

**“WITH AN ANTENNA WE CAN STOP THE PRACTICE
OF FEMALE GENITAL CUTTING”:**

**A PARTICIPATORY ASSESSMENT OF *ASHREAT
AL AMAL*, AN ENTERTAINMENT-EDUCATION
RADIO SOAP OPERA IN SUDAN***

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RESUMEN

Este artículo discute los resultados del proceso de evaluación participativa de *Asbreat Al Amal* (“Velas de Esperanza”), una telenovela radial con formato de entretenimiento-educativo desarrollada en Sudán. A través de dinámicas de dibujo y fotografía participativa, los autores pudieron apreciar cómo oyentes activos de la telenovela se relacionaban con ésta y eran afectados por sus contenidos educativos. Los dibujos y fotografías de los y las participantes de la evaluación muestran una clara comprensión de los mensajes e historias de *Astreat Al Amal*, así como la intersección de unos con otros, en temas como la necesidad de empoderamiento de las mujeres, prácticas de salud reproductiva seguras y los riesgos de la circuncisión femenina (una práctica tradicional muy común en Sudán). Tanto los hombres como las mujeres participantes de la evaluación coincidieron en que las historias relacionadas con el tema de mutilación genital femenina fueron las más significativas, ya que reflejaban sus experiencias vividas. Por otro lado, esta investigación también demuestra el poder de las metodologías participativas de evaluación de impacto, sobre todo para promover diálogos alrededor de temas tabú como por ejemplo la circuncisión femenina

PALABRAS CLAVES: Evaluación participativa, mutilación genital femenina, diálogo, Sudán.

ABSTRACT

This article presents the results of a participatory evaluation of Ashreat Al Amal (“Sails of Hope”), an entertainment-education radio soap opera in Sudan. Using participatory sketching and photography exercises, we investigated how avid listeners of the radio soap opera engaged with its educational content. Our respondents’ sketches and photos suggest that they comprehended several intersecting plotlines and educational messages of Ashreat Al Amal, that is, a more empowered status for women, safe reproductive health practices and the dangers of the traditional practice of female genital cutting (a practice that is widespread in Sudan). Both male and female respondents emphasized that storylines related to female genital cutting held the most personal meaning for them as it closely paralleled their lived realities. Furthermore, our research demonstrated the power of participatory assessment methodologies, especially to generate unanticipated dialogue on “taboo” topics such as female genital cutting.

KEY WORDS: *Participatory evaluation, female genital cutting, dialogue, Sudan.*

INTRODUCTION

On a hot summer day –in July, 2006– in an office building in Khartoum, Sudan, 31-years old Yaseen Hasan Ali was slouched over a piece of blank art paper, holding four or five colored pencils in his hand. Thoughtful and visibly reflective, Ali, who was an avid listener of *Ashreat Al Amal* (“Sails of Hope”), an entertainment-education radio soap opera was wrestling with how he could convey in a sketch the personal meanings he derived from listening to his favorite radio program. Some 20 minutes later, holding his colorful drawing in hand, he muttered: “With an antenna we can stop the practice of female genital cutting.”

Can one stop the highly entrenched social practice of female genital cutting with a piece of electronic hardware? The present article employed a participatory methodology to assess how Sudanese listeners of *Ashreat Al Amal* engaged with the radio soap opera, deriving meanings, interpretations, and guides to action about reproductive health and, specifically, about female genital cutting.

Our article is organized as follows. First, we provide (a) a background on FGC, including the terms used to describe the various types of practice, the reasons for the practice, and its debilitating physical and psycho-social consequences. Certain promising grassroots and media-based interventions to combat FGC are then reviewed, followed by a description of the *Ashreat Al Amal* radio project in Sudan. Next, the research questions guiding our present research are outlined, our participatory methods are described, and key results presented. Implications for employing participatory methods in assessing entertainment-education storylines are discussed.

FEMALE GENITAL CUTTING: A DEEPLY ENTRENCHED PRACTICE

From the perspective of women’s health, female genital cutting (FGC) is perhaps the “most dangerous ritual custom still practiced”

(Abboud et al., 2000: 1153). Of the estimated 150 million girls and women who have undergone FGC, a majority of them live in sub-Saharan and northeast Africa¹ (Abusharaf, 2006; El Saadawi, 2005; PRB, 2001; Rahman & Toubia, 2000; Shaaban & Harbison, 2005; WHO, 1999; Yount, 2004). FGC prevalence rates in some countries are astronomical (Miller et al., 2005; Snow, 2001): Somalia (100%); Guinea (99%); Egypt (97%); Mali (92%); Sudan (90%); Criteria (89%); and Ethiopia (80%).

Various terms are used to describe the act of cutting and stitching a woman's genitalia: female circumcision, female genital mutilation, and female genital cutting. "Female circumcision" is a deceptively benign term as it de-emphasizes the severity of the cutting and stitching by comparing it to the removal of foreskin in males (Shell-Duncan & Hernlund, 2002; Toubia, 1998). "Female genital mutilation" (FGM), a term that finds favor with international organizations such as the World Health Organization² and the United Nations Population Fund³ (UNFPA), is inaccurate because "mutilation is not the intent of the action" (Toubia, 1999: 2). Further, FGM is coined by "outsiders advocating intervention" (p. Guindi, 2006: 30). Korieh (2005) further challenges the word "mutilation" for it portrays African women's bodies as incomplete and deformed (p. 122). The favored term for the present article is "female genital cutting" (FGC) even though we realize that FGC does not account for the practice of infibulation—the stitching of the vaginal opening, leaving only a small opening for the passing of urine and menses (Toubia, 1999; Abusharaf, 2002; Boyle, 2002; Billings, 1995; Abdel-Tawab & Hegazi, 2000; Yount, 2004).

FGC includes "all procedures that involve partial or total removal of the external female genitalia" for cultural or non-therapeutic reasons (WHO, 2006: 1835). There are different types of

¹ Pockets of them are also present in Yemen and in African-immigrant communities in Europe, North America, India, Malaysia, the Arabian Peninsula, and Indonesia

² See the World Health Organization's media center for more information: <http://www.who.int/mediacentre/factsheets/fs241/en/>

³ See the UNFPA website for more information: <http://www.unfpa.org/support/>

FGC as (1) *Type I*, that is, excision of the prepuce, with or without excision of part or all of the clitoris, (2) *Type II*, that is, excision of the clitoris with partial or total removal of the labia minora, and (3) *Type III*, that is, excision of part or all of the external genitalia and stitching or narrowing of the vaginal opening (infibulation) (WHO, 2006). Differentiating further, Bibbings (1995) offers six⁴ different categories of FGC: (1) “Ritual circumcision” involves only the pricking of the clitoral hood to release a drop of blood; (2) *Sunna* (which means “tradition” in Arabic) involves the cutting of the hood of the clitoris⁵; (3) *Clitoridectomy* involves a procedure in which the clitoris is held between the thumb and index finger, pulled out, and amputated with one clean stroke of a knife (Toubia & Izett, 1998)⁶; (4) *Infibulation* involves the excision of all or part of the mons veneris, the labia majora, the labia minor, and the clitoris; the raw wounds are sewn together, leaving an opening for the urinary and menstrual flows amidst a band of scar tissue. Some 80 to 90 percent of the incidence of FGC in countries such as Sudan, Somalia, and Djibouti involve infibulation, which guarantees the virginity of young women⁷ (Abdalla, 2006; Miller et al., 2005;

4 Bibbings actually has eight sub-sections (a-h) in her description of different kinds of FGM, of which one is redundant (excision) while the other is only “reportedly been practiced” (p. 153) among Australian Aborigines. For this reason only six of the eight categories is included in this essay.

