

Dialogue Between Generations

A Participatory Approach to Promote Reflection and Action Against Female Genital Mutilation



**Report on the Participatory Methodology used in a
Community Project on Female Genital Mutilation (FGM)
in Velingara, Senegal**

THE
GRANDMOTHER
PROJECT STRONG GRANDMOTHERS HEALTHY COMMUNITIES

Judi Aubel, PhD, MPH & Bridget Lombardo, MA
The Grandmother Project
with
World Vision/Velingara, Senegal
April 2006

The Grandmother Project

The Grandmother Project (GMP) is an American non-profit organization established in 2005. GMP aims to develop community approaches that promote positive and sustained improvements in the lives of women, children and families by building on existing cultural and community values, roles and resources. GMP's approach is one of *organizational capacity building*. In this light, all of GMP's work is carried out in collaboration with other organizations that have ongoing operational programs at the community level. GMP aims to strengthen the capacity of such organizations to systematically involve GMs as resource persons in their programs in order to promote positive change in families and communities.

For other resources on the work of the Grandmother Project:

www.grandmotherproject.org

Email address: grandmotherproject@hotmail.com

Judi Aubel, Director of The Grandmother Project: judiaubel@aliceposta.it

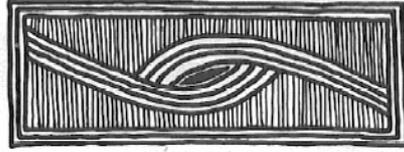


Acknowledgments

The success of the FGM project reported on here is largely due to the participation and generosity of the communities visited during the study as well as to members of the communities who attended the forum dialogue workshops. Their openness and commitment to ensuring the growth and well-being of young girls, as well as that of other family members, were key elements in the success of this project. The complete list of workshop participants is included in the appendix.

World Vision Velingara provided all of the financial, administrative and human resources necessary to facilitate accomplishment of the goals of the activity.

A special note of appreciation goes to three individuals who played leading roles as facilitators of the community workshops, namely: Mamadou Coulibaly of IDEN/Velingara; and Mariama Mané & Dado Balde who are World Vision/ Velingara staff.



Intergenerational dialogue workshop participants
at the end of the two-day meeting in Kounkané, Senegal

“Be grounded in your culture. Preserve its positive traditional values
and let its abusive customs disappear.”

Amadou Hampâté Ba
A Letter to the Youth, 1985

Participant comments during the “Forum-Dialogue” Workshops

Cultural values are being lost

“In the past, people knew their culture. In the evening, the children stayed home with their grandmothers and listened to stories. That was how they were educated. Now, children don’t have time to absorb their culture. They go out and spend the evening at their friends’ houses, watching television and listening to music.”

***Thierno Moussa Sabaly, Literacy Worker,
Kayel Bassel***

“We should go back to our roots. We need to recognize what is positive within our culture and hold on to it vigorously.”

Demba Balde, World Vision Staff Member, Velingara

“If we lose our cultural values, we will be forced to replace them with other peoples’ values.”

Abdoulaye Balde, Religious Leader, Velingara

The importance of grandmothers in society

“Grandmothers are the pillars of society and preservers of cultural traditions. Children today have distanced themselves from their elders and do not know their own culture or their language. If you do not know your own culture, it is a big problem. If you do not know your grandmother, it is a big problem for you and for society.”

Amadou Balde, Man, Saare Faramba

The attitude towards FGM past and present

“We never practiced circumcision maliciously but rather to educate the girls, to develop in them a sense of solidarity, to prepare them for life as women. Now we understand that, as grandmothers, we have a responsibility in this situation. We should organize ourselves to make a plea to our sisters and our peers to put an end to this practice.”

***Koujiji Couibaly, Traditional Midwife,
Grandmother Leader, Kerewane***

Assessment of the Forum-Dialogue Workshops

“During these two days, we exchanged ideas, we learned from one another. Peace reigned during our discussions. We did not discuss the law (against FGM) and our traditions were not criticized. No one told us we had to stop doing circumcision. We received new information on FGM and we were allowed to discuss it among ourselves.”

Mama Saliou Diallo, Village Chief, Djinerai



Dancing to a song that promotes cultural traditions

<i>Maamaa waawii aadaa men</i>	<i>Grandmother, how can we preserve our customs?</i>
<p>A yoo min mi waawi Mi waawii aadaa men Maamaa no mbatta haa mi ñipna taali do aadaa men Haa dañen hen famde aduna A yoo min mi waawi Mi waawii aadaa men Maamaa no mbatta haa mi ñipna tinndi ka aadaa men Ha dañen hen famed aduna A yoo min mi waawi Mi waawii aadaa men Maamaa no mbatta ha mi ñipna lambu ko aadaa men Ha dañen hen famed aduna.</p>	<p>Ah yes, I know I know our customs Grandmother, how can we perpetuate our storytelling? It is our custom Ah yes, I know, I know our customs Grandmother, how can we perpetuate our riddles? It is our custom Ah yes, I know I know our customs Grandmother, how can we perpetuate our traditional wrestling? It is our custom.</p>

