

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (<http://bmjopen.bmj.com/site/about/resources/checklist.pdf>) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

ARTICLE DETAILS

TITLE (PROVISIONAL)	Missing from the debate? A qualitative study exploring the role of communities within interventions to address female genital mutilation in Europe
AUTHORS	Connelly, Elaine; Murray, Nina; Baillot, Helen; Howard, Natasha

VERSION 1 – REVIEW

REVIEWER	Xiangnan Chai Sociology Department, Western University, Canada.
REVIEW RETURNED	27-Jan-2018

GENERAL COMMENTS	<p>I appreciate that BMJ Open offers me this opportunity to review the paper. I think that this paper is remarkably important as it explores the essential role of potentially-affected diaspora communities in addressing the intervention of and prevention against FGM in Europe. Very limited research has ever focused on 'community voices' about FGM intervention. Also, the authors frame their method and data analysis under the guidance of the Scottish Government '4Ps' framework, which makes the article structure exceedingly clear. In the discussion section, the authors offer useful policy suggestions based on their major findings. I believe that their policy suggestions will contribute to future FGM intervention by communities in Europe. Although the paper is well organized and written, I would like to offer the following three minor comments.</p> <p>(1) On page 3, line 42-44, the authors wrote that 'this article primarily describes communities of identity, where the common bond is often nationality, ethnicity, and the experience of exile, although some may be issue-based or geographical.' As clarified by the authors, the ethnic background of girls and women are of importance to FGM intervention within communities. On page 17, line 37, the authors conclude that '[...] policy-makers and practitioners will not identify the actual risks experienced by diaspora girls and women in Europe or develop effective interventions...' I think that here it may be necessary to discuss the role of nationality or ethnicity in the context of FGM. I would appreciate if you could comment on this.</p> <p>(2) On page 7, line 6-7, the authors wrote that interventions focused solely on FGM failed to account for 'gendered social norms...and nature of women's lives'. Also, on page 14, line 57 and page 15, line 3-4, the authors note that 'its manifestation differs according to culture, country and social grouping' thus affecting which avenues were open to women to challenge or engage with FGM. Obviously, the authors recognise the vital role of gender norms and power dynamics in the context of female genital mutilation. However,</p>
-------------------------	---

	<p>considering that circumcised women may largely come from countries outside Europe, the authors could benefit from some recent studies that have explored this issue. See, for instance, Chai et al., 2017; Mpofo et al., 2017.</p> <p>(3) On page 11, line 6-9, the authors note that 'one of the mistakes we make is that we assume everyone knows that FGM is harmful whereas many women from communities or women who have experienced FGM don't see that.' According to my understanding, the current research seeks to enhance the capacity of policy-makers, practitioners, and other stakeholders to assist not only girls and women who are at risk but those who have undergone FGM. Therefore, the authors could have 'included' the voice of these women and what aspects of policy they wish to see addressed. Authors could further explore the lived experiences of these women vis-à-vis the current policy on FGM in Europe.</p> <p>Thank you.</p>
--	---

REVIEWER	Tammary Esho Technical University of Kenya and Africa Coordinating Centre for Abandonment of FGM/C Kenya
REVIEW RETURNED	30-Jan-2018

GENERAL COMMENTS	<p>Reviewer's comments</p> <p>Missing from the debate? A qualitative study exploring the role of communities within interventions to address female genital mutilation in Europe</p> <p>The paper is well written and addresses a very important aspect with regards to the FGM interventions and the under-researched role of diaspora communities in initiatives to address female genital mutilation in Europe. It has in general brought out the various strategies and initiatives implemented in Europe which makes it a good paper containing this summary for readers. However, the paper has not adequately addressed its main objective concerning the issue 'the role of communities'. It concludes that the roles are 'inconsistent', but it is not elaborating on these inconsistencies as revealed by the findings. The findings of the study seem a bit jumbled up, it is a bit confusing to the mind with regards to the flow of themes being discussed. It will help if the authors can find an easier way to present their findings in order to have the reader understand easily. The 4Ps framework has not been described from the beginning which makes it harder for a reader to conceptualize the overall approach of this research and its findings. The methodology section can be strengthened by a clearer description of the study population recruitment process. These are from the various levels of the communities, in different countries in Europe and thus I expect that there might have been various challenges or limitations that may arise with regards to the recruitment of</p>
-------------------------	--

	participants.
--	---------------

REVIEWER	ruth m. mestre i mestre Human Rights Institute, University of València, Spain
REVIEW RETURNED	02-Mar-2018