5 Both “ritual circumcision” and the *Sunna* form of FGC, as previously defined, are reported to least common forms of FGC in Africa (Boyle, 2002, p. 26). Adding confusion to the variety of terms already offered is the fact that the term *Sunna* has also been in some places (most notably Sudan) to describe Type II FGC, which is much more severe (Lightfoot Klein, 1989; Boyle, 2002). In Sudan, this form of FGC is often also referred to as *Khitan*, which in Sudanese Arabic means “removing something extra.”

6 The removal of the clitoris, in particular, serves to control and limit women’s sexuality (Miller et al., 2005; Unicef, 2005; Boyle, 2002; Boyle & Hoeschen, 2001; Rahman & Toubia, 2000; Spadacini & Nichols, 1998; Walker & Parmar, 1996; Dorkenoo & Ellworthy, 1992; Lightfoot Klein, 1989).

7 Dorkenoo and Ellworthy describe this rationale as “odd” since “reinfibulation is easily done to look like the original” (p. 13), whereas Abdel Harim (2003) describes infibulation as a way “to make virginity visible...if loss of virginity can easily be detected, just by looking at genitalia, then women would think twice before they submit to a sexual relationship out of wedlock” (p. 123).

Unicef, 2005; Abdel Halim, 2003; Abusharaf, 2001); (5) *De-infibulation* involves cutting open the vaginal wound formed after infibulation to make penetration possible after marriage (El Bashir, H. 2006; Miller et al., 2005; Boyle, 2002; Balk, 2000)⁸; and (6) *Re-infibulation* (also called "re-circumcision") involves re-stitching of women's genitalia, often after childbirth (Abdalla, 2006; Miller, et al, 2005; Lightfoot-Klein, 1989)⁹.

FGC is often performed as part of initiation rites on girls at different ages. For instance, in Kenya, *Taita* girls are cut within a month of being born, *Gusii* girls between the ages of five and eight, while the *Maasai* perform FGC on girls in their late teens (Halperin, 2005, p. 268). In some villages in Western Nigeria, girls are circumcised when they are nine days old for they are believed at this age to be young enough to not "know pain." In contrast, the *Urhobos* of the Delta Region of Nigeria circumcise girls as late as the delivery of their first child (Olujobi, personal correspondence, March 17, 2007). Given the differences in the timing and severity of the practice of FGC in Africa, it would clearly be misleading to speak too generally about the practice. What the great variety does suggest, however, is the need for organizations interested in combating the practice of FGC to conduct extensive formative research prior to designing and implementing interventions (Abdel-Tawab & Hegazi, 2000: 24).

In many communities, FGC symbolizes a transition from childhood to adulthood, and it is perceived as a means for ensuring a young girl's eligibility for marriage. In this sense, Mackie (2000) argues that FGC is similar to the practice of foot binding

⁸ De-infibulation is often done with a knife or a sharp object, or by the act of repeated attempts of penetration during intercourse (Abdalla, 2006; Boyle, 2002; Rahman & Toubia, 2000; Dorkenoo & Elworthy, 1992). Sudanese researchers Ahmed Abdel Maghied and Suad Musa (2004) report that among the men they surveyed, the fear of being unable to penetrate their spouse on their wedding night was common (p. 23).

⁹ In Sudan, re-infibulation immediately after childbirth is often referred to as *a'adal* (El Bashir, 2006, p. 164).

in China. Foot binding, like circumcision, was seen as a practice that enhanced the beauty and desirability of an unmarried girl. In one region of Western Nigeria, for example, the local word for female circumcision is “beautification” (Olujobi, personal correspondence). Mothers and grandmothers often take the lead in arranging FGC for young girls since *not* circumcising the girls often renders them ineligible for marriage (Abdalla, 2006; Boyle, 2002; Miller et al., 2005). Spadacini and Nichols (1998) found that rural inhabitants from five different ethnicities in Ethiopia perceived FGC as “a harmless practice” which is likely to “ensure marriage and guarantee community blessing” (p. 50). Egyptian writer and medical doctor Nawal El Saadawi noted that in Egypt, circumcision is often perceived as a means for protecting the virginity and honor of girls who have reached the “dangerous age” of puberty and adolescence. Many of women treated by El Saadawi considered circumcision good for one’s health. El Saadawi notes that the name for circumcision used in some rural areas in Egypt translates as a ‘cleansing’ or ‘purifying’ operation (1980/2002: 34).

The World Health Organization (2000) provides a variety of reasons for the practice of FGC (table 1).

Table 1
Reasons for Female Genital Cutting

PSYCHOSEXUAL REASONS	TO ATTENUATE SEXUAL DESIRE IN THE FEMALE, MAINTAIN CHASTITY AND VIRGINITY BEFORE MARRIAGE AND FIDELITY DURING MARRIAGE, AND INCREASE MALE SEXUAL PLEASURE;
SOCIOLOGICAL REASONS	IDENTIFICATION WITH THE CULTURAL HERITAGE, INITIATION OF GIRLS INTO WOMANHOOD, SOCIAL INTEGRATION AND THE MAINTENANCE OF SOCIAL COHESION;
HYGIENE AND AESTHETIC REASONS	THE EXTERNAL FEMALE GENITALIA ARE CONSIDERED DIRTY AND UNSIGHTLY AND ARE TO BE REMOVED TO PROMOTE HYGIENE AND PROVIDE AESTHETIC APPEAL;
MYTHS	ENHANCEMENT OF FERTILITY AND PROMOTION OF CHILD SURVIVAL;
RELIGIOUS REASONS ¹⁰	SOME MUSLIM COMMUNITIES, HOWEVER, PRACTICE FGM IN THE BELIEF THAT IT IS DEMANDED BY THE ISLAMIC FAITH. THE PRACTICE, HOWEVER, PREDATES ISLAM. (WHO, 2000).

¹⁰ Rahman and Toubia (2000) call FCG a cultural, rather than religious, practice (p. 6).

Despite not being practiced in many Muslim countries, FGC has become “strongly

Complications resulting from FGC include acute pain, hemorrhaging, and bacterial infections (Abdalla, 2006; Unicef, 2005; Boyle, 2002; WHO, 2001; Balk, 2000). Untreated infections, often as a result of unclean cutting instruments, can lead to septicemia (infected blood), which can be fatal (Rahman & Toubia, 2000, p. 8). Such cases are rarely reported, especially in countries where FGC is illegal, for fear of prosecution (Kirby, 2005; Levin, 2003; Rahman & Toubia, 2000). Longer term complications include difficulty in passing urine, recurring urinary tract infections, incontinence, pelvic inflammation, and sexual dysfunction (Balk, 2000; WHO, 2001; Toubia, 1999). Infibulated women also risk developing a "haematocolpos," the accumulation of menstrual blood over many months in the vagina and uterus due to closure of the vaginal opening by the scar tissue (Toubia, 1999).

Health-related arguments abound to stop FGC. However, emphasizing the health complications of FGC often has the unintended consequence of "medicalizing" the practice: that is, instead of being performed by untrained midwives, traditional healers and barbers, it begins to occur in hospital settings with trained doctors and nurses (UVA/UNFPA, 2006; Unicef, 2005; Abusharaf, 2001; Gruenbaum, 2001). The recent highly publicized case of Bedour Shaker a 12 years old Egyptian girl who died of an overdose of anesthesia while undergoing FGC, succeeded in drawing popular attention to the issue of FGC while simultaneously highlighting the failure of "medicalization" to improve the fate of young women undergoing the practice. The Egyptian government responded to the popular outcry following Bedour's death by banning female circumcision, closing a loophole to an earlier ban (1996), which had provided an exemption from the ban to "qualified doctors" performing FGC in "exceptional cases only" (Abdelhadi, 2007).

identified with Islam in several African nations." Furthermore, they argue that "neither the Qu'ran, nor the "hadith," collections of sayings of the Prophet Mohammed, include a direct call for [FGC] (p. 6).