Table of Contents

Executive Summary

I. Background

II. The Methodology of “Dialogue between Generations”

A. Principles and Approaches

B. Phase 1: The Community Study: “Listen to the community”

1. Summary of the Results of the Study
2. Observations on the Methodological Approach Used in the Study

C. Phase 2: The Forum-Dialogue Workshops on Culture and FGM: “Encourage intergenerational dialogue on an ancestral practice”

1. First Day of the Forum-Dialogue Workshops
2. Second Day of the Forum-Dialogue Workshops
3. Feedback from the Participants in the Workshops

III. Conclusions from the “Dialogue between Generations”

Appendices

- A. Themes Investigated in the community study on FGM
- B. Forum-Dialogue Workshop Participants and their Home Villages

Executive Summary

Between December 2005 and March 2006, the Non Governmental Organizations (NGOs) *The Grandmother Project* and *World Vision* collaborated on a project in the southern Senegalese district of Velingara. The goal of this project, called “Dialogue Between Generations”, was to engage local communities in reflection and discussion on the widespread practice of Female Genital Mutilation (FGM), and to explore options for ending it. The methodology of this project consisted of two carefully considered phases, designed to gather information and then initiate discussion on the issues of concern in a culturally sensitive manner.

The first phase was a qualitative study of attitudes, beliefs, roles, practices, and experiences related to FGM, conducted through interviews with different categories of people in the communities. This enabled discussion to be initiated about FGM, which is seldom openly discussed, in small homogenous groups.

The second phase was a series of “Forum-Dialogue” Workshops on culture and FGM that brought together people from the different categories, along with health workers and development agents, to expand the discussion of the issues and develop community-wide strategies to address them.

The principles on which the project was based included intergenerational communication, community participation, use of development agents as discussion facilitators, and involvement of the community in identifying solutions for the elimination of FGM.

The results from the initial study indicated that communities were concerned about overall changes in cultural values and traditional education, including attitudes towards FGM. Many community members valued circumcision for girls and women, and resented being lectured by government officials, NGOs, and other development agents on the negative aspects of FGM.

The subsequent workshops were conducted over 2 day periods. On the first day general themes were addressed, namely, cultural traditions and values, the role of elders - notably grandmothers - in society and in development programs, and current positive and negative changes related to the education of girls. Workshop participants then developed a set of recommendations, including reinforcing traditional storytelling in the education of children, reinstating group educational sessions of girls aged 12-14, strengthening communication within families and communities, and promoting the role of grandmothers in development programs.

On the second day the workshops focused specifically on FGM. Discussed were its pros and cons, its risks to the health and well-being of girls and women, religious positions on FGM, and strategies for encouraging reflection and dialogue on FGM at the community level. The participants formulated specific recommendations for addressing the issue in their communities, largely involving organizing meetings amongst various community members to discuss FGM. There was a broad consensus at the end of the workshops that any strategy to promote the elimination of FGM must definitely involve grandmothers.

The conclusions from feedback about the project included the following:

- Both phases of the project were essential for its success.
- Community members greatly appreciated being asked to propose strategies for the elimination of FGM.
- Expert facilitators were necessary to encourage successful dialogue amongst participants at the workshops.

- Grandmothers can play a key role in the strategies to eliminate FGM, and are open to new ideas, especially if approached through dialogue and negotiation.

I Background

In southern Senegal, in the region of Kolda, *World Vision* (WV) has been carrying out development activities for several years. The district of Velingara is a priority area where WV has been working on a variety of programs to improve the living conditions of families and communities. Many of these programs target the health and education of girls.

In this district, Female Genital Mutilation (FGM) is a widespread practice; approximately 90% of women are circumcised. FGM is a cultural tradition practiced among Halpulars, Sarakoles, Bambaras, Mankinkas, and some Diolas. Type I or type II are the most common types of FGM, in which part or all of clitoris is removed as well as sometimes the labia minora. However, type III, the total removal of the female genitals and the sewing of the wound, is also practiced by some. Although a law was passed in January of 1999 making FGM illegal in Senegal, this law is rarely enforced.

Although FGM has always been of concern to WV, this problem had heretofore not been specifically addressed. WV was looking for a strategy to encourage the discussion of FGM at the community level so that the communities themselves could decide on actions to adopt in order to eliminate this dangerous practice.

Because of the key role that grandmothers play in the perpetuation of this ancestral practice, WV asked for the support of *The Grandmother Project* (TGP), an organization that specializes in approaches involving grandmothers as resource persons in community health programs.

Within the framework of a partnership between the two organizations, an exploratory project was developed. The aim of this project was to identify the attitudes of the communities towards this deep-rooted practice and to collect recommendations on how to overcome the problem.

This report describes the project, as it was conducted in two phases

Phase 1: A qualitative and participatory study on the attitudes, beliefs, roles, practices and experiences related to FGM.

