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ABSTRACT

This paper describes a project, Seeds Of The Future: Somali Programme, which took place in June 2015. In the project, the disciplines of dramatherapy and creative writing were used in fusion in a series of workshops to gather testimony from Somali men, women and adolescent girls about their commitment to moving away from Female Genital Mutilation as a community. These stories have been translated into Somali and podcast, so that they can be used at a grassroots level in the anti-FGM campaign to persuade newly arrived/ non-English speaking Somali immigrants that the British Somali community is rapidly transitioning away from FGM, and thereby reduce or prevent cutting of young Somali girls. The paper explains the need for effective Somali language testimony, and how the project was conceived, planned, funded, recruited and executed. It also includes memoir and testimony from the workshop participants themselves.

KEYWORDS

Somali female genital mutilation refusal Midaye

BIOGRAPHY

Sarah Penny was born and grew up in South Africa but emigrated to England in 2003 to take up a position teaching Creative Writing at Brunel University. She has published three books with Penguin South Africa and is a Winston Churchill 2013 Fellow.

Introduction

In the UK, second-generation emigrants from African countries that traditionally cut are at particularly high risk for FGM. There also seems to be a link between lack of language competency in English and high cutting rates in the diaspora – cultural traditions imported with communities are more likely to be preserved when the community is not effectively reached by any public service messages. There are excellent organizations in the UK that campaign against FGM, yet all programmes are exclusively in English. This has the inadvertent and unfortunate result that for some communities the outreach material is educating girls, but failing to persuade their parents who will ultimately ensure that FGM happens. What is sorely needed is mother tongue testimony and educational resources for all cutting communities in the UK.

In June, 2015, creative writer Sarah Penny and dramatherapist Paula Kingwill, who had previously worked with FGM refusal in Kenya, ran a series of workshops in London they called ‘Seeds Of The Future’, working with twelve Somali men, women and girls to record their testimony about transitioning away from FGM.

A sensitivity Sarah and Paula both had was that they are white South African women, raised during apartheid. So was it really acceptable that they should tell women from black African cultures what to do with their own and their daughter’s bodies? But they came to this work with the understanding that as activists and feminists raised in an African country they rejected cultural relativism, particularly when it meant that the basic human rights of women were abused. The American feminist and social activist Fran Hosken first coined the term ‘female genital mutilation’ in 1976. But for a period of perhaps thirty years after that identification of the abuse as abuse, very little was done on a governmental level by either the USA or any of the European nations, to curb FGM

both in Africa and in the diaspora. And that inaction was a direct result of a misplaced apprehension over interfering with cultural practices.

But culture is not immutable; it changes from place to place and over time. And this is the right time to transition away from FGM. Because of their advantaged backgrounds, Paula and Sarah had privileged access to training and resources that could strengthen communities' capacity for making change happen. The dramatherapist Nisha Sajnani warned of the tendency to construct violent practices such as FGM or dowry murder as 'a feature of a culture (e.g., "that culture is violent") rather than a deviant practice.'¹ Sarah and Paula were not fighting or speaking on the behalf of these women but supporting the creation of a mechanism for making their voices heard by community members still committed to continuing the practice of FGM. As creative artists they had access to powerful mechanisms for doing just that. Sajnani speaks of Response/ Ability: our capacity to respond and our skill for doing so; calling on creative arts therapists to use their skills to work against oppression, and as an experience of social justice..

'Response/ability, with its double allusion to a learned skill and an ethic of accountability, is a cornerstone of our practice. Through our varied approaches, creative arts therapists enable an embodied, affective, and interpersonal responsiveness to change, amidst suffering, against oppression, and as an experience of social justice².'

The workshops ran over three weeks and were hosted by the Midaye Somali

¹ Sajnani, N. (2011). Response/Ability: Imagining a Critical Race Feminist Paradigm for the Creative Arts Therapies. Available from http://www.academia.edu/1118473/Response_Ability_Imagining_a_Critical_Race_Feminist_Paradigm_for_the_Creative_Arts_Therapies. Accessed 4/05/16.

² Sajnani, N. (2011). Response/Ability: Imagining a Critical Race Feminist Paradigm for the Creative Arts Therapies. Available from http://www.academia.edu/1118473/Response_Ability_Imagining_a_Critical_Race_Feminist_Paradigm_for_the_Creative_Arts_Therapies. Accessed 4/05/16.