GENERAL COMMENTS	<p>I very much enjoyed reading this article. The role of diaspora communities is both, under-researched and under-valuated through Europe, and its research is necessary precisely because disproportionate media and public focus on some aspects of FGM increases the risks of stigmatization, paternalism, criminalization and further victimization of women, girls and 'potentially affected communities'. There are many valuable aspects in the work; I will just mention two, that I found of particular interest.</p> <p>(1) I liked the proposed term of "potentially-affected communities", to avoid presumptions attached to 'FGM practicing communities'. The article explicitly says that it might be inaccurate in migratory context - and I think it might be inaccurate also in certain non-migratory contexts. "Potentially-affected communities" highlights the fact that communities themselves are not homogeneous, that resistances and struggles regarding power structures occur within communities, and that the communities themselves might be addressing FGM, regardless of the fact that outsiders are aware of it. Thus, the term itself can have an empowering potential for communities and allows other highly needed narratives around "addressing FGM" to develop.</p> <p>(2) Being an exploratory work, the effort to analyze and code the role of potentially affected communities within the '4P-framework' is valuable, as it provides the context and means to eventually repeat the study at a larger scale or in other countries, providing a very clear, organized and useful structure of analysis. Further, I found the sub-themes appropriated and interesting.</p> <p>Although the '4P' approach is the Scottish Government's strategy to VAW, it can be useful and replicable in other contexts- because it builds on (part of) the Due Diligence Standard (DD) regarding VAW (Prevention, protection, prosecution-punishment, and provision of services and redress), as set at the Council of Europe Convention on preventing and combating VAW and domestic violence (Istanbul Convention-IC) -which includes FGM and has been signed by all the countries that have developed intervention regarding FGM and are mentioned in the study. For the IC 'participation' would be 'empowerment', which is not part of the 5Ps of the DD standard but a general aim of the Convention. Working from the IC, future studies would have to address the role of 'potentially affected communities' in prosecution&punishment- which I understand is a very sensitive and difficult question, with implications that go far beyond the scope of this exploratory research- but may need to be addressed eventually.</p> <p>Last, I suggest to modify the order in which the 4P are explained and to leave "participation" and "barriers to participation" as the last two items, which would flow smooth into the discussion on findings and implications. In my opinion it is a minor change that could improve the text.</p> <p>Besides that, I found some typos and errors: In page 8, the reference (Ruiz et al, 2014) should be - according to your references' list (Reig et al, 2013).</p>
-------------------------	---

	<p>The reference EIGE 2013 contains a typo (Europeropean). The reference Leye, E, et al, 2014 includes at the end what seems another reference: Genus, 70 (1), Martin, 2007.</p>
--	---

VERSION 1 – AUTHOR RESPONSE

Reviewer 1.1. I appreciate that BMJ Open offers me this opportunity to review the paper. I think that this paper is remarkably important as it explores the essential role of potentially-affected diaspora communities in addressing the intervention of and prevention against FGM in Europe. Very limited research has ever focused on ‘community voices’ about FGM intervention. Also, the authors frame their method and data analysis under the guidance of the Scottish Government ‘4Ps’ framework, which makes the article structure exceedingly clear. In the discussion section, the authors offer useful policy suggestions based on their major findings. I believe that their policy suggestions will contribute to future FGM intervention by communities in Europe.

Response 1.1. We appreciate the reviewer’s kind comments.

Reviewer 1.1.1) Although the paper is well organized and written, I would like to offer the following three minor comments. On page 3, line 42-44, the authors wrote that ‘this article primarily describes communities of identity, where the common bond is often nationality, ethnicity, and the experience of exile, although some may be issue-based or geographical.’ As clarified by the authors, the ethnic background of girls and women are of importance to FGM intervention within communities. On page 17, line 37, the authors conclude that ‘[...] policy-makers and practitioners will not identify the actual risks experienced by diaspora girls and women in Europe or develop effective interventions...’ I think that here it may be necessary to discuss the role of nationality or ethnicity in the context of FGM. I would appreciate if you could comment on this.

Response 1.1.1. Thank you for this insight. To comment on this point, we added: “Any engagement with communities must begin with identifying those communities potentially affected, acknowledging that communities are not homogenous, and engaging with a wide range of groups and community representatives across nationalities and ethnicities. As most women and girls affected by FGM also identify as people of colour, perspectives and lived experiences must be included in development of meaningful policies and services” (p 17).