Phase 2: A series of “Forum-Dialogue” Workshops on culture and FGM with community representatives, health workers and development agents.

The approach used and the results of each activity are presented here. The study was conducted between December 2005 and February 2006. The Forum-Dialogue Workshops took place during the month of March 2006.

II The Methodology of “Dialogue between Generations”

A Principles and Approaches

The following are the underlying principles of the approach used in Dialogue between Generations, found to be critical for its success.

1) Intergenerational communication

In the past there has been very little discussion about FGM within families, and even less within the community, given the taboo nature of this practice. For this project, priority was given to the promotion of discussion and reflection on this practice across the community as a whole, and particularly between different generations of women.

2) Community participation

It is important to involve all actors within the community in the analysis of the problem as well as in the search for solutions, whether they have a direct or indirect influence on the practice itself.

3) Use of Development Agents as discussion facilitators

In a strategy that aims to promote the abandonment of FGM, the role of development agents is to promote discussion, share information, and encourage the members of the community to develop their own ideas about dealing with the issue.

4) Identification of solutions within the communities

The best solutions to a community problem are those that are identified in collaboration with the communities rather than those that are proposed or imposed on the community by external agents.

B Phase 1: The Community Study

“Listen to the community”

The first activity in the approach used for “Dialogue between Generations” consisted of a community study with two objectives:

1. To understand the attitudes, beliefs, roles, practices, and experiences of the community, as well as public health workers, on the subject of FGM
2. To establish trust and increase the openness of the members of the community to participate in collective forums to discuss the issue of FGM.

Because of the nature of the information sought in the study, a qualitative methodology was adopted to collect comprehensive information on the different factors associated with FGM. The information was collected during individual or group interviews, as well as during spontaneous discussions when the opportunity arose. [See Appendix A for the themes of the study.]

All of the interviews were semi-structured, conducted using interview guides rather than questionnaires.

Most studies on FGM adopt a rather narrow conceptual orientation. Most often, research on this subject is based solely on information collected about the knowledge, attitudes, and practices associated with FGM. Moreover, the information is only collected from certain community groups, usually young men and women.

“To find a solution to a problem such as FGM, the problem must first be analyzed within its socio-cultural context. If it is analyzed in isolation, the analysis will never be either complete or reliable.”

This study used a more thorough approach designed to understand FGM in its complete socio-cultural context. Information was collected not only on factors directly associated with FGM, but also on broader issues related to the roles of the family and community members involved in the lives of those circumcised. The process of cultural change in general was examined, for a better understanding of people’s more specific attitudes towards FGM.

It was also important to interview people from all parts of the community, both those directly and indirectly involved with FGM, in order to obtain a truly comprehensive picture of its impact on society. To this end, interviews were conducted with village chiefs and community leaders, religious leaders, grandmothers, both men and women in the community, World Vision staff, health workers, and staff of other NGOs. In total, 526 persons were interviewed individually or in groups.

This first phase of the project was not just a “preparatory phase” for the workshops that followed, but was also a fundamental step towards building trust and developing local capacity to deal with the problem of FGM.

1. Summary of the Results of the Study

The results of the study are presented in the complete study report, entitled “Cultural Values, Education of Girls and FGM.” Some of the key results are summarized below.

- **Impact of positive and negative change on the education of children**

The interviewees identified both positive and negative changes in society, with negative changes found to be more numerous and significant. These changes included a weakening of the moral, cultural, and religious education of children, diminishing communication between children and elders, lack of respect for elders, the diminished impact of school on the values and behavior of children, the negative influence of music and television, the abandonment or change in cultural traditions (e.g., the use of modern music instead of traditional music during ceremonies), the decreasing use of stories for teaching, and the disappearance of educating girls in groups.

- **Concerns of communities in the face of abandonment of cultural values and changes in the education of children**

There was a broad consensus among the members of the communities that two serious interconnected problems threatened society. Increasingly, parents are having difficulties raising and educating their children in the traditional ways, which then leads to a generational loss of cultural values. Although the communities are concerned, neither they, nor the organizations or services that support them, seem to be seeking to confront this phenomenon systematically.

- **Justification of FGM by the communities**

There were many explanations given for the importance and necessity of FGM for women and for society. These included signaling the passage of girls from childhood to adult life, showing respect for the culture, strengthening a woman's character, addressing issues of hygiene, sexuality, and reproductive health, integrating women into society, and the preference of men for excised women.

- **Rite of circumcision, past and present**

-

Traditionally, genital cutting was performed on young girls, sometimes as early as the age of five, although most often at the moment of puberty. The excision was performed on a group of girls, and then followed by a period of collective education. Currently, in both rural and urban areas, some families have completely dropped the practice. Others continue to practice it on their infant girls, clandestinely. Sometimes girls are taken to neighboring countries such as The Gambia, Guinea, and Guinea Bissau, where the custom is still followed openly. In other cases, circumcisers from these countries travel to Senegal to perform these rites. This has always been "women's business", and men are seldom informed or involved. Traditionally it is the oldest women, with the most experience and stature, who are in charge of these circumcision ceremonies.