Despite the media and legislative attention given to the occasional cases of death resulting from circumcision, the practice continues to be highly valued socially (Obermeyer, 1999, El Saadawi, 1980/2002; 2005).

How can, or how has, this highly entrenched social practice of FGC been addressed?

INTERVENTIONS TO COMBAT FEMALE GENITAL CUTTING

Here we describe several communication-centered interventions, including examples of grassroots organizing and media-centered initiatives, to combat female genital cutting.

GRASSROOTS INTERVENTIONS

When it began in 1991, the TOSTAN basic education program in Senegal¹¹ imparted reading, writing, and math skills to illiterate villagers, along with training in problem-solving, leadership, and hygiene (Population Council, 1999). In 1994, participatory research led TOSTAN to more fully incorporate women's issues into the curriculum, and topics such as FGC began to feature widely in participant discussions.¹² In mid-1997, TOSTAN's field coordinator Malick Gueye telephoned the head office, noting: "Did you know that the women of the class of Malicounda Bambara have stopped FGC in their village?" (Population Council, 1999: 45). Within months of the action in Malicounda, other villages followed suit.

¹¹ 1991 is the year that the NGO TOSTAN was officially created. The "roots" of TOSTAN go back to 1976, when a Senegalese Resource Center named "Demb ak Tey" began offering classes to local children in Wolof (Population Council, 1999, p. 10). Over the years, the amount of material covered and they number of modules has expanded, reaching 8 modules in 1994.

¹² An evaluation conducted in 2004 found that in the region they studied, many villagers (men in particular) objected to the topic of FGC being taught in the TOSTAN program (PC, 2004, p. 8). In that instance, the issue of FGC was seen to be imposed by the facilitator rather than stemming from the input of local men and women.

The village of Nguerigne Bambara declared their abandonment of FGC on November, 6 1997. Two larger declarations to abandon FGC followed: The Diabougou declaration (comprising 13 villages in February 1998) and the Medina Cherif declaration (comprising 18 villages in June 1998).

TOSTAN, in Wolof language, means "breakthrough" (Population Council, 1999). By 2003, a total of 16 "breakthrough" public declarations were made, covering a footprint of 1,271 villages (Mwangaza Action, 2003). In 2001, Mwangaza Action, an NGO in neighboring Burkina Faso began replicating the TOSTAN program in 23 villages.

While TOSTAN was getting underway in Senegal, the Kenyan NGO *Maendeleo Ya Wanawake* (MYWO) decided in 1991, to focus its efforts toward the abandonment of FGC (Mohamud et al., 2006). Although Kenya's national FGC prevalence rate is about 32% (DHS, 2003), in some groups (such as the Masai) the prevalence rate is substantially higher (Mohamud et al., 2006; Halperin, 2005; Chege et al., 2001). Field-based research in high prevalence communities suggested to MYWO that FGC was part of a more comprehensive rite of passage. To retain the "positive social aspects" of the traditional initiation ceremonies, MYWO developed alternative rites of passage (Mohamud et al., 2006: 87), including a program called "circumcision with words" (Singhal & Rogers, 2003). Among the groups that MYWO worked with, the proportion of women under the age of 20 who underwent FGC declined from 78% in 1993 to 56% in 1999 (Mohamud, 2006: 94).

A novel approach to grassroots problem-solving was implemented in Egypt to combat FGC. According to the 2003 Demographic and Health Surveys (DHS), Egypt has an FGC prevalence rate of 97% among "ever-married"¹³ women. In 1998,

¹³ The U.S. Department of Health and Human Services defines "Ever-married women" as those who are 1) currently married (i.e., married with spouse present) or 2) who have, at some time in the past, been married (i.e., divorced, widowed, married but separated). Source http://aoa.gov/prof/statistics/future_growth/aging21/program.asp

the Egypt Country Office of the Centre for Development and Population Activities (CEDPA-Egypt) initiated a project guided by this question: “what about the other 3%?” How did families with “uncircumcised” girls withstand social pressure to conform? One element of this strategy, called the Positive Deviance (PD) approach, is identifying those who “deviate” from the norm, in a positive way (Papa, et al., 2006; Pascale & Sternin, 2005). Rather than aiming directly for “eradication” of FGC, CEDPA-Egypt sought to foster and facilitate discussions about FGC amongst NGOs, community groups and individuals and also to better understand the reasons why/how “positive deviants” (PDs) choose to abandon FGC (CEDPA, 2003: 3; CEDPA, 1999). The project gained new “spokespeople” in the form of the positive deviants whose testimonials provided social proof that it was possible to abandon FGC and yet remain virtuous (Positive Deviance Initiative, n.d.). Thus the stars of the CEDPA-Egypt FGC abandonment project were the girls and family members who were courageous enough to come forward and who shared their stories with their community.

In June 2006, United Nations Volunteers sponsored a study tour for Sudanese women activists to visit FGC abandonment projects in Egypt. In her trip report, delegate Dr. Nafisa Bedri, professor at Ahfad University for Women in Khartoum, recommended the inclusion of the positive deviance approach in Sudan to combat FGC (Bedri, 2006: 9). Dr. Bedri, whom the present authors had an opportunity to personally interview in Khartoum in 2006, commented further on the FGC abandonment activities in Sudan: “I feel this [succeeded] because.... it was the community people who did it. Those positive deviants who believed in the fight against FGC produced many innovative interventions such as slogans on match boxes or puppets show by school kids (Personal communication, September 22, 2006).

Complementing the grassroots approach to abandoning FGC, various innovative media approaches in Africa have also been effective. The media-based approaches to combat FGC range from the use of fiction (in novels and film), to participatory video, to

art exhibits, to the use of radio and television for public service-type advertisements and popular soap operas (Singhal & Rogers, 1999).

MEDIA INTERVENTIONS

A well known popular culture personality who has addressed the issue of FGC is Alice Walker, the American novelist and poet. Walker's novel *Possessing the Secrets of Joy* (1992) presents the story of a young woman, Tashi, who kills the woman who "circumcised"¹⁴ her. Walker's approach to FGC is to present the viewpoints of both the young girl (Tashi) and her excisor (M'Lissa). The result is a nuanced, although overall disparaging portrayal of FGC and its consequences.¹⁵ Walker also collaborated on a film about FGC with filmmaker Pratibha Parmar called *Warrior Marks* (1993) and co-authored a companion book, *Warrior Marks: Female Genital Mutilation and the Sexual Blinding of Women* (1993). Several African writers have criticized Walker and Parmar for *Warrior Marks*, calling it voyeuristic (Akudinobi, 2005), hateful (Nwankwo, 2005), reductive (Abdel Halim, 2003), and demeaning and evasive (Mekuria, 1995). However, *Warrior Marks*, at the very least, succeeded in increasing discussion on the practice and portrayal of FGC.

Another film on FGC, *Moolaadé* (2004), was directed by the Senegalese filmmaker Ousmane Sembene. The film depicts one mother's attempt to protect girls in her village from FGC by creating a "safety zone," or *Moolaadé*. The young girls flee their initiation rite after hearing an Imam on the radio who argues against FGC. As a consequence, in one scene the male villagers are shown burning the radios in a bonfire (Levine, 2004). Sembene portrays FGC as an issue that pits men against women despite evidence that FGC is often

¹⁴ The word "circumcised" is used here for lack of an unambiguous verb for FGC. It is put in quotes to reflect that female circumcision is not analogous to male circumcision.