Reviewer 1.1.2) On page 7, line 6-7, the authors wrote that interventions focused solely on FGM failed to account for ‘gendered social norms...and nature of women’s lives’. Also, on page 14, line 57 and page 15, line 3-4, the authors note that ‘its manifestation differs according to culture, country and social grouping’ thus affecting which avenues were open to women to challenge or engage with FGM. Obviously, the authors recognise the vital role of gender norms and power dynamics in the context of female genital mutilation. However, considering that circumcised women may largely come from countries outside Europe, the authors could benefit from some recent studies that have explored this issue. See, for instance, Chai et al., 2017; Mpofu et al., 2017.

Response 1.1.2. We have focused our literature on studies within Europe, but agree that these are relevant and so have added these citations (e.g. p 15) and a revised comment: “...thus affecting which avenues were open to women to challenge or engage with FGM and other aspects of their lives” (p15)

Reviewer 1.1.3) On page 11, line 6-9, the authors note that ‘one of the mistakes we make is that we assume everyone knows that FGM is harmful whereas many women from communities or women who have experienced FGM don’t see that.’ According to my understanding, the current research seeks to enhance the capacity of policy-makers, practitioners, and other stakeholders to assist not only girls and women who are at risk but those who have undergone FGM. Therefore, the authors

could have 'included' the voice of these women and what aspects of policy they wish to see addressed. Authors could further explore the lived experiences of these women vis-à-vis the current policy on FGM in Europe.

Response 1.1.3. We completely agree with the reviewer that further inclusion of the voices of affected women is necessary and one of the authors is in fact currently engaged in research on this topic. However, while affected community participants did discuss national policies this was as part of a more general discussion that did not relate to our aim of exploring community roles. We have therefore included this point in the Discussion section under the 'Implications' sub-heading in terms of necessary further research: "Any such research should include the voices of affected women, as those best able to describe their lived experiences and needs and to contribute to the additionally sensitive topics of prosecution and redress." (p 18)

Reviewer 2.1. Good study and findings that will add knowledge in the area of FGM interventions. However, you need to clarify on the findings that actually address your main research objective. It is not coming out clearly regarding the inconsistencies of the roles of these communities that took part in the study. Explain the 4Ps framework earlier in the paper so that it is well understood as the background conceptual framework of this research study, and present your findings and themes in a clearer way for the reader to understand.

Response 2.1. Thank you. We have introduced the 4Ps framework earlier (see Response E1.2). To clarify our thematic findings, we have reiterated that deductive thematic analysis used the framework themes, with results under each theme described in Findings (see Response E1.2). As this is exploratory initial research, much of what we found were the gaps in knowledge and practice, and we have tried to clarify further how this addresses our research aim (see response E1.1).

Reviewer 3.1. I very much enjoyed reading this article. The role of diaspora communities is both, under-researched and under-valuated through Europe, and its research is necessary precisely because disproportionate media and public focus on some aspects of FGM increases the risks of stigmatization, paternalism, criminalization and further victimization of women, girls and 'potentially affected communities'. There are many valuable aspects in the work; I will just mention two, that I found of particular interest.

Reviewer 3.1.1) I liked the proposed term of "potentially-affected communities", to avoid presumptions attached to 'FGM practicing communities'. The article explicitly says that it might be inaccurate in migratory context -and I think it might be inaccurate also in certain non-migratory contexts. "Potentially-affected communities" highlights the fact that communities themselves are not homogeneous, that resistances and struggles regarding power structures occur within communities, and that the communities themselves might be addressing FGM, regardless of the fact that outsiders are aware of it. Thus, the term itself can have an empowering potential for communities and allows other highly needed narratives around "addressing FGM" to develop.

Response 3.1.1. Thank you. We agree that it is important to avoid such presumptions in both migratory and non-migratory communities.

Reviewer 3.1.2) Being an exploratory work, the effort to analyze and code the role of potentially affected communities within the '4P-framework' is valuable, as it provides the context and means to eventually repeat the study at a larger scale or in other countries, providing a very clear, organized and useful structure of analysis. Further, I found the sub-themes appropriated and interesting. Although the '4P' approach is the Scottish Government's strategy to VAW, it can be useful and replicable in other contexts- because it builds on (part of) the Due Diligence Standard (DD) regarding VAW (Prevention, protection, prosecution-punishment, and provision of services and redress), as set at the Council of Europe Convention on preventing and combating VAW and domestic violence

(Istanbul Convention-IC) -which includes FGM and has been signed by all the countries that have developed intervention regarding FGM and are mentioned in the study. For the IC 'participation' would be 'empowerment', which is not part of the 5Ps of the DD standard but a general aim of the Convention. Working from the IC, future studies would have to address the role of 'potentially affected communities' in prosecution & punishment- which I understand is a very sensitive and difficult question, with implications that go far beyond the scope of this exploratory research- but may need to be addressed eventually.