Development Network. Before talking about the women's, girl's and men's workshops individually this paper needs to point out some communalities to all of them that are essential to the Seeds Of The Future methodology. One of the philosophical absolutes of the work, is that Paula and Sarah try not to emphasize the word FGM within the context of their programmes. Others in the field disagree with this stance, particularly when they are coming from a legal or policing background, as they feel only the word 'mutilation' is fit to describe the abuse, and using a lesser word like 'cutting' runs the risk of allowing cultural relativism into any debate around FGM.

But the Seeds approach is vested in therapy, not law making or policing, and a therapeutic process needs its own sensibilities. Paula and Sarah are working with women who have been mutilated, men who are living with mutilated women, and girls who have an often traumatic sense of identification with their mutilated mothers. Additionally, some of the most strident and committed activists they have met in this work are mothers who have in the past mutilated their own children. So they use the vernacular word that is accepted by the community. In Kenya that was *kutahiri* and with the London Somalis it was *gudniin*.

Another core concept is that, although they never disallow spontaneous discussion of FGM, they don't concentrate on it as a workshop focus until they are nearly at the end of the workshops. This is because the retention of FGM in the diaspora is inseparable from the experience of emigration. Any discussion of FGM has to be part of a wider discussion about identity, homesickness, dislocation, change, loss and the reinvention of the self in a strange, new world. So, for example, in the women's group they worked through a process in which, after basic introductory workshops to dramatherapy and

creative writing in which the women reflected on aspects of their personalities, they followed with two workshops specifically designed to generate material about the women's past and present: 'Home and Memories: Remembering Somalia' and 'Coming to Britain: The Old And The New.' Only then did they move to 'FGM: My Journey From Yes to No' and 'My Daughter's Future: My Hopes For My Child.' And finally Sarah met with each woman individually to write her story, before all the women shared as a group. When they story-shared at the end of Seeds of the Future/ Somali Programme, they celebrated the stories using the story-maker's real names. But then they offered them the choice of retaining their name for future publication and dissemination, or choosing a pseudonym that they felt represented them. Some chose pseudonyms and some chose to keep their real names; those choices have been respected in all outputs connected with this project. There isn't space within this paper to do full justice to the bravery and honesty of the story-makers but what follows are a few key themes and excerpts from each of the workshops.

It is also important to note that although the 'end product' of the project is a set of stories, without dramatherapy these stories could not exist. The role of dramatherapy within the workshops from an artistic point of view was to solicit the material, but from a therapeutic point of view it was to make the participants feel safe and supported. So although the primary role of the dramatherapy was as a tool for social change and activism, it also created a space for personal growth and healing. The South African dramatherapist Kirsten Meyer reinforces this capacity for activism through arts therapies when she says that arts therapies training enables the arts therapist to work effectively with the collective in order to facilitate change. 'Central to debates about what arts

therapists have to offer this mutable world is the potential to move beyond individual therapy into a more collective space to facilitate social justice and change through arts practices.³

Women's workshops

Of the women involved only one was literate – the others had never had any formal education. Their English competency ranged from poor to non-existent despite having been in the UK for about fifteen years on average. It's difficult to comprehend how you could live in an English-speaking country for so many years without learning English, but consider this testimony from one of the girls.

'My grandmother who has been here for 13 years can only say three things in English: 'sorry', 'thank you', and 'you're welcome'. That sounds strange to British people who don't understand how you could live here and not learn the language. But the thing with Somalis is children don't just leave home when they grow up. Your parents take care of you and then you take care of your parents. It is also the Islamic way. So the older generation is protected by the younger generation in England – if they have a hospital appointment or whatever they will make sure that the person is supported with help and translation. So you can get by without ever learning the language. My grandmother just says: 'I am old and foreign and it is too difficult to learn English.' Also she has never had any formal education – learning is a foreign idea.'

