

Strategies of denial: women's experiences of culture of disbelief and discreditation in the treatment of asylum claims on the grounds of female genital cutting (FGC)

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ABSTRACT

Drawing from qualitative research with female asylum seekers in Scotland who had claimed asylum to protect their daughters from female genital cutting (FGC), this article examines the workings of the culture of disbelief during asylum interviews. In this article I illustrate how the treatment of FGC-related asylum claims is informed by the convergence of hostile environment, gender and refugee stereotypes and the dominant representations of FGC. I argue that at the collision of anti-immigration and anti-FGC discourses, asylum seeking women are confronted with conflicting expectations whereby they are simultaneously expected to reinforce the constructions of themselves as victims of 'backward' cultural practices, and to narrate their vulnerability beyond cultural terms in order to meet the criteria for asylum outlined in the Refugee Convention. This paper illuminates the multiple strategies asylum interviewers employ to undermine women's lived experiences of persecution, revealing the contradictions in how interviewers simultaneously question the threat of FGC, women's inability to resist these practices and women's own experiences of being subject to FGC. Through this, I problematise the assumptions that FGC as an 'extreme' form of gender-based violence would offer an exception to refugee women's persistent struggles in being recognised as victims of persecution.

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Introduction

Female genital cutting (hereafter FGC),¹ also known as 'female genital mutilation' or 'female circumcision', refers to a range of practices altering or removing parts of female genitalia for non-medical reasons (World Health Organisation 2020). FGC practices can result in various short and long-term health consequences and in some cases even death, with estimations of over 200 million girls and women affected by FGC worldwide (World Health Organisation 2020). FGC encompasses a range of practices including different degrees of cutting, pricking and cauterisation (World Health Organisation

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2020). Although the inclusion of elongation (stretching of the labia) in the typology of FGC remains debated, the study discussed in this paper covers both cutting and elongation practices. This decision was informed by my emphasis on privileging the perspectives of the participants who had experienced elongation, and who self-identified as victims of FGC.

UNHCR has recognised FGC as grounds for asylum under the 1951 Refugee Convention relating to the Status of Refugees (hereafter the Refugee Convention). Although there are no official statistics on the number of asylum claims made on the grounds of FGC, EU countries have been estimated to receive thousands of claims relating to FGC every year (Middelburg and Balta 2016). UK is one of the main receiving countries for female asylum seekers from FGC-practising countries (Novak-Irons 2015). It has been estimated that around 137,000 girls and women in England and Wales have been subject to FGC (Macfarlane and Dorkenoo 2014). In Scotland, just under 24,000 people are considered to be 'potentially affected' because of the prevalence of FGC in their countries of origin (Baillot, Murray, et al. 2014). However, as noted by the authors of this estimate, the lack of controls for ethnicity and the influence of migration, and the inclusion of men in this figure means that this estimation should be interpreted with considerable caution. Further, as I discuss in this article, the international figures which inform the national estimates are indicative at best of the real global prevalence of FGC. Although it is important not to reduce FGC to an 'African problem', these practices have been documented in over half of the countries in the African continent (World Health Organisation 2020). Along with the growing need to address FGC among refugee women in statutory and third sector settings in the UK, it is also likely that FGC increasingly features in women's claims for asylum.

Considerations of gender, and issues related to female refugees were for long absent in legal discourses and public debates on asylum (Freedman 2010). Scholars have extensively critiqued the male-normative treatment of asylum law, arguing that entrenched assumptions about the division of public and private spheres form a considerable obstacle to women's claims on the grounds of gender-based violence (hereafter GBV) (Freedman 2008b; Zeigler and Stewart 2009). However, it has been argued that the perceptions of the nature of FGC as a 'backward' and 'extreme' practice makes it easier for women to gain asylum (Oxford 2005; Razack 1995; Wettergren and Wikström 2014). This article questions this presumption by contributing to the emergent research on female asylum seekers' experiences of the asylum process in Britain (Baillot, Cowan, and Munro 2014; Canning 2017; Kea and Roberts-Holmes 2013). Although the landmark FGC cases of Fauziya Kassindja in the U.S. and Zainab Esther Fornah in the UK have facilitated scholarship problematising FGC as grounds for asylum (Middelburg and Balta 2016; Oxford 2005; Zeigler and Stewart 2009), little is known about how the risk of FGC is constructed by different parties during the asylum determination process (see Kea and Roberts-Holmes 2013 as an exception). It has been argued that examining immigration control from the 'bottom up' can illuminate how the practices of institutional actors both enact and contribute to state power (Armenta 2017, 83; Bhatia 2020). This article exemplifies how the so-called 'culture of disbelief' manifests in asylum interviews in cases where women have applied asylum to protect their daughters from FGC. In Britain, the asylum interview is a two-step process which begins with an initial screening interview followed by a lengthier substantive interview that aims to

establish the claimant's situation in more detail. This article discusses FGC-affected women's experiences of interviewers' hostile conduct and attempts to discredit women's lived experiences of persecution during substantive interviews.