Response 3.1.2. Thank you. We have added a specific reference to the DD in our introduction (p 4) and, while a fuller engagement is beyond the scope of this manuscript, we have added a comment on participation/empowerment and the role of prosecution/punishment in our discussion (p 18).

Reviewer 3.2. Last, I suggest to modify the order in which the 4P are explained and to leave "participation" and "barriers to participation" as the last two items, which would flow smooth into the discussion on findings and implications. In my opinion it is a minor change that could improve the text.

Response 3.2. We have made this change as suggested, to improve flow (p 2; p 4; p 5; pp 12-14)

Reviewer 3.3. Besides that, I found some typos and errors:

Reviewer 3.3.1. In page 8, the reference (Ruiz et al, 2014) should be - according to your references' list (Reig et al, 2013).

Response 3.3.1. Thank you. We have corrected this (p 6, p 20)

Reviewer 3.3.2. The reference EIGE 2013 contains a typo (Europeropean).

Response 3.3.2. Thank you. We have corrected this (p 19)

Reviewer 3.3.3. The reference Leye, E, et al, 2014 includes at the end what seems another reference: Genus, 70 (1), Martin, 2007.

Response 3.3.3. Thank you. We have corrected this (p 19)

VERSION 2 – REVIEW

REVIEWER	ruth m. mestre i mestre Institut de Human Rights Institute, University of valència, Spain
REVIEW RETURNED	10-Apr-2018

GENERAL COMMENTS	The authors have considered the minor changes I proposed and I think this is a very interesting paper for those working on FGM/C in Europe.
-------------------------	---

REVIEWER	Xiangnan Chai The University of Western Ontario, Canada.
REVIEW RETURNED	15-Apr-2018

GENERAL COMMENTS	I appreciate that BMJ Open offers me the great opportunity to review this revised manuscript. The authors have done an excellent job improving the manuscript based on reviewers' previous comments. This current manuscript is very well structured and written.
-------------------------	---

	<p>There are three minor concerns regarding the methods section:</p> <p>1) In page 4, line 47-50, the authors wrote, "Potential participants were selected from FGM publication authors and conference presenters, heads of relevant government departments and NGO programmes, community activists, and snowballing from other participants." What criteria were used in this study to select these potential participants? A brief explanation would make the "Participant sampling and recruitment" subsection more comprehensive.</p> <p>2) In page 4, line 50-51, and page 5, line 9, the authors wrote, "Of 18 invitees, 18 participated," and "Of 59 invitees, 36 participated." Who declined to participate individual interview and group interview? Why they chose not to participate? It might be better to include these information.</p> <p>3) In page 18, line 12-14, the authors talked about the second limitation, "Second, numbers of participants from potentially-affected communities were limited and further community engagement is needed to expand on issues raised." Is it possible that the sensitive nature of the FGM topic contributed to the limited numbers of participants from potentially-affected communities? In addition, to what extent has the sensitive nature of the FGM topic biased participants' reports? A more inclusive discussion here is suggested.</p>
--	--

REVIEWER	Dr Tammary esho Chair/Senior Lecturer Department of Community and Public Health, Technical University of Kenya
REVIEW RETURNED	18-Apr-2018

GENERAL COMMENTS	<p>Thank you for this revised version. i feel that the paper has addressed some of the important issues raised by the reviewers, remarkably improving it. I just have one comment and a question. The authors mention the word 'effectiveness' (Pg 7 Line 31; Pg 8 Line 15) several times while describing what they felt should be considered effective and also what participants said an intervention was effective. This needs to be carefully mentioned especially when there is evidence of effectiveness from studies and not from here-say.</p> <p>Was it possible to have findings with regard to the responses about the prosecution processes, perceptions about this and maybe challenges? If this is possible i think its an important insight especially considering that many EU countries have the law in place and other countries could learn about what the participants felt about this.</p>
-------------------------	--

VERSION 2 – AUTHOR RESPONSE

Reviewer 1.1. In page 4, line 47-50, the authors wrote, "Potential participants were selected from FGM publication authors and conference presenters, heads of relevant government departments and NGO programmes, community activists, and snowballing from other participants." What criteria were used in this study to select these potential participants? A brief explanation would make the "Participant sampling and recruitment" subsection more comprehensive.

