In (2014). <https://scroll.in/article/671258/already-rocked-by-a-succession-battle-bohras-face-up-to-new-leaders-views-on-women> (accessed May 4 2018)
- Shell-Duncan, B. (2008). *From Health to Human Rights: Female Genital Cutting and the Politics of Intervention*. American Anthropologist. Vol.110(2), pp. 225 – 36 [Peer Reviewed Journal]
- Smith, C. (2011). *Who Defines "Mutilation"? Challenging Imperialism in the Discourse of Female Genital Cutting*. Feminist Formations, 23(1), pp. 25 – 46

- Srinivasan, S. (1991). *Behind the Veil, the Mutilation*. The Independent. Retrieved from <http://www.popline.org/node/339945>
- Sullivan, N., 2007. "The price to pay for our common good": *Genital modification and the somatechnologies of cultural (in) difference*. *Social Semiotics*, 17(3), pp. 395 – 409
- Taher, M. (2017). *Understanding Female Genital Cutting in the Dawoodi Bohra Community: an exploratory survey* Sahiyo
- Thabet, S.M. and Thabet, A.S. (2003). *Defective sexuality and female circumcision: the cause and the possible management*. *Journal of Obstetric Gynaecological Research* February; 29(1): pp. 12 – 19
- The Dawoodi Bohras <http://thedawoodibohras.com/> (accessed June 2017)
- The Hindu February 7 2017 <http://www.thehindu.com/news/cities/mumbai/Dawoodi-Bohra-women-say-no-to-female-genital-mutilation/article17206136.ece> accessed November 2017
- The Wire February 7 2017 <https://thewire.in/106134/fakhruddin-fgm-khafz-dawoodi/> accessed November 2017
- Toubia, N. (1994). *Female Circumcision as a Public Health Issue*. *The New English Journal of Medicine*. 331. pp. 712 – 716
- van Gennep, A. (1909). *The Rites of Passage* University of Chicago Press
- Wade, L. (2009). *Defining gendered oppression in U.S. newspapers: The Strategic Value of "Female Genital Mutilation"*. *Gender and Society*. Vol. 23(3). pp. 93 – 314
- Wade, L. (2009). *The Evolution of Feminist Thought About Female Genital Cutting*. *Sociologists for Women in Society* Fact Sheet.
- Wade, L. (2011). *Separating the heat from the light: Lessons from 30 years of academic discourse about female genital cutting*. *Ethnicities* Volume: 12(1), pp. 26 – 49
- Werunga, J., Reimer-Kirkham, S. and Ewashen, C., (2016). *A Decolonizing Methodology for Health Research on Female Genital Cutting*. *Advances in Nursing Science*, 39(2), pp. 150 – 164
- Westhorp, G. (2014). *Realist Evaluation: An Introduction Methods Lab*. Overseas Development Institute London
- Whitehorn, J., Ayonrinde, O., and Maingay, S. (2002). *Female genital mutilation: Cultural and psychological implications*. *Sexual & Relationship Therapy*, 17(2), pp. 161 – 170. DOI: 10.1080/14681990220121275
- Wong, G., Greenhalgh, T., Westhorp, G., Buckingham, J., Pawson, R. (2013). RAMESES publication standard: realistic syntheses. *BMC Med* 2013; pp. 11 – 21
- Zakir, M. (2016). *World Health Organisation's stance and the criminalisation of female circumcision: the protection of or violation of human rights?* DBWRF
- Zubaida, S. (2005). *Islam and Secularization Asian* *Journal of Social Science*, Volume 33, Issue 3, pp. 438 – 448

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