- **Attitudes and reactions towards the law against FGM**

Most of the interviewees were unhappy with the manner in which the law against FGM was enacted. They complained that "the law against FGM was imposed" upon them by outside forces, and that "this law is against our culture".

- **Activities of NGOs in the fight against FGM**

There have been relatively few educational and awareness-building activities concerning FGM in the communities where this study was conducted. Any activities that were carried out were conducted in a top-down manner, rather than with participatory methods. Moreover, although grandmothers play a predominant role in the perpetuation of female circumcision, no organization working on this issue in the area has explicitly involved them.

2. Observations on the Methodological Approach Used in the Study

At the start, the objective of the study was to gather information on FGM in order to contribute to the design of a project to deal with this problem. However, as the study progressed, it became apparent that the interviews with the community groups served not only to collect information, but also to "break the ice" on a taboo subject.

The group interviews contributed to opening up discussion among the members of the communities, and between them and the development agents (of WV and TGP). Most of the interviewees had never participated in a discussion with development agents on this subject. The impartial attitude adopted by the interviewers proved very important for putting people at ease and allowing them to share their opinions on this sensitive subject, without being criticized. This approach also served to spark the interest and involvement of community members in future discussions of the issue.

C. Phase 2: The Forum-Dialogue Workshops on Culture and FGM

“Establishing intergenerational dialogue on an ancestral practice”

The second phase of the “Dialogue between Generations” project consisted of presenting the results of the study to the communities and development agents, thus stimulating discussion, and hopefully, identifying strategies for curtailing the practice of FGM. “Forum-Dialogue” Workshops in four locations brought together previous interviewees, other community leaders and members, health and education workers, and development agents for two days of discussion and planning. [See Appendix B for the list of participants in the four workshops.]

The objectives and subject material of these workshops were developed based on the conclusions of the study. The results of the community study clearly showed that FGM was one part of a whole system of values and cultural traditions that was in the process of evolving. The study revealed that there was great concern that many of these longstanding values, practices, and cultural traditions, including FGM, were being lost.

A two part methodological approach was adopted for successfully running the workshops, in an effort to maximize the participant’s willingness to consider change.

1) Avoid criticizing the culture

- FGM is a polarizing and largely taboo subject; overt criticism and other perceived attacks of local culture will offend rather than engage community members in productive discussion.

2) Employ a balanced approach: Encourage positive cultural practices and values while discouraging harmful ones.

- When a society feels that one of its traditions, such as FGM, is being attacked, there is a strong tendency to reject the criticism and refuse to change.
- A *balanced approach* is indispensable to support efforts for change that aim to encourage certain beneficial practices and discourage others.
- Experience has shown that the communities are more receptive to change when appreciation is shown for other elements of their culture.

This notion of evenhanded, honest cultural evaluation reflects the ideas of Amadou Hampâté Ba (1901-2002), a philosopher from the region. He emphasized the importance of preserving good values and cultural practices for the well-being of the whole society, while abandoning those that are not beneficial.

“Be grounded in your culture. Preserve its positive traditional values and let its abusive customs disappear.”

Amadou Hampâté Ba
A Letter to the Youth, 1985

Objectives of the Forum-Dialogue Workshops

Three objectives were defined for the “Forum-Dialogue” Workshops:

1. To share the results of the community study on cultural changes and FGM.
2. To discuss the best ways to encourage reflection and dialogue on FGM in the communities.
3. To initiate dialogue on the uses of cultural traditions and community resources to ensure the proper development and well-being of girls and women.

These objectives clearly reflect the key principles and the methodology of “Dialogue between Generations”: Intergenerational communication, community participation, the role of development agents as facilitators of dialogue, and the idea that solutions to FGM should come from the communities themselves.

Organization of the Forum-Dialogue Workshops

Four Forum-Dialogue Workshops were organized, three with participants from rural areas and the fourth with people from the town of Velingara. Each workshop lasted two entire days. Each brought together about 25 participants, including village chiefs and community leaders, religious leaders, grandmother leaders, young women leaders, male leaders, teachers, health workers, and development agents from WV and other NGOs working in the district.

As a preliminary step to participation in the meetings, an individual interview was held with each participant to explain the issues and the objectives, the fact that the group of participants would be composed of men and women of different generations, and that all the participants should be ready to share their ideas on FGM. On the basis of this explanation, the individuals were able to decide whether or not to participate in the meeting.

Educational Approach used during the Workshops

Typically, in their programs to eliminate FGM, NGOs and other organizations adopt a directive approach to “inform” people about the harmfulness of FGM, to “explain” the laws against FGM, and to “entreat” them to abandon the practice. These directive approaches do not have a significant impact on attitudes and practices, since people perceive these ideas and solutions as being imposed upon them.