³ Meyer, K. (2014) Making Fires: Rethinking creative arts therapies practice in South Africa. Available from http://www.academia.edu/18123688/Making_Fires_Rethinking_creative_arts_therapies_practice_in_South_Africa. Accessed 06/05/2016

Because of the lack of English Sarah and Paula worked entirely in translation, with Filsan Ali, their liaison at Midaye, translating. The women's lack of literacy also meant that almost all their testimony was gathered through dramatherapy. Paula carefully constructed each day to allow the space for their stories to emerge in a respectful and held way that also enabled them to find the words they needed to tell a story that was authentically their own, and one they felt reflected accurately what they wished to say. Her greatest concern was that in the process of making the stories no harm was done to the women who had carried these memories silently for so long. She also reasoned that the product – the story - was the container for the whole process. The reason the participants had agreed to work with the Seeds project was their desire for change, not just personally but socially. The promise of being part of change ensured their participation and justified them telling their story. In the introductory meeting Sarah had talked about the stories and how they would be used in the national campaigns. But once the process had started, the emphasis had to shift from the product to the personal. And Paula needed to use her training and experience gently but fully to enable the stories to emerge.

As Paula worked, Sarah sat on the floor surrounded by her colour-coded books (one for each participant) transcribing the testimony. Sometimes when they got to something with a lot of energy and usually a lot of pain Sarah had to be sure to get the words verbatim. And at this point, sometimes at the most sensitive moment in the process, she might need the participant to repeat what she just said or speak a bit louder. At these moments there was a tension between Paula's dramatherapy instinct for making time for processing and healing, and Sarah's need to transcribe the story accurately.

Paula reflected after the project that the part of her ‘that is dramatherapist -process-protector must be restrained by the activist-facilitator who is actually the one employed by this project. This is not therapy.’⁴

On the final day of the workshops each participant was celebrated as their finished story was heard for the first time. Because most of the women were unable to read their own story Paula read the English version and Filsan translated into Somali while the storyteller listened in the centre of the circle. Paula invited the teller to pause the story at any point or embellish where she wished. The audience was encouraged to show vocal appreciation for the words. Because they were not reading their own stories Paula asked the women to start and end their story with the words: “This is my story.” She also asked them, as a way of affirming the reasons they had undergone the workshop experience to add “My strength enables my daughter/granddaughter to have a different life.” As they did this, most of the women chose to share a particular child to whom their story was dedicated.

All of the women had endured gudniin. They shared that they have told their children of the horror they experienced surviving the war, but have never told them about being cut, explaining that they want to protect their children from this pain. But they live with the pain daily and their bodies will never let them forget this experience. Throughout the women’s work, Paula trusted that the participants would bring to the process those memories that they felt ready and able to talk about. They would self-regulate and pull back when things felt too raw or painful. But as the gudniin material emerged, she needed to navigate her dual therapist/ activist role very carefully. She

⁴ Kingwill.P. (2015) *The use of Dramatherapy and Creative Writing Storycreating with Somali Refugees in London against FGM*. Unpublished paper presented at 8TH Drama For Life Africa Research Conference. Eduardo Mondlane University, Mozambique.

reflected after the project ‘I need to hold the space so the women can hear each other’s stories and are released from their shame and loneliness. I do not interpret or push the teller deeper. I may invite the teller to gain a little distance if the telling is overwhelming, and through that distance perhaps a new perspective may be gained.’⁵

Luul described hers gudniin.

‘A gambar, a Somali stool, was put on the floor and they lined us all up. Before the gudniin started we were told to be brave and strong. We were told people are watching you and it is embarrassing if you cry. Make sure not to embarrass yourself and us by moving around and screaming. Three people hold you down during gudniin. Someone comes to hold your shoulders, standing behind you as you sit on the gambar. One person holds one leg and the other one holds the other leg.

With my gudniin, the cutter took out a new razor blade and some string. After she cut me with the razor blade, she pushed two thorns through the lips of my vagina to hold them together while she stitched. The thorns remain in after the stitching. The cutter stays for a week and after a week the mothers check the girls. If you are closed that’s it but the hole can only be big enough to let a needle through. If it is bigger than that they call the cutter to come back and she will sew you up again.