¹⁵ For an equally disparaging treatment see the novel by Lebanese American author Evelyn Accad "The Excised" (1982 - originally titled in French *L'Excisé*).

requested and performed by mothers and grandmothers (Lionnet, 2005; Boyle, 2002: 29; Abusharaf, 2001: 113, Greunbaum, 2001). Critical acclaim for *Moolaadé* at the Cannes Film Festival (2004) and its selection as Best Foreign Language Film (2005) by the National Society of Film Critics Association) bodes well for spurring a larger public discourse on FGC.

In 1998, an FGC-themed art exhibit entitled *Female Circumcision in Nigeria: The Suffering, the Sorrow, the Setback* was organized by the Nigerian NGO, Women Issues Communication Services Agency (w.I.C.S.A.) (Levin, 2003). The exhibit included paintings and sculpture with titles as graphic and evocative as the FGC images that were portrayed. They included *Agony – an experience I will never forget* (Stella Ubigho), *Blade and Shell* (Alloysius Osagie), and *Instrument of the act* (Angela Japhet), a watercolor depicting a larger than life razor blade superimposed on a screaming girl (Reinharz et al., 2006). The exhibition has since been revised and expanded and has traveled to several countries including Germany, the U.K. (showcased in the London Parliament), and the U.S. (Levin, 2003). The creation of a traveling exhibit has made it possible for the perspective of Nigerian artists and the subject matter of FGC to reach (and continue reaching) a broad local, national, and international audience.

In 2002, the Tanzanian NGO, TAMWA, collaborated with the Italian International Association for Women and Development (AIDOS) on a campaign, *Stop FGM*, which utilized multi-media, as well as community outreach approaches (Gender and Media Summit, 2004). The campaign included the distribution of information kits on FGC to the media, training on FGC related issues for journalists and artists, dissemination of posters, pamphlets and fact sheets in targeted communities (those practicing FGC), and the airing of radio and television spots (Gender and Media Summit, 2004, p. 30). The TAMWA “Stop FGM campaign exemplified a strategy commonly referred to embodying “air cover and ground support” (Singhal et al., 2004). The thesis here is that interventions have their strongest effects when on-air educational messages are

incorporated in long-running entertainment genres (such as soap operas) and are complemented on the ground with group listening and service delivery (Singhal et al., 2004).

In Africa, several entertainment-education programs have addressed FGC. *Ushikwapo Shikamana* ("If Assisted, Assist Yourself") was a highly popular entertainment-education radio soap opera in Kenya created by Population Communication International (PCI) in collaboration with Kenyan writers and crew. Broadcast from 1999 to 2004¹⁶, *Ushikwapo Shikamana* had a regular audience of seven million people, or 40 percent of all Kenyan households (PCI, 2004: 5). The storyline of the radio serial, which included the topic of FGC, also appeared three times a week as a comic strip in the Kenyan Kiswahili daily *Taifa Leo* (est. circulation 57 000).¹⁷ Later, a compilation of all the comics was released in a book format.

Perhaps the most focused entertainment-education initiative to combat FGC was the *Ashreat Al Amal* radio soap opera project in Sudan.

THE *ASHREAT AL AMAL* PROJECT

Ashreat Al Amal was a 144-episode entertainment-education radio soap opera, broadcast in Sudan from November 17, 2004 to June 30, 2006¹⁸. Two episodes of the program, each 15 minutes in length, were broadcast each week on Radio Omdurman, a station whose signal covers the entire city of Khartoum, and surrounding areas.

While *Ashreat Al Amal's* educational purposes, at the time of conception, included promoting a more equal status for women,

¹⁶ A previous version of this radio soap opera was broadcast in the late 1980s, but was subsequently discontinued.

¹⁷ Source: <http://www.nationsencyclopedia.com/Africa/Kenya-MEDIA.html>

¹⁸ The *Ashreat Al Amal* radio project was implemented in Sudan by Population Media Center of Shelburne, Vermont, USA with financial support from the David and Lucile Packard Foundation.

small family size, and HIV/AIDS prevention, during the development of the program formative research identified an additional issue as being vitally important to women: To promote awareness about the dangers of *kbitan* (female genital cutting), and to reduce the prevalence of this widespread practice. Some 90 percent of Sudanese women and girls undergo *kbitan* and this practice directly impacted their reproductive and psychological well-being. The scriptwriters had a steep educational and motivational challenge.

To achieve these educational goals, various intersecting storylines promoting the main educational themes were created. The theoretical inspiration for these storylines came from was Stanford University social psychologist, Albert Bandura, who explained how audience members learned new behaviors from media role models (Bandura, 1977; 1986). Bandura's theoretical premise was operationalized effectively in the 1970's by Miguel Sabido, a creative writer-director-producer at Televisa, the Mexican national television network, in the form of a methodology to produce entertainment-education *telenovelas* (Singhal & Rogers 2002; Singhal, Cody, Rogers, & Sabido, 2004). In each of the seven entertainment-education *telenovelas* that Sabido produced, which were both ratings hits and fulfilled their educational goals, Sabido creatively incorporated Bandura's principles of role modeling in carefully delineating the key characters¹⁹.

In the Sabido methodology, entertainment-educational *telenovelas* should have three types of characters: (1) those who support the educational value (positive role-models) (2) those who reject this value (negative role-models), and (3) those who sit somewhere in the middle (or on the negative side) and, as the storyline unfolds, gradually begin to adopt the positive behaviors (transitional characters). When a positive character models a behavior that is socially desirable, the character is rewarded. If a negative character

¹⁹ Remarkably, each of Sabido's *telenovelas* was popular with its audience, made a profit, and met its educational objectives (Singhal & Rogers, 1999).

emulated a socially undesirable behavior, he/she was punished. The transitional characters, designed to mirror the attitudes and beliefs of the target audience, carefully watch the consequences accruing to the positive and negative role models, and gradually move toward the positive end of the continuum.

ASHREAT AL AMAL'S STORYLINES AND CHARACTER DELINEATIONS

Ashreat Al Amal purposely addressed the issue of female genital cutting through three key female characters: **Al Shoul** (negative role model), **Awatif** (transitional role model), and **Rugaia** (positive role model).

Al Shoul, a local midwife, is a negative character who makes her living circumcising young girls. When she and her husband **El Dai** have a baby girl, Al Shoul circumcises the baby who then dies of excessive bleeding. Al Shoul and El Dai divorce over this unfortunate event and she turns to the street, selling tea and alcohol. As the story unfolds, Al Shoul (re)marries **Hamid**, a supportive man, and becomes pregnant. While in labor, Al Shoul experiences birthing complications since she herself was circumcised, and requires a blood transfusion. When Hamid's blood is screened for transfusion, he is found to be HIV positive. In turn, Al Shoul learns that she is also HIV-infected. Her newborn baby girl is also HIV-positive, and dies of AIDS. Angry over the death of her child and her HIV-positive status, Al Shoul loses her mind, and her body is found floating in a pond.

Awatif (a transitional character) is a sacrificing and hardworking wife and mother. She is exhausted by the burden of taking care of her six children. Awatif's husband, **Hassan**, refuses to assist Awatif in raising the children, and so she is forced to continue working far into each pregnancy, becoming physically weak and anemic. Faulting Awatif for her weakness and constant exhaustion, Hassan takes a second, much younger wife, leaving Awatif all by herself to care of all of their children. When Hassan has second thoughts, and wants to return to Awatif, she demands

that they start using family planning methods. After visiting a clinic together, and receiving sound advice from **Rugaia**, a local reproductive health educator, Hassan and Awatif become adopters of birth control.

Rugaia (a positive character) is a devoted community advocate and resource person for information about reproductive health and family planning. She does community outreach activities in rural areas, providing people with health information, and encouraging healthy practices, such as not circumcising baby girls, spacing births, and practicing good nutritional habits during pregnancies.