In the Forum-Dialogue Workshops of this project, the goal was not to convince the participants to adopt any particular position, but rather to promote dialogue and reflection on the issues, where there had previously been none. The hope was that

the participants would continue the debate, and even take action, once they returned to their families and communities. To this end, a non-directive approach using participatory adult education methods was employed. Participants were encouraged to share their opinions, analyze their own experiences with the subjects under discussion, and suggest strategies for resolving the problems that they had identified. During these sessions, the role of the facilitators was to guide the process of dialogue and sharing, without imposing their own opinions.

One objective of the meetings was to encourage the participation of everyone. In the rural areas in particular, women and young people often are not used to expressing themselves easily in mixed groups, nor do they have the confidence to do so. Therefore, a special effort was made to encourage them to share their opinions. This was done by attaching importance to everyone's experiences, by encouraging everyone to respect the views of others, and by holding, beforehand, several exercises and discussions in small homogeneous groups (in terms of sex and age) to help people feel comfortable about expressing themselves.

For each of the topics discussed, several activities were used to facilitate the discussion and the sharing of ideas among the participants. These activities included:

- Presentation of summary points of the study followed by discussion
- Use of songs on the subjects to be analyzed
- Reading quotations related to the subjects
- Forming working groups to discuss in more depth some of the results of the study and to formulate recommendations for actions that could be taken by the communities
- Projection of a film on FGM followed by discussion in small groups on the different opinions presented in the film
- Short presentations by a community health worker and a religious leader, followed by questions and discussion.

1. First Day of the Forum-Dialogue Workshops

Topics of discussion

On the first day of the two day workshops, the following topics were discussed:

- Important values and cultural traditions in society.
- The role of elders in society and in development programs.
- The role of grandmothers in the well-being of children and women.
- Cultural mechanisms that contribute to the development and education of girls.
- Negative and positive changes in society that affect the development and education of girls.
- Strategies to strengthen the traditional values and cultural practices that are beneficial to girls.

Recommendations for strengthening positive cultural values and practices

At the end of the first day, the participants formulated the following recommendations for strengthening positive values and preserving beneficial practices:

- Promote and strengthen the use of stories to teach children, at home, in the community, and at school.
- Reinstate group educational sessions of girls aged 12-14 years old, which had previously only been convened following FGM ceremonies.
- Clarify concepts of “children’s rights” for parents and children.
- Organize sessions with parents to discuss educational and disciplinary methods for children that are not based on corporal punishment.
- Promote the role of grandmothers in the families, communities, schools, and in development programs.
- Strengthen communication between school, family, and community
- Improve the attitude of some teachers towards the families and the elders in the communities.
- Integrate cultural values and traditions in school programs.
- Conduct discussions in the communities to identify ways to decrease the negative influence of television on young people.
- Strengthen the organization of cultural ceremonies (baptisms, marriages, and funerals) and encourage the use of their traditional components. (e.g. music)

2. Second Day of the Forum-Dialogue Workshops

Topics of Discussion

On the second day, the workshops focused directly on FGM, and its impact on the lives of girls and women. The following topics were discussed:

- General pros and cons of FGM.
- Health risks of FGM.
- The Islamic position on FGM.
- Strategies for encouraging reflection and dialogue on FGM at all levels of the community.

Recommendations for promoting community-wide discussion of FGM

Following the discussion, the participants addressed the issue of taking what they had learned and sharing it with their communities. They identified distinct groups within those communities, and developed specific recommendations for engaging each on the issue of FGM.

- *Local authorities, Chiefs, and community leaders*
 - Organize meetings with them to talk about the dangers of FGM and the negative affects it has on women.

- *Grandmothers*
 - Organize meetings with grandmothers and health workers to discuss the negative consequences of FGM.
 - Encourage grandmothers to put pressure on the circumcisers to abandon the practice.
 - Involve grandmothers in the organization of group educational sessions for girls, involving “alternative rites of passage”.
- *Circumcisers*
 - Assist those who perform FGM in finding other means of generating income.
- *Religious leaders*
 - Organize sessions with religious leaders who are opposed to the practice to discuss the position of Islam on FGM
 - Encourage the imams to discourage genital cutting in their Friday sermons in the mosque
- *Women of reproductive age*
 - Conduct awareness building meetings with chiefs and community leaders so that they can encourage women, both young and old, to abandon FGM.
 - Organize meetings with women of reproductive age and health workers to discuss the negative consequences of FGM.
- *Adolescent girls*
 - Organize talks with adolescent girls, with the support of health workers, to discuss FGM. Both girls in school and those who do not attend school should be targeted.
- *Young men*
 - Organize talks with young men, in the schools, and at the cultural and sports associations, to discuss FGM, with the support of health workers.

Consensus on the key role of grandmothers in a strategy to eliminate FGM

At the end of each of the workshops there was a broad consensus that any strategy to promote the elimination of FGM must definitely involve groups of grandmothers. Participants supported this point of view for two reasons:

- 1) Grandmothers are historically expected to preserve the cultural norms and traditions, and therefore they must be a part of any process that aims to bring about sustained change.
- 2) Grandmothers are the ones closest to the circumcisers, and will thus have the greatest opportunity to influence them to change their practices.