I managed to stay strong and didn’t cry. Although my mother and father were not there my cousins were so I wanted to act strong. One of the ladies was a nurse and gave us a painkiller injection but it didn’t work at all and I felt everything. Because I didn’t scream the cutter said I was a brave strong girl which encouraged me. People clapped

⁵ Kingwill.P. (2015) *The use of Dramatherapy and Creative Writing Storycreating with Somali Refugees in London against FGM*. Unpublished paper presented at 8TH Drama For Life Africa Research Conference. Eduardo Mondlane University, Mozambique.

for me because I never moved or screamed. Afterwards they bound my lower legs and thighs with two pieces of cloth. Then they carried me to a room and laid me on the floor where a line of mattresses were waiting. They brought in the girls one by one as they finished with them. There were six girls in total.'

For all the women, after gudniin came marriage. Then, in 1991, rebels from the United Somali Congress entered Mogadishu and toppled the Siad Barre regime. The country erupted into civil war. Two million civilians have fled Somalia since the onset of war – more than twenty percent of the total population. Marwa shared her memories of the exodus.

'I don't really want to talk about what happened to me in the war. But there came a time when I had to leave Kismayo to try to get to Kenya. I had two children, a boy and a girl, but the boy was only six months old. We had no shelter and had to sleep under a tree. There were a lot of snakes. I couldn't sleep because I had to look after the two children so I stayed awake all night with my children on either side of me. The birds would wake the other people in the morning and then I could sleep for a bit, when the other people were awake to watch out for the snakes for me. I have to talk about these snakes because they were everywhere and I was so terribly afraid that one of my children would die of snakebite because it was happening all around us.'

They went where they could: on foot, by boat, by truck, spending unsettled periods in European or Arabic countries before finally getting permission to settle in the UK. All of

the women express a deep gratitude to the UK: for the physical safety, shelter and medical care that was missing from their lives for so long.

And yet, Britain presented a different set of challenges. The women spoke of how different their daughters are from themselves, how easy their lives are relative to their own, complaining of how difficult it is to raise their children in this new culture. This raised the question of intergenerational trauma and the effect of holding the stories alone for so long but within the constraints of the project there was not time to explore this. However once the project was finished, Midaye decided it would extend its services to include a weekly dramatherapy session for women living with FGM, so a group of women, including the women from the project, have been able to access continuing therapy in this way.

Udgoon described her experience of being a Somali mother to British children.

'I took my kids back to Somalia and when they were there they were like foreigners. I had furnished a house for our visit but when we left, I planned to give all the furniture to relatives. When the relatives came they were all squabbling over who got what, with everyone wanting the beds. My son said – why are they arguing like this, and I said it's because they don't have beds – they just sleep on the floor. And my son said: 'Oh my God, they live like animals!'

So my children don't belong in Somalia. Two of them don't even speak Somali. But this is difficult too. Because they were born here they see themselves as British but the British only see Somalis as refugees and immigrants. My children are lost in the

middle. They don't want to be refugees – they want to be part of British society. But they are not accepted.'

As open as the women were, there was one shared experience that didn't make it into the stories, and that was the trauma of losing your virginity after gudniin. In the culture, the husband, as a sign of masculinity, is supposed to be able to break the seal with his penis, but if the scarring is too impenetrable he has to cut the seal with a knife and then penetrate. One of the women, Ubah, did broach the subject – not in workshop but in the individual storymaking whilst only Filsan and Sarah were present. She said: 'There are things we never discuss – even here. When you're a young girl and it's your wedding night, it's the worst thing that has ever happened to me – worse even than my gudniin. But it happens to all of us. And we never mention it.' But at the end of the session, when Sarah read Ubah's story back to her, Ubah asked to have that section edited out.

Girls' workshops

When the girls first arrived they were quiet, and clearly both nervous and a little suspicious. One of the recruits excused herself within ten minutes of the first dramatherapy session, and never came back again. To Sarah, these girls, with their careful reserve and dressed in their flowing jilbabs, seemed at first very remote from the British teenageriness that she encounters in her day-to-day work at Brunel. Paula observed: 'Like most teenagers, their bodies are awkward vessels that they are learning their way around. To my eye this is further exacerbated by the disjuncture between their

jilbabs and jeans, their British accents and Somali words, their mixed feelings about Somalia, which holds their parents' pain and loyalty together with their own alienation.'⁶

But once they warmed to Paula and Sarah, and began to trust them, it was a real privilege to work with four very special young women and their emerging voices. They showed an amazing level of commitment to the work, particularly considering two of them were mid A-levels. They also brought into the work all the humour, cockiness and idealism of teenagers, filtered through the lens of their fascinating take on being British Somali.