Through the stories of these three women characters²⁰, listeners of *Asbreat Al Amal* learned about the importance of eliminating the harmful practice of female circumcision, and protecting the health of the mother and ensure greater opportunities for her children.

RESEARCH QUESTIONS

Our participatory assessment exercise centered on asking, and answering, the following three questions:

- Research question N° 1: *What is the radio drama Asbreat Al Amal about?* In essence, what is the nature and scope of its plot, its characters, and its educational themes?
- Research question N° 2: *As a female (or a male) listener, which scene from Asbreat Al Amal was most meaningful to you and why?*
- Research question N° 3: *How has your life has changed as a result of listening to Asbreat Al Amal?* In other words, what aspects

²⁰ For each of these female characters, *Asbreat Al Amal* had male counterparts, who illustrated men's roles in either promoting or denying women's reproductive and sexual health. The male characters also performed other actions unhealthy for the youth and society. The primary male characters in the drama were **Jabir** (negative), **Hamid** (transitional), and **Ali** (positive).

of your life have been influenced, changed, or impacted by your engagement with the radio program?

PARTICIPATORY ASSESSMENT METHODOLOGY

In recent years, participatory sketching and photography have emerged as novel, audience-centered, and low-cost qualitative methodologies for assessing the meanings that audience members of entertainment-education (E-E) programs derive from their engagement with the mass media text (Singhal & Rogers, 1999). Such participatory methodologies offer a different perspective on audience engagement than, for instance, can be gathered through survey data²¹.

The inspiration for participatory sketching and photography comes from the work of noted Brazilian educator, Paulo Freire. In 1973, while conducting a literacy project in a barrio of Lima, Peru, a team led by Freire (author of the seminal 1970 book *Pedagogy of the Oppressed*), asked people questions in Spanish, but requested the answers in photographs. When the question "What is exploitation?" was asked, some people took photos of a landlord, grocer, or a policeman (Boal, 1979: 123). One child took a photo of a nail on a wall. It made no sense to adults, but other children were in strong agreement. The ensuing discussions showed that many young boys of that neighborhood worked in the shoe-shine business. Their clients were mainly in the city, not in the barrio where they lived. As their shoe-shine boxes were too heavy for them to carry, these boys, rented a nail on a wall (usually in a shop), where they could hang their boxes for the night. To them, that nail on the wall represented "exploitation". The "nail on the wall" photograph spurred widespread discussions in the Peruvian barrio about other forms of institutionalized exploitation, including ways to overcome them.

21 Clearly, all methods of data-collection –whether quantitative or qualitative– have their respective strengths and weaknesses.

Drawing upon Paulo Freire's work with participatory photography in Peru, researchers have employed participatory sketching as a method to obtain rich, nuanced narratives from audience members of E-E programs. For instance, one of the present authors employed the participatory sketching methodology to assess the effects of an entertainment-education radio soap opera initiative in the Philippines and also to assess the effects of another radio initiative in the Peruvian Amazon, spearheaded by Minga Perú, a non-governmental organization that promotes gender equality and reproductive health (Singhal & Rattine-Flaherty, 2006). As the Peruvian example of participatory photography demonstrates, in privileging visual forms of expression, researchers position themselves to question the dominant hegemony of textocentrism that legitimizes the lettered, literate, and text-based ways of knowing (Conquergood, 2002).

Inspired by this Freirean technique and Conquergood's (2002) call for incorporating more visual, performative methods, our assessment of *Asbreat Al Amal* in the Sudan included both participatory sketching and participatory photography. Our participatory data collection activities in the Sudan comprised of a total respondent pool of 55 avid listeners of *Asbreat Al Amal*, all of whom hailed from the Khartoum capital region. Of these 43 of our respondents were women, and 12 were men. Among the women, most were married and between the ages of 18 to 40 years old, and coming from the lower to middle socio-economic strata. Such an audience profile of married stay-at-home mothers is fairly consistent with the audience profile of daytime radio soaps in most countries.

PARTICIPATORY SKETCHING

As part of the participatory sketching exercise, we asked our respondents, either as individuals or in pairs, to answer the three questions that guide our present research study (as listed previously). However, rather than having them respond orally to

our query, we asked them instead to sketch their responses using colored pencils. The participants were encouraged to draw whatever they wanted, regardless of their drawing ability, and no rigid time limits were set to not rush them. This sketching activity with 55 respondents yielded a total of 73 drawings²². After the sketches were completed, individuals (or pairs) responsible for the drawing narrated what the sketch was about, including how it answered the posed questions, in front of the entire group. These narrations were audio-recorded while translators simultaneously translated the participants' narratives from Arabic to English for the present researchers, providing opportunities to seek clarification and/or ask follow-up questions. The audiotapes were then translated and transcribed into English-language transcripts by bi-lingual speakers fluent in both languages.

PARTICIPATORY PHOTOGRAPHY

To further assess the effects of *Asbreat Al Amal*, 14 of our 55 respondents took part in a participatory photography exercise. To them, only one question was posed, similar to the third question posed in the sketching exercise: That is, *How has your life changed, or what aspects of your life have been affected, by listening to Asbreat Al Amal?* Once again, we asked them to provide answers in visual form through photographs. The participants were given the freedom to interpret the question as they wished, emphasizing that there were no right or wrong answers.

The 14 participants who took part in the participatory photography exercise received disposable cameras, including a brief training on how to correctly operate them. Given each disposable camera yielded 27 exposures, we requested each participant to take about 8 to ten pictures to answer the question we had posed,

²² As noted previously, some of these sketches were constructed in pairs, especially the drawings in response to the first question.

and the remaining pictures could be of their friends and family members. The participants were given a time-frame of about 24 hours to take their pictures.

A day after the cameras were handed out, they were collected. After the pictures were developed, the respondents returned the next day to narrate –in front of the group– what each picture was about, what it meant to them, why did they take it, and how it answered the posed question. All 14 people returned the cameras, but only 13 could return at the appointed time to review and narrate their photographs. Of these peoples 9 were women and 4 were men. Interestingly, most of the women (5 out of 9) and some of the men had never operated a camera before.

Of the 8 to 10 photographs that our 13 participants took to answer the posed question, we asked them to select their top four or five photos that they believed best answered the question. A total of 74 photos were narrated by our 13 participants in front of their respective groups, while willingly being audio-recorded. Translators aided the process by translating the participants' photo narratives from Arabic to English to ensure concurrent opportunities for seeking clarification or asking follow-up questions. The audiotapes were then translated and transcribed into English-language transcripts by bi-lingual speakers.

AUDIENCE INTERPRETATIONS OF *ASHREAT AL AMAL*

To gauge the personal meanings that avid listeners of *Ashreat Al Amal* drew from its plot, characters, and educational messages, we organize our results around the three guiding research questions.

GRASP OF INTERSECTING PLOTS, CHARACTERS, AND EDUCATIONAL MESSAGES

Research question N° 1 asked: *What is the radio drama Ashreat Al Amal about?* In response to above question, Ahmed Mohammed (M, 23 years) and Ahmed Abdullah (M, 24 years) collaboratively

drew the following sketch (figure 1), and related to the program's intersecting storylines:



Figure 1

I [Ahmed Mohammed] listened to some of the episodes of the program but I also used to listen to what the family said about it. Specifically, I drew something about which we argued a lot, which is the pharonic circumcision. Personally, I care about this issue; we suffer from this a lot. All my sisters are circumcised, and my grandmother used to circumcise girls. I wanted this drawing to be very clear and transparent. This is the girl who was circumcised in the radio program, I can't really remember her name, but Al Shoul circumcised her. Al Shoul is an ugly woman carrying scissors. This program was useful because your grandmothers could be listening to the problems of circumcision. This serial program was broadcast at the same time when there was conflict between religious philosophers about whether to circumcise the girls or not.