Grandmothers themselves are of this opinion and are aware of the role they can play in encouraging the circumcisers to stop this practice. One grandmother leader declared: “During the meeting, I realized that if we (grandmothers) do not change our attitude, there will be no lasting change.”

3. Feedback from workshop participants

Feedback was gathered on all aspects of the project, from the topics discussed to the methodology employed. The following are but a few of the opinions expressed by participants on the various aspects of the project.

Feedback on how the issue of FGM was addressed

All of the participants were satisfied with the non-directive approach used, which they felt was more appropriate than the directive techniques that are often used in discussions focused ending the practice of FGM.

“The approach is very good because the whole discussion takes place in the cultural context and with the idea of promoting what is good and discouraging what is negative. In the past, intellectuals would come only to criticize our traditions and propose strange ideas. You have begun by appreciating what exists in our tradition and not criticizing it directly.”

Bassirou Diao, Community Health Worker, Kandaye

“During these two days, we exchanged ideas and learned from each other. Peace reigned during our discussions. We did not discuss the law (against FGM) and our traditions were not criticized. No one told us that circumcision has to stop. We received new information about FGM and we were able to discuss it among ourselves.”

Demmo Sabaly, Grandmother Leader, Saare Yero Gano

Feedback on the educational approach:

The participants very much appreciated the educational approach used during the meetings and gave feedback on several aspects of it, as follows:

Use of the local language

Workshops and meetings organized by government services and other development programs/projects usually use the French language. For some people, this is an obstacle to understanding and especially to participation in the discussion. The Forum-Dialogue Workshops were conducted exclusively in Pular, which was greatly appreciated by all the participants.

“We are very happy that from beginning to end all the discussions were in Pular. One of our most important cultural values is our language.”

Alpha Kande, Village Chief, Saare Faasi Pathi

Mixed groups of participants

Traditionally, there is no open and spontaneous communication between men and women or between the young and old in community meetings. Most of the participants felt at ease in spite of the fact that the workshops brought together both men and women of different ages.

“It is a very good idea to bring everyone together to speak about FGM so that the decision comes from the group as a whole.”

Bobo Dia, Teacher, Kounkane

“There is often a block in societies because the different segments of society do not speak openly. It is good to bring together men and women, of different ages, so that everyone can learn from each other.”

***Mamadou Alpha Mballo, Elder,
Former Senator of the Republic, Velingara***

“It is good to include the customary chiefs and the religious leaders because they have an important role in decision making.”

Thierno Balde, Man, Kandia

“I came with my village chief. I think the information has fallen on open ears.”

Ladde Mballo, Grandmother, Saare Faasi Pathi

Nevertheless, some participants were not comfortable with the mixed group, and defended the traditional idea that there should not be open discussion between the young and the old.

“It wasn’t a good idea to invite the young and the old together.”

Boubacar Diallo, Elder, Velingara

Respect everyone’s opinion

A basic concept of the workshops was that all the participants had an opinion on the topics being discussed, based on their own experiences, and that these should be respected by everyone. Applying this principle in the workshops was highly appreciated.

“There was mutual respect between the participants and open communication among everyone.”

Ndey Balde, President of the Health Committee, Velingara

“Even if we did not go to school, we understood everything, we shared our knowledge and everyone appreciated our ideas.”

Fatamata, Grandmother Leader, Saare Madia

“In other workshops, we grandmothers were criticized for our traditional ideas. That’s why, before coming, we were afraid to participate, but we are happy that we could contribute without being criticized.”

Oumou Diao, Grandmother Leader, Saare Madia

Exchange rather than lecture

Many participants expressed satisfaction with the participatory approach which promoted “exchange” rather than just “listening.”

“In the past, I attended many meetings on different subjects. The other times, it was always like having a teacher come and give us his knowledge. My role was just to listen. This time the facilitators encouraged me to give my opinion.”

Bassirou Diao, Community Health Worker, Kandaye

Performance of the facilitators

The role of the facilitators was to guide the discussions on the different subjects, to show respect for all the opinions expressed, and not to impose their own ideas.

“Everyone felt very comfortable because, during the discussions, you couldn’t tell the difference between the facilitators and the participants.”

***Malang Sanye, District Education Supervisor,
IDEN, Kayel Bassel***

“The facilitators were exemplary. They were very modest and they listened to everyone’s ideas.”

El Hadji Doye Sabaly, PCR, Saare Coly Salle

Small group discussions

Bringing together participants of the same sex and age put them at ease and encouraged them to share their opinions freely.

“The small group discussions greatly facilitated the sharing of ideas. Everyone felt comfortable expressing opinions among equals.”

***Djenaba Maballa, President of the Women’s Group,
Mballocounda***

“The small groups were very helpful in promoting contact between the people. After two days, it was like we all belonged to the same family.”