What you do and don't wear is a hot topic for Somali girls. Hamida, the only one of the girls not in jilbab, enlarged on the subject.

When I was seven I began to wear a headscarf because my mum was wearing one and I wanted to as well. When I started secondary school it became embarrassing because the other girls weren't, but by then it was so established that it seemed weird to suddenly whip it off. It would actually be even more embarrassing to take it off and lead to questions which I wouldn't know how to answer – what would I say – I'm taking it off for you! I do wear trousers which is liberating enough for me. If I wore more revealing clothes than what I wear now, I wouldn't be comfortable. And I wouldn't go more traditional either although if I had to go to Shepherds Bush, where all the old men hang out in the Somali cafes, they would say wear a jilbab. But I have reached clothing equilibrium as a British Somali Moslem!

⁶ Kingwill.P. (2015) *The use of Dramatherapy and Creative Writing Storycreating with Somali Refugees in London against FGM*. Unpublished paper presented at 8TH Drama For Life Africa Research Conference. Eduardo Mondlane University, Mozambique.

When the work moved to discussion of FGM it was emotionally difficult for them. None of them had ever spoken to their mothers about their gudniin before and three of them decided to broach the subject for the first time. The opening up of this taboo traumatic subject at home, meant it was important that reassurance and containment was provided back in workshop, as the girls really processed what their mothers had been through. Working with a fully literate group, Sarah was able to use creative writing techniques again so the girls could write down thoughts they did not want to share aloud. Paula also shifted her techniques to engage practically, using role-play to cast the girls as characters they might meet in their own lives: the conservative mother, the confused daughter, the righteous social worker.

Hamida reflected:

My family never really speaks about FGM although my grandmother used to say gudniin is the worst type of FGM, and that is what Somalis practice traditionally. The first time I heard about it was on the news and I was shocked. I thought: 'What! I am Somali -what has this got to do with me!' When I think about being Somali, I think about weddings and food and cooking and taking care of the family. FGM is never spoken about – it is an action that is about shame and our culture won't be less for it going. A problem in our culture as a whole is that we don't want to talk about things that make us uncomfortable. We don't discuss FGM or sex or puberty or the fact that boys AND girls develop feelings for each other. My theory is that the older generations grew up so fast that they didn't

really have teenage years. It was because of the war but also because of culture. My mum gave birth to me at 18 to an older man. I'm nearly 18 now and she doesn't understand that I don't want to marry anytime soon. For them – stability was key – that is everything they wanted. In our community boys and girls grow up differently. Boys today wouldn't want you to have FGM, but they still have a control mentality.

Amina shared how she had been able to avoid FGM.

People don't know the risks about FGM because they don't talk about it. I was lucky. My mum believed in it but she was uncertain and she consulted my dad about me. But my father was very against it, and he is repulsed even thinking about it. It is so important to talk about it. Our family moved on but I know other families still believe in it. With some Somalis, if you know someone is doing it, you don't interfere because if you talk to them about it, that is disrespectful. They do it to control whether the woman is a virgin and to keep her in her place. They think it is religious even though our religion prohibits changing your body unless it is for medical reasons. But it would be much better if it was gone. A woman should be able to choose what she wants. And the Somali boys don't want it now anyway and the girls definitely don't want to go through the pain and trauma. It is just the older generation trying to keep it in place.

In this group Sarah's one-on-one story creation process became critical for generating material for one participant, Yusra. She was intimidated by the other girls who were

older than her. She barely spoke in the dramatherapy process and didn't write much down, but when Sarah met with her they had a good individual connection and almost the whole story was written in that session. Yusra reflected on her interaction with her mother as they discussed FGM for the first time.

When this programme started I had never thought about FGM before. But when I was part of this programme I started to ask questions. I know now my mum had FGM when she was younger and when I heard that at first it made me cry. It made me really emotional and my mum cried with me. When she was cut she felt like she was going to die and she passed out. After she was cut she didn't urinate for ten days until the pain decreased. When she was telling me she said this was ridiculous – why do young kids have to go through this? My mum has so many unanswered questions about her cutting and why she was cut but I can't answer them unfortunately.