Many listeners, both in their sketches and photos, focused on the female circumcision storylines of *Asbreat Al Amal*. For instance, Nafisa's (F, 34 years) photo was about a recent circumcision (figure 2). She noted:

The girl's family told me that the girl's face must not appear in the photo. This is the room of the already circumcised girl. She was circumcised in this room a week ago. The girl is fine now, but if any complication did not appear now, they will appear later. The girl is eight or nine years old. These are sweets which are given to the circumcised girl [pointing to the box]. Girls are usually given money and presents to encourage them to carry out the operation. They often do not know what they are going to experience.



Figure 2

In sum, our respondents' sketches and photos suggest that they comprehended the various intersecting plotlines and educational messages of *Asbreat Al Amal*, that is, a more empowered status for women, abandoning harmful practices such as female genital cutting, and seeking safe motherhood and childhood.

PERSONAL RESONANCE, EMOTIONS, AND MEANINGS

Research question N° 2 asked: *As a female (or a male) listener, which scene from Asbreat Al Amal was most meaningful to you and why?* Our

respondents talked about several emotionally charged-scenes. For instance, Yaseen Hasan Ali (M, 31 years), in reflecting on the death of the girl child in the radio program (figure 3), said:

This is a bed on which the dead are carried – The *Alangaraib*. The little girl was a victim of circumcision and died. She was a little girl and her mother insisted that she must be circumcised. I think this scene is representing the whole idea of the program. I added the crescent on the forehead of the girl which is a symbol of circumcision in Sudan.



Figure 3

Our respondents' sketches suggest various degrees of emotional and personal resonance with the key plotlines and characters. The female circumcision scenes and their deadly consequences held the most personal meaning for both male and female respondents as it closely paralleled their lived realities. Many of our respondents freely and openly shared the debilitating consequences of large families, especially on the health of women and children.

LEARNING AND IMPACT

Research question N° 3 asked: *How has your life has changed as a result of listening to Ashreat Al Amal?* Our respondents answered this question about the influence of *Ashreat Al Amal* on their lives in various ways. Yaseen Hasan Ali's sketch was most telling about the influence of radio (figure 4). He noted:

I drew the midwife in a shape of devil –you can see the devils tail– and she is holding her bag because midwives always carry a bag here in Sudan. On the bag you can see danger sign, the skull and bones. The other woman is a grandma and she is protecting her little granddaughter while she strikes the midwife with an antenna. I think that the radio is very important for older women... In the drawing, we see the grandmother fighting but not with a sword, she is fighting using a radio antenna. I meant that we couldn't fight against bad habits with a sword but we can do that through media like radio.

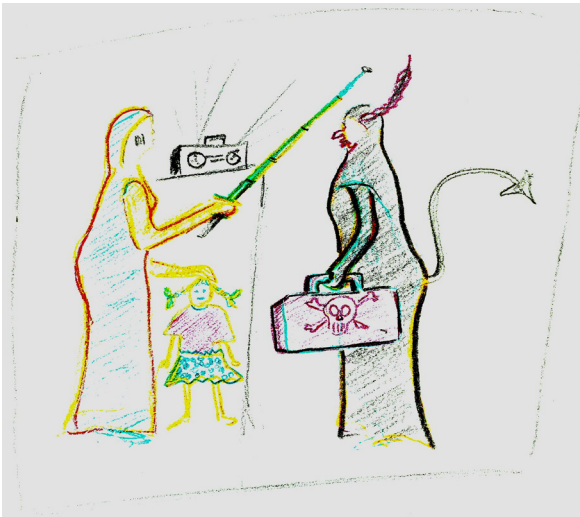


Figure 4

After listening to Yaseen Hasan Ali's poignant narrative, we grasped what he meant by saying: "With a radio antenna we

can stop the practice of female genital cutting" (quoted at the beginning of this paper).

Nafisa Abu Hassan (F, 34 years) drew this colorful sketch (figure 5) and noted:

I want to speak about health, through personal experience. My relative had a lot of children. Every year, she was pregnant with one. Before the radio program I felt her suffering, but I did not reflect it on myself. But after the program, I stopped having children. I already had three children. It is wrong to have children one after the other, and there should be a gap [spacing] between a child and the other one.



Figure 5

In sum, our respondents' sketches and photos, and their accompanying narratives, suggest that listening to *Ashreat Al Amal* affected their lives in various ways. Listeners emphasized that they learned about, or were reinforced in abolishing the practice of female genital cutting, and giving girls and women more control of their reproductive health.

SUMMARY AND CONCLUSIONS


The present article presented the results of a participatory sketching and participatory photography exercise conducted in the Sudan to gauge how avid listeners of *Ashbreath Al Amal* (“Sails of Hope”) engaged with the radio program, and especially with its educational messages on reproductive health and female genital cutting.

Our respondents’ sketches and photos suggest that they comprehended several intersecting plotlines and educational messages of *Ashbreath Al Amal*, that is, a more empowered status for women, abandoning harmful practices such as female genital cutting, and seeking safe motherhood and childhood. The female genital cutting scenes and their deadly consequences held the most personal meaning for both male and female respondents as it closely paralleled their lived realities.

What implications does our work with participatory sketching and photography have for researchers of entertainment-education initiatives? First, these participatory methods lie at the interface of theory, method, and praxis (see also Morphy & Banks, 1997; Singhal & Rattine-Flaherty, 2006). In taking stock of the sociology of visuals –whether in the form of sketches or photos– it is not difficult to discern the obvious conclusion: Almost all paintings, sketches, and photos are usually produced by “the powerful, the established, the male, the colonizer” (Harper, 1994: 408). Through participatory photography and sketching, E-E researchers hand over the means of visual production to the oppressed, the silent, and the muted.

This research also suggests that the results of participatory evaluations of entertainment education programs have great yet largely untapped potential for providing rich, context-specific content for future programming. The discussions held during the participatory evaluation revealed that the FGC story line resonated with *Ashbreath al Amal* listeners to a greater extent than anticipated by script-writers and program staff. The listening audience’s

welcome of the FGC story line in *Ashreat al Amal* indicates that follow on story lines exploring and broadening the same theme would also be welcome. The next step for the script writers should be to incorporate what they've learned from the audience feedback to weave an increasingly textured set of story lines that will continue to resonate with local audiences.

Participatory methodologies have the potential to uncover topics that truly resonate with audience members. Information discovered via participatory evaluation can then be utilized to develop new, nuanced storylines, representing a move toward a more dialogic entertainment-education. 

REFERENCES

- Abboud, P. & Quereux, C. (2000). Stronger campaign needed to end female genital mutilation. *BMJ: British Medical Journal*, 320(7242), 1153.
- Abdalla, R. (2006). "My grandmother called it the three feminine sorrows": The struggle of women against female circumcision in Somalia. In R.M. Abusharaf (Ed.). *Female circumcision: Multicultural perspectives*. Philadelphia: University of Pennsylvania Press.
- Abdelhadi, M. (2007). Egypt forbids female circumcision. Retrieved on June 28, 2007 from the BBC News at http://news.bbc.co.uk/2/hi/middle_east/6251426.stm
- Abdel Halim, A. (2003). *Honorably daughters: the lived experiences of circumcised Sudanese women in the United States*. Unpublished dissertation, Ohio University.
- Abdel Magied, A. & Musa, S. (2004). Psycho-sexual effect of female genital mutilation on Sudanese men. *The Ahfad Journal*, 21(1), 18-28.
- Abdel Tawab, N. & Hegazi, S. (2000). *Critical analysis of interventions against FGC in Egypt*, Final report to United States Agency for International Development by the FRONTIERS in Reproductive Health Project, Cairo office. Retrieved on October 1, 2006 from http://www.popcouncil.org/pdfs/frontiers/FR_FinalReports/Egypt_FGC.pdf
- Abusharaf, R. M. (2000). Revisiting Feminist Discourses on Female Infibulation: Responses from Sudanese Feminists. *Female "Circumcision" in Africa: Culture, Controversy, and Change* (pp. 151-67). B. Shell-Duncan & Y. Hernlund (Eds.). Boulder, CO: Lynn Reinner Publishers.