Bintou, Traditional Midwife, Kourebambaje

III. Conclusions from the “Dialogue between Generations”

Two complementary activities essential for an effective outcome

The two part methodology of the “Dialogue between Generations” project, the initial community study and the Forum-Dialogue Workshops, worked well to involve the members of the community in identifying cultural issues of local concern (especially FGM), and in devising strategies to address those issues at the community level. The study without the workshops would have left the project incomplete, while the workshops would not have enjoyed the success they did without the groundwork laid by the study. Both components were important to the project and dependent on each other to maximize their effectiveness.

Appreciation of the approach by the community members

The approach used for this project, which was based on respect for cultural values, community participation, and dialogue between generations, communities, and development agents, was greatly appreciated. All those who participated in the community study and the Forum-Dialogue Workshops emphasized the appropriateness of this approach for dealing with the issue of FGM. The cultural awareness and respect of the approach was lauded by those involved. Everyone also appreciated the fact that the participants were asked to propose strategies to promote the elimination of FGM in their own communities.

Expertise of the facilitators a key element for the success of the workshops

The success of these sessions depended a great deal on the abilities of the facilitators. Facilitation of such meetings demands a high degree of verbal and non-verbal cultural sensitivity, a great capacity to listen and respect the opinions of others, the ability to express oneself clearly, simply and respectfully, and the ability to synthesize various opinions. The consensus was that if the facilitators had not been as experienced and well prepared as they were, the project would not have been such a success.

Key role of grandmothers in the strategies to eliminate FGM

Most programs fighting against FGM emphasize the involvement of young women and men, following the recommendations of WHO and UNICEF. The results of this study, as confirmed by the conclusions drawn by the participants during the Forum-Dialogue Workshops, clearly showed the importance of involving the older generations in any attempt to change socio-cultural norms.

In particular, the results of the two activities showed that grandmothers are key persons to involve in all strategies to eliminate FGM. In their roles as protectors of traditions and ceremonies, grandmothers contribute greatly to the perpetuation of FGM. At the family level, they play a predominant role in the decision to circumcise or not. At the community level, they have the most influence on the circumcisers, who are generally their peers. Their involvement in any strategy aiming to eliminate this practice is fundamental.

Openness of grandmothers to “new ideas”

Many prejudices exist against grandmothers regarding their “resistance to new ideas.” However, previous WV and TGP activities in Velingara involving grandmothers in activities promoting nutrition have shown that these older women *are* open to new ideas, especially if they are approached with respect and engaged in dialogue. In the “Dialogue between Generations” study and workshops, grandmothers were observed to be open to reconsidering their traditional ideas. At the end of the first community meeting, a grandmother affirmed:

“We have never practiced genital cutting maliciously, but to educate the girls, to develop in them a sense of solidarity, and to prepare them for married life. Now we understand that, as grandmothers, we have a responsibility for this. We would like to organize ourselves to make a plea to our sisters, our peers, so that this practice will stop.”

*Koujiji Coulybaly, midwife & grandmother leader
Kéréwané village*

Appendix A
Topics Examined in the Study on FGM
Velingara, Senegal

The Grandmother Project & World Vision/Senegal

- 1) Important cultural values in Halpular society
- 2) Origins of the practice of FGM
- 3) Types of FGM practiced in the area
- 4) Organization of group ceremonies
- 5) Organization of individual rituals
- 6) The circumcisers
- 7) Training of girls after circumcision
- 8) Perceptions of the advantages of FGM
- 9) Perceptions of the drawbacks of FGM
- 10) Perceptions of health workers on the drawbacks of FGM
- 11) FGM and religion
- 12) Law against FGM: knowledge, attitudes, and impact
- 13) Perceptions of the impact of NGO awareness-building activities against the practice of FGM

Appendix B
Forum-Dialogue Workshop Participants and their Home Villages

Workshop Saare Faramba	
<ul style="list-style-type: none"> • Koujiji Coulybaly (trained midwife, grandmother - Kerewane) • Keejow Soumbundou (elder, Kerewane) • Fatou Sane (young woman - Dingerai) • Mama Saliou Diallo (village chief- Dingerai) • Aissatou Balde (trained midwife - Saare Faramba) • Amadou Balde (man - Saare Faramba) • Dado Balde (grandmother - Saare Faramba) • Ceerno Moussa Sabaly (teacher- Pulaar Kayel Bassel) • Toulaye Balde (young woman - Kayel Bassel) • Binta Sabaly (woman – Kandia) • Thierno Balde (man - Kandia) • Coumbayel Mballo (grandmother - Saare Niary) • Djina Balde (woman, pres. Women's Group - Saare Niary) • Suma Mballo (imam, CHW, health worker - Mutumba) 	<ul style="list-style-type: none"> • Aissatou Mballo (community health worker - Mutumba) • Ibrahima Mballo (secretary FAIVD - Saare Ceerno Bassi) • Maounde Balde (woman - Saare Thibo) • Samba Balde (community health worker - Saare Thibo) • El Malick Dia (President of the Rural Community - Kandia) • Malang Sanye (District Education Supervisor - Kayel Bassel) • Abdoulaye Diao (supervisor- Kandia) • Djabou Sabaly (grandmother -Saare Faramba) • Waly Kande (man - Kandia) • Fatou Balde (grandmother - Saare Faramba) • Aissatou Balde (grandmother - Saare Faramba) • Adama Balde (grandmother - Saare Faramba) • Eggue Kande (man- Kandia) • Meta Balde (Saare Faramba) • Mariama Sabaly (woman -Saare Niary)