Men's workshops

Somali men never talk openly about FGM and it is testament to the high regard in which Midaye is held in the community, that the organization was eventually able to recruit three men. It was unplanned but very fortuitous that the three of them represented different stages of a man's life; an older father, a younger father and a young unmarried man. This span of experience gave crucial insight into the impact of FGM throughout a Somali man's adult life.

Paula and Sarah had to work without their translator because the men would not

allow a Somali woman in the room to hear their stories. Because the older man was not literate they again relied mainly on dramatherapy. For Paula this constituted extreme dramatherapy as she navigated the sensitive complexities raised, working without a professional translator, and relying only on the two younger men who could speak English to voice the thoughts of the older man who could not. With the girls and the women they had often used embodied play, particularly using toys and objects to represent experiences. But it soon became clear that this was a very unfamiliar medium for these men and created limits for their sharing - for example, one of the women picked up a gun from Paula's collection of toys and said 'For me this is the war in Somalia.' But one of the men picked up the same gun and said 'When I was a boy I had a plastic gun like this.' So Paula adapted the programme to meet the needs of the project while staying within the limits of what could be tolerated by the participants, allowing them to share more conversationally and less through play.

The men's group met over a weekend, as they were employed during the week. What was so important, but also bitterly ironic, in their testimony is their contempt and anger for a cultural practice that is supposedly done for the benefit of men. The topic of gudniin was introduced on the second day with a short presentation outlining the short-term and long term-complications. One of the men, Cisman, became visibly angry, saying he had no time for a soft approach to gudniin but wanted prosecution for those who cut their daughters.

During the dramatherapy that followed, he outlined what it is like to live with a partner who has undergone FGM.

Gudniin has affected my wife and that affects me as a man. I have watched my wife suffer all these complications and I have seen it affect the other girls in my family too. I am really angry about it and I want to start a war against it. It is the ignorance and cruelty of men trying to control women's bodies, and it is against my religion and the law of the land. It needs to be enforced as a crime against a human being. It makes me angry that we have only had one prosecution and that guy walked free. Part of what makes me angry is that if this was happening to white female children, it would never be tolerated. I did not want this in my marriage and that makes me a victim too. Somali culture is generally so positive but in a marriage equality is essential.

Mahdi, having just completed his university education, now feels ready for the next step of getting a job, marriage and moving out of the parental home, which is the order in which these seminal life events happen in the community. But for a Somali man, there is an inherent, excruciating complication to any consideration of marriage.

I'm still single and I want to talk about gudniin in the context of that. When I was young it could have happened to anyone in my family and it wouldn't have been discussed. Now, looking at it, all the pain and suffering both physical and emotional, it is a vicious cycle and it has to stop. I can't ask the women in my family about how it happened because that is an impossible, taboo conversation. But I am not married yet and when I do marry I want her to be healthy. Once you tie the knot that's it. When I come to consider marriage, I know it is prevalent and it is happening in my community. It really worries me because I might end up marrying someone and she has been cut and has

those issues. It won't just be about the two of us. I can't ask her that question but if I have a choice in it I don't want to be with a woman who has been cut. I don't want all those problems. But if I can't even ask if she has gone through that, how can I know for sure that she hasn't been cut before I marry her? If she has been cut she will only be looking for security, but what I want is the whole of marriage.

When the group met later to read the finished stories, Cisman had clearly changed his mind about the role of arts therapies within the campaign. Paula described herself as 'deeply moved by the transformation that takes place. The man who accused this process of being a soft and ineffective replacement for prosecution glows with pride as he reads his story. His words vibrate with a power that no legislation could have. The product (the story) is the container for the process (dramatherapy) but more importantly it is a very effective weapon that activists have to end the practice of gudniin.'⁷

Conclusion

All the stories were translated into Somali. The English versions were made into a booklet and the Somali versions podcast, so that any organization working in the refusal campaigns can access the podcasts at no cost. They are available at <https://soundcloud.com/midaye>.

Word Count: 5472 (including footnotes)

⁷ Kingwill.P. (2015) *The use of Dramatherapy and Creative Writing Storycreating with Somali Refugees in London against FGM*. Unpublished paper presented at 8TH Drama For Life Africa Research Conference. Eduardo Mondlane University, Mozambique.

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