- Abusharaf, R.M. (2001). *Virtuous cuts: female genital circumcision in an African ontology*. *Differences: a journal of feminist cultural studies*, 12(1), 112-140.
- Abusharaf, R. M. (Ed.). (2006). *Female Circumcision: Multicultural perspectives*. Philadelphia, PA: University of Pennsylvania Press.
- Akudinabi, J. (2005). Libidinal quicksand: Imperial fictions, African femininity, and representation. In O. Nnaemeka (Ed.). *Female circumcision and the politics of knowledge: African women in imperialist discourses*. Westport, CT: Praeger.
- Balk, D. (2000). To marry and bear children? The demographic consequences of infibulation in Sudan. In B. Shell-Duncan & Y. Hernlund (Eds.). *Female "circumcision" in Africa: Culture, controversy and change*. Boulder, CO: Lynne Rienner Publishers.
- Bandura, A. (1977). *Social learning theory*. Englewood Cliffs, NJ: Prentice-Hall.
- Bandura, A. (1986). *Social foundation of thought*. Englewood Cliffs, NJ: Prentice Hall.
- Bedri, N. (2006). UN Volunteers support to combat female genital mutilation/cutting (FGM/C) in Sudan. Egypt study tour report, 10-21 June 2006. (Unpublished).
- Bibbings, L. (1995). Female circumcision: mutilation or modification? In J. Bridgeman & S. Millns (Eds.). *Law and body politics: Regulating the female body*. (pp. 151-170). Brookfield, VT: Dartmouth Publishing.
- Boal, A. (1979). *The theatre of the oppressed*. New York: Urizen Books.
- CEDPA-Egypt (1999). *Ending female genital cutting: a positive deviance approach in Egypt*. Report-in-Brief. Retrieved on September 22, 2006 from http://www.positivedeviance.org/projects/egyptfgc/egyptfgc_rep2.pdf
- CEDPA-Egypt (2005). The Abandonment of Female Genital Mutilation. Fact Sheet. Retrieved on October 10, 2006, from <http://www.cedpa.org/content/publication/detail/751>.
- Chege, J., Askew, I. & Liku, J. (2001). *An Assessment of the Alternative Rites Approach for Encouraging Abandonment of Female Genital Mutilation in Kenya*. Report by Frontiers in Reproductive Health to the United States Agency for International. Retrieved October 10, 2006 from http://www.popcouncil.org/pdfs/frontiers/FR_FinalReports/Kenya_FGC.pdf
- Communication Initiative (n.d.). Programme experiences: Ushikwapo Shikamana/Kenya. Retrieved on September 14, 2006 from <http://www.comminit.com/experiences/pdsaug/experiences-687.html>

- Conquergood, D. (2002). Performance studies: Interventions and radical research. *The Drama Review: A Journal of Performance Studies*, 46 (2), 145-156.
- Dorkenoo, E., Elworthy, S. & Minority Rights Group (1992). *Female genital mutilation: Proposals for change*. London, UK: Minority Rights Group.
- El Bashir, H. (2006). The Sudanese national committee on the eradication of harmful traditional practices and the campaign against female genital mutilation. In R.M. Abushara (Ed.). *Female Circumcision: Multicultural perspectives*. Philadelphia, PA: University of Pennsylvania Press.
- El Guindi, F. (2005). "Had this been your face, would you leave it as it is?" Female circumcision among the Nubians of Egypt. In R.M. Abusharaf (Ed.). *Female circumcision: Multicultural perspectives*. Philadelphia, PA: University of Pennsylvania Press.
- El Saadawi, N. (1980/2002). *The hidden faces of Eve*. New York: Zed books.
- El Saadawi, N. (2005). Imperialism and sex in Africa. In O. Nnaemeka (Ed.), *Female circumcision and the politics of knowledge: African women in imperialist discourses*. Westport, CT: Praegar.
- Freire, P. (1970). *Pedagogy of the oppressed*. New York: Continuum.
- FRONTIERS (2002). *Community sensitization must precede alternative coming-of-age rite*. Operational Research Summary N° 27. Retrieved on October 2, 2006 from <http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum27.pdf>
- Gender and Media Summit (2004). *Best practices to be presented to the gender and media summit, Johannesburg, South Africa*. Retrieved on October 20, 2006, from <http://www.genderlinks.org.za/docs/gemsummit/best-practices.pdf>
- Gruenbaum, E. (2001). *The female circumcision controversy: An anthropological perspective*. Philadelphia, PA: University of Pennsylvania Press.
- Harper, D. (1994). On the authority of the image: Visual methods at the crossroads. In N.K. Denzin & Y.S. Lincoln (Eds.) *Handbook of Qualitative Research* (pp. 403-412). Newbury Park, CA: Sage.
- Kenyon, P. (2007). Egypt Reinforces Ban on Female Circumcision. Retrieved on July 14, 2007, from National Public Radio <http://www.npr.org/templates/story/story.php?storyId=11767534>
- Levin, T. (2003). Female genital mutilation and human rights. *Comparative American Studies*, 1(3), 285-316.

- Levine, E. (2004). 'Moolaadé' is a cutting depiction of female abuse and mutilation. *The New York Amsterdam News*. November 18-November 24 edition.
- Lightfoot-Klein, H. (1989). *Prisoners of ritual: an odyssey into female genital circumcision in Africa*. Binghampton, NY: The Haworth Press.
- Lionnet, F. (2005). Women's rights, bodies and identities: The limits of universalism and the legal debate round excision in France. In O. Nnaemeka (Ed.). *Female circumcision and the politics of knowledge: African women in imperialist discourses*. Westport, CT: Praeger.
- Mackie, G. (2002). Female genital cutting: the beginning of the end. In B. Shell-Duncan & Y. Hernlund (Eds.). *Female "circumcision" in Africa: culture, controversy and change* (pp. 253-281). Boulder, CO: Lynne Rienner Publishers.
- Masterson, J. & Swanson, J. (2000). Female genital cutting: breaking the silence, enabling change. Promoting Women in Development (PROWID) Synthesis paper. Retrieved October 3, 2006, from <http://www.cedpa.org/content/publication/detail/701>.
- Mekuria, S. (1995) Female genital mutilation in Africa: Some African views *ACAS Bulletin*, 44/45 (Special Issue on Health and Africa). Retrieved on October 1, 2006 from the Association of Concerned African Scholars Website (ACAS): <http://www.prairienet.org/acas/bulletin/mekuria.html>
- Miller, M., Monetti, F. & Landinia, C. (2005) *Changing a harmful social convention: female genital mutilation/cutting*. Unicef Innocenti Research Centre, Florence, Italy. Retrieved on October 3, 2006 from <http://www.childinfo.org/areas/fgmc/unicefdocs.php>.
- Mohamud, A., Radeny, S. & Ringheim, K. (2006) Community-based efforts to end female genital mutilation in Kenya: Raising awareness and organizing alternative rites of passage. In R.M. Abusharaf (Ed.). *Female circumcision: Multicultural perspectives*. Philadelphia, PA: University of Pennsylvania Press.
- Morphy, H. & Banks, M. (1997). Introduction: Rethinking visual anthropology. In H. Morphy & M. Banks (Eds.). *Rethinking visual anthropology* (pp. 1-35). New Haven and London: Yale University Press.
- Mwangaza Action Association (2003). Replication of the TOSTAN programme in Burkina Faso: How 23 villages participated in a human rights-based education programme and abandoned the practice of female genital cutting. Retrieved October 5, 2006 from http://www.popcouncil.org/pdfs/frontiers/reports/burkina_fgc_process_eng.pdf
- Nnaemeka, O. (Ed.). (2005). *Female circumcision and the politics of knowledge: African women in imperialist discourses*. Westport, CT: Praeger.