Workshop Sinthiang Coundara	
<ul style="list-style-type: none"> • Aminata Diao (grandmother - Coumbadioma) • Fatamata Balde (pres. WG - Coumbadioma) • Telli Coulibaly (CHW - Coumbadioma) • Djenaba Mballo (pres. WG- Mballocounda) • Mahamodou Mballo (CHW - Mballo counda) • Abdoulaye Mballo (village chief - Mballocounda) • Baba Galle Coulybaly (CHW - Kandiana) • Neene Galle Djiwoung Camara (grandmother - Kandiana) • Djenaba Sane (grandmother - Kandiana) • Fatou Traore (grandmother - Kourebambaje) • Bintou Traore (trained midwife- Kourebambaje) • Ba Toure (village chief - Kourebambaje) • Ammet Cisse (Pres. ADECORS Sinthiang Coundara) 	<ul style="list-style-type: none"> • Mariama Balde (pres.WG - Sinthiang Coundara) • Abdou Mbeugue (nurse -Sinthiang Coundara) • Thierno Diallo (CHW -Sinthiang Coundara) • Boubacar Ba (CHW -Gambi Saare) • Samba Mballo (school director - Gambi Saare) • Pathe Diao (health workers - Diyabougou Coli) • Saran Cisse (woman -Diyabougou Coli) • Kadjatou Ba (woman -Timindalla) • Boubacar Boiro (health worker - Timindalla) • Coumba Kante (trained midwife- Manda) • Sumaye Balde (health worker - Sinthiang Cherif) • Diarga Boiro (village chief - Keniba Sadio) • Hawa Sylla (grandmother -Sinthiang Coundara) • Kadja Sylla Barry (grandmother - Sinthiang Coundara)

Workshop Kounkane	
<ul style="list-style-type: none"> • Younoussa Diao (school director - Kounkane) • Fatamate Daffe (president WG- Kounkane) • Bobo Dia (teacher - Kounkane) • Sokna Fall/Mme Ba (hospital midwife - Kounkane) • Abdoulaye Balde (imam- Velingara) • Mounda Diao (pres. WG - Saare Coly Salle) • El Hadji Doye Sabaly (PCR -Saare Coly Salle) • Aissatou Diallo (pres. WG -Djimini) • Penda Sylla (grandmother - Djimini) • Mama Seydu Balde (health worker - Saare Yeroyel) • Mariama Balde (grandmother - Saare Yeroyel) 	<ul style="list-style-type: none"> • Djaba Balde (pres. WG- Kandaye) • Bassirou Diao (CHW - Kandaye) • Ladde Mballo (grandmother -Saare Faasi Pathi) • Alpha Kande (village chief -Saare Faasi Pathi) • Ansumata Camara (health worker- Tacoudiala) • Sadio Camara (woman -Tacoudiala) • Oumou Gano (grandmother -Saare Yero Gano) • Fatamata Sabaly (grandmother - Saare Madia) • Oumou Diao (grandmother -Saare Madia) • Abdoulaye Balde (imam -Velingara) • Mariama Balde (woman -Nandoula) • Bucari Camara (health worker - Nandoula) • Binta Diallo (trained midwife - Velingara) • Demmo Sabaly (grandmother -Saare Yero Gano)

Atelier Velingara (all the participants are from the town of Velingara)	
<ul style="list-style-type: none"> • Binta Sabaly (trained midwife - Kandia) • Coumba Balde (grandmother - Kandia) • Aja Toukan Balde (grandmother) • Ismatou Diallo (grandmother) • Ndey Ba (grandmother/pres.WG) • Mamadou Alpha (elder) • Boubacar Diallo (elder) • Hawa Diallo (woman, health worker) • Kadjatou Heriko Diallo (pres. WG) • Ibrahima Ba (neighborhood chief) • Malado Sow (pres. WG) • Tabara Diallo (woman) • Ansouman Foufana (health worker) 	<ul style="list-style-type: none"> • Moussa Mballo (elder) • Mariama Faye Diallo (pres. WG) • El Hadji Mamodou Sylla (imam) • Aissatou Diallo (high school teacher) • Siradio Diao (high school teacher) • Dicori Sane (pres. Health Commitee) • Ndey Balde (pres. Health Commitee) • Kadja Balde (hospital midwife) • Andre Sambu (Ado Center/UNFPA) • Kyne Ndiaye (grandmother) • Malado Sow (woman) • Aminata Djengno (woman)

CHW = community health worker WG = women's group