Response R1.1. As suggested, we have tried to further clarify this as: “Initially, interview participants were identified through the literature review (i.e. conference presenters and lead authors, and other authors appearing in more than one article, were invited by email). Additionally, heads of relevant government departments, NGO programme staff, and community activists known for their FGM expertise related to one or more of the ‘4P’ focus areas were contacted by phone or email. Lastly, further recruits were identified through snowball sampling from participants.” (p 4)

Reviewer 1.2. In page 4, line 50-51, and page 5, line 9, the authors wrote, “Of 27 invitees, 18 participated,” and “Of 59 invitees, 36 participated.” Who declined to participate individual interview and group interview? Why they chose not to participate? It might be better to include these information.

Response R1.2. To clarify this, we have added the following sentences: “The nine non-respondents gave no reason for not responding to email invitations or telephone reminder, but all were busy professionals with varied roles and worked at different levels across the EU so there were no identifiable differences between respondents and non-respondents” and “Group interviews were all conducted on the same day, and thus more people were intentionally invited than were expected to attend and non-participation was reported as due to lack of availability. However, all invited agencies and groups were represented” (pp 4-5)

Reviewer 1.3. In page 18, line 12-14, the authors talked about the second limitation, “Second, numbers of participants from potentially-affected communities were limited and further community engagement is needed to expand on issues raised.” Is it possible that the sensitive nature of the FGM topic contributed to the limited numbers of participants from potentially-affected communities? In addition, to what extent has the sensitive nature of the FGM topic biased participants’ reports? A more inclusive discussion here is suggested.

Response R1.3. As suggested, we added further discussion regarding participants from potentially affected communities: “While the sensitive nature of FGM may have influenced the engagement of these participants, those we approached had experience of speaking about women’s issues and engaging with researchers and policy-makers. Thus, numbers were primarily due to the small-scale and exploratory nature of the research and the lack of time and resources to conduct more extensive community engagement.” (p 18)

Reviewer 2.1. The authors mention the word ‘effectiveness’ (Pg 7 Line 31; Pg 8 Line 15) several times while describing what they felt should be considered effective and also what participants said an intervention was effective. This needs to be carefully mentioned especially when there is evidence of effectiveness from studies and not from here-say.

Response R2.1. We agree that this should be more carefully nuanced and have attempted to revise accordingly where the word appears. Where this is a particular perspective of participants and we are using participants descriptions we have added single quotations, e.g. in the sentence “Participants

identified EU-funded REPLACE and REPLACE2 programmes as ‘effective prevention interventions’..” to maintain the wording that participants chose and perspectives they provided (p 7-8).

Reviewer 2.2. Was it possible to have findings with regard to the responses about the prosecution processes, perceptions about this and maybe challenges? If this is possible i think its an important insight especially considering that many EU countries have the law in place and other countries could learn about what the participants felt about this.

Response R2.2. In relation to our research question about the role of communities, we have discussed challenges in the protection section, in discussion on prevention and protection linkages, which includes some discussion around prosecution. Our findings are that the legal framework is important but that there must be a parallel long-term commitment to prevention work and we have tried to explore this. Additionally, as suggested, we added a brief paragraph about prosecution: “In discussing prosecutions, respondents highlighted the need for a person-centred ‘violence against women and girls’ approach that struck the correct balance between the needs of affected women and girls and the need to eradicate the practice of FGM (KIM12). One of the key barriers highlighted by respondents across different contexts was the likelihood that a survivor would need to testify against her relatives, and the difficult question of how to balance this against her best interests (KIF14, KIF13, KIM12, KIF06). Some suggested that the lack of trust both between professionals, and between professionals and potentially-affected communities, could hinder the investigations that could lead to prosecutions (KIM12). A lack of understanding and knowledge about FGM and potentially-affected communities among law enforcement officers was noted as another potential barrier to prosecutions (KIF02). Some respondents identified an important role for NGOs, some of which were established from within potentially-affected communities, in providing training to police and prosecutors, stating that their “knowledge, advice, guidance and support has been absolutely instrumental...” (p 9)

VERSION 3 – REVIEW

REVIEWER	Xiangnan Chai The University of Western Ontario, Canada.
REVIEW RETURNED	27-Apr-2018
GENERAL COMMENTS	I appreciate that BMJ Open offers me this great opportunity to review the revised manuscript. The authors have addressed Reviewers' comments and suggestions well. This study focuses on interventions to address FGM in the context of Europe and, thus, has important policy implications. The manuscript is clearly and legibly written regarding its motivations, research design, data collection, findings, discussion and limitations. To the best of my current knowledge, it is ready for publication.
REVIEWER	Tammary Esho Technical University of Kenya and Africa Coordinating Center for Abandonment of FGM/C , Kenya
REVIEW RETURNED	02-May-2018
GENERAL COMMENTS	I recommend that the paper can now be accepted as it has addressed the reviewers comments appropriately.