- Nwankwo, C. Parallax sightlines: Alice Walker's sisterhood and the key to dreams. In O. Nnaemeka (Ed.). *Female circumcision and the politics of knowledge: African women in imperialist discourses*. Westport, CT: Praeger.
- Obermeyer, C. (1999). Female genital surgeries: The known, the unknown, and the unknowable. *Medical Anthropology Quarterly*, 13, 79-106.
- Papa, M.J., Singhal, A. & Papa, W.H. (2006). *Organizing for social change: A dialectic journey of theory and praxis*. Thousand Oaks, CA: Sage.
- Pascale, R. & Sternin, J. (2005). Your company's secret change agents. *Harvard Business Review*, 83(5), 72-81.
- Population Communications International (n.d.). PCI programs/Kenya. Retrieved on October 20, 2006 from http://www.population.org/programs_kenya.shtml
- Population Communications International (2004). Annual Report. Retrieved on September, 14 2006 from http://www.population.org/annualreport/pci_ar2004.pdf
- Population Council (1999). TOSTAN - Breakthrough in Senegal: The process that ended female genital cutting in 31 villages. African operation research & technical assistance project II. Retrieved September 14, 2006 from http://www.popcouncil.org/pdfs/frontiers/OR_TA/Africa/PD_Sen_Tostan_orta.pdf
- Population Council, GTZ & TOSTAN (2004). The TOSTAN program: Evaluation of a community based education program in Senegal. Retrieved on October 20, 2006 from http://www.popcouncil.org/pdfs/frontiers/FR_FinalReports/Senegal_Tostan%20FGC.pdf
- Population Media Center (2006). *Final Narrative Report of Population Media Center Project in Sudan: Radio Serial Drama to the Packard Foundation*. (Unpublished).
- PRB (Population Reference Bureau) (2001). *Abandoning female genital cutting: Prevalence, attitudes, and efforts to end the practice*. Retrieved October 10, 2006 from http://www.prb.org/pdf/AbandoningFGC_Eng.pdf
- Positive Deviance Initiative (n.d.). Use of PD approach for advocacy against female genital cutting in Egypt. Retrieved on October 13, 2006, from <http://www.positivedeviance.org/projects/egyptfgc/>
- Rahman, A. & Toubia, N. (Eds.) (2000). *Female genital mutilation: A guide to laws and policies worldwide*. New York: Zed Books.
- Reinharz, S., Levin, T. & Walker, J. (Eds.) (2006). *Through the eyes of Nigerian artists: confronting female genital mutilation*. Exhibition Catalogue, Women Studies Research Center, Brandeis University.

- Shell-Duncan, B. & Hernlund, Y. (Eds.) (2000). *Female "circumcision" in Africa: Culture, controversy and change*. Boulder, CO: Lynne Rienner Publishers.
- Singhal, A. Cody, M.J., Rogers, E.M. & Sabido, M. (Eds.) (2004). *Entertainment-education and social change: History, research, and practice*. Mahwah, NJ: Lawrence Erlbaum Associates.
- Singhal, A. & Rattine-Flaherty, E. (2006). Pencils and photos as tools of communicative research and praxis: Analyzing Minga Perú's quest for social justice in the Amazon. *Gazette*, 68(4): 313-330.
- Singhal, A. & Rogers, E. M. (2002). A theoretical agenda for entertainment-education. *Communication Theory*, 12 (2), 117-135.
- Singhal, A. & Rogers, E.M. (1999). *Entertainment-education: A Communication strategy for social change*. Mahwah, NJ: Lawrence Erlbaum Associates.
- Singhal, A. & Rogers, E.M. (2003). *Combating AIDS: Communication strategies in action*. Thousand Oaks, CA: Sage Publications.
- Singhal A., Sharma D., Papa M.J. & Witte K. (2004). Air cover and ground support: Integrating entertainment-education with community-based action and service delivery in India. In M.J. Cody, A. Singhal, M. Sabido & E.M. Rogers (Eds.). *Entertainment-education and social change: History, research, and practice* (pp. 351-375). Mahwah, NJ: Lawrence Erlbaum Associates.
- Skaine, R. (2005). *Female genital mutilation: Legal, cultural and medical issues*. Jefferson, NC: McFarland & Company, Inc.
- Snow, R. (2001). Editorial. "Female genital cutting: distinguishing the rights from the health agenda". *Tropical Medicine and International Health*, 6 (2), 89-91.
- Spadacini, B. & Nichols, P. Campaigning against female genital mutilation in Ethiopia using popular education. *Gender and Development*, 6 (2), 44-52.
- Sub-Saharan Africa Success Stories (2003). *Traditional Birth Attendant Advocates for the Elimination of Female Genital Cutting*. United States Agency for International Development (USAID). Retrieved on October 5, 2006, from http://africastories.usaid.gov/search_details.cfm?storyID=199&countryID=7§orID=0&yearID=3
- TOSTAN website (2006). Retrieved on October 18, 2006, from http://www.tostan.org/news-Mar20_06.htm
- Toubia, N. & Izett, S. (1998). *Female Genital Mutilation: An overview*. Geneva: World Health Organization.
- Toubia, N. (1999) *Caring for women with circumcision: A technical manual for health care Providers*. New York: RAINBO. Retrieved September 15,

- 2006 from <http://www.serc.mb.ca/SERC/content/dload/HealthEffectsofFemalGenitalCuttingFemaleGenitalMutilation/file>
- Unicef (2005) *Female Genital Mutilation/Cutting: a Statistical Exploration*. Retrieved on October 3, 2006, from <http://www.childinfo.org/areas/fgmc/unicefdocs.php>.
- United Nations Volunteers/UNFPA (2006). *UN Volunteers support to Combat Female Genital Mutilation/Cutting (FGM/C) in Sudan Egypt Study Tour Report*, 10- 21 June 2006 (Unpublished).
- USAID (2003) *Traditional Birth Attendant Advocates for the Elimination of Female Genital Cutting*. Retrieved on October 5, 2006, from http://africastories.usaid.gov/search_details.cfm?storyID=199&countryID=7§orID=0&yearID=3
- Walker, A. (1992). *Possessing the secret of joy*. San Diego, CA: Harcourt Brace Jonavich.
- Walker, A. & Parmar, P. (1996). *Warrior marks: female genital mutilation and the sexual blinding of women*. San Diego, CA: Harcourt Brace Jonavich.
- World Health Organization (1998). *Female genital mutilation: an overview*. Geneva: World Health Organization.
- World Health Organization (1999). *Female genital mutilation programmes to date: what works and what doesn't, a review*. Retrieved on October 1, 2006, from http://www.who.int/reproductive-health/publications/fgm/fgm_programmes_review.pdf
- World Health Organization Media Center (2000). *Female Genital Mutilation fact sheet N° 241*. Retrieved September 15, 2006, from <http://www.who.int/mediacentre/factsheets/fs241/en/>
- WHO study group on female genital mutilation and obstetric outcome. (2006). Female genital mutilation and obstetric outcome: WHO collaborative prospective study in six African countries, *Lancet*, 367, 1835-41.
- Yount, K. M. (2004). Symbolic gender politics, religious group identity, and the decline in female genital cutting in Minya, Egypt. *Social Forces*, 82(3), 1063-1090.