FGC as grounds for asylum

The Refugee Convention does not single out gender as a social group warranting international protection from persecution. It has been argued that the 'floodgate discourse', which reflects the concerns that granting asylum could lead to an increase in new applications, stands in the way of women being recognised as a particular social group (Freedman 2008a). State interpretations of the Refugee Convention still commonly presume that persecution is limited to violence perpetuated in the public sphere by state actors (Freedman 2008a; McKinnon 2009). The failures to recognise private acts of violence as persecution have been argued to reflect the extent to which male norms are entrenched in the society (Zeigler and Stewart 2009). This comes with real consequences, as the normalisation of GBV against women makes it harder for refugee women to demonstrate the political nature of the violence facing them (Freedman 2008a). Furthermore, as noted by Querton and affirmed by the findings presented in this article, 'gender is not just relevant to the reasons for persecution, but also for all other elements of the (refugee) definition, including the well-founded fear of being persecuted, the concept of persecution, state protection, internal relocation and country of origin information' (2019, 8). It has been argued that the treatment of gender-related asylum claims as special cases obscures gender as a relevant consideration in most other asylum claims (Querton 2019).

Regardless of the growing policy attention on FGC across Europe, FGC remains contested grounds for asylum. FGC has been recognised as potential grounds for asylum as the health consequences of these practices can be seen to amount to torture (Middelburg and Balta 2016). While FGC is perpetuated by private actors, the failure of states to protect women has been argued to satisfy the definition of torture as state-sanctioned violence (Shell-Duncan 2008). Under the strict definition of the Refugee Convention, women claiming asylum on the basis of FGC are required to make a case for belonging to a particular sub-set of women who are singled out for FGC through their membership to a particular cultural and ethnic community (Zeigler and Stewart 2009). However, women have also been denied asylum on the basis that FGC is so widespread and normalised in the practising communities that it does not discriminate among women (Freedman 2008a; Musalo 2010). While the international anti-FGC discourse constructs FGC in terms of life-long pain, women who have already been subject to FGC are not eligible for asylum on the grounds of FGC due to the past nature of their persecution. These women can however claim derivative asylum if their daughters face the threat of FGC upon return to their mother's country of origin. Derivative refugee status can be granted to family members who do not have the grounds to make an independent claim, but who can claim in accordance with their right to family unity. In addition to evidencing well-founded fear of FGC, in order to gain asylum, women need to demonstrate their inability to relocate away from the community which perpetuates FGC and the state inability or unwillingness to protect them from FGC in their countries of origin (European Institute for Gender Equality 2015).

The culture of disbelief in the British asylum system

Refugee organisations and researchers have increasingly challenged the culture of disbelief that characterises the asylum decision-making process in Britain (Jubany 2011; Anderson et al. 2014; Canning 2017). The culture of disbelief is rooted in the hostile environment policy which frames asylum seekers as a threat to the welfare system and the nation (Souter 2011; Bhatia and Burnett 2019). Policies like the hostile environment empower institutional actors whose actions reify racial hierarchies, contributing to the processes of racialisation (Armenta 2017). Critics have argued that British immigration policies and practices are part of state racism and violence through which asylum seekers are ‘sub-alternized and psychologically shredded by Britain’s hostile immigration control machinery’ (Bhatia 2020, 278). The prevailing representations of ‘bogus’ asylum seekers, exclusionary policies and everyday securitisation underpin asylum seekers’ marginalisation that is justified as a form of deterrent as a deliberate move to impede applications and reduce immigration (Canning 2017; Souter 2011)

The culture of disbelief within the Home Office is manifested in the considerable increase of claims that are initially refused, only to be later overturned in court² (Baillot et al. 2014; Bhatia and Burnett 2019). This culture of disbelief is not a single act, but a combination of physical and performative elements which create a negative decision-making environment (Anderson et al. 2014). The conduct of immigration officers has been widely described as hostile and adversarial (Baillot, Cowan, and Munro 2012; Schuster 2020). Interviewers have been shown to attempt to discredit asylum seekers’ claims by looking for even minor discrepancies in the claimants’ narratives (Jubany 2011; Sweeney 2009). Inability to provide evidence and late disclosures are frequently taken as evidence of lying (Baillot, Cowan, and Munro 2012; Cohen 2001; Griffiths 2012). Women’s reluctance to disclose sexual violence to male interviewers, cultural silences and interviewers’ expectations of gendered responses to disclosures of trauma all disadvantage women in the asylum process (Baillot, Cowan, and Munro 2012; Jubany 2011; McKinnon 2009; Shuman and Bohmer 2014). The heavy burden of proof placed on asylum seekers has been widely criticised as the emphasis on credibility, coherence and ability to produce evidence stand at odds with asylum seekers’ realities of displacement, loss and trauma (Baillot et al. 2014; Cohen 2001; Griffiths 2012).

As argued by Baillot and colleagues, ‘the foundation for discerning ‘truth’ is often built on sand’ (2014, pp. 134). It has been argued that the focus of the asylum determination process has increasingly shifted to assessing claimant’s credibility over the content of their claim (McKinnon 2009). In the UK, Home Office interviewers assess asylum claims based on three-point criteria: internal credibility that assesses any inconsistencies in the claimant’s story; external credibility, that evaluates how consistently the claimant’s narrative fits together with ‘objective’ Country of Origin Information (hereafter COI)³; and plausibility, which considers the apparent likelihood of the claimant’s narrative (Sweeney 2009). However, it has been argued that decision-makers assess credibility ‘according to ‘imagined’ understandings of what is reasonable in a social context of which decision-makers have no first-hand knowledge’ (Schuster 2020, 1378). This means that the asylum determination process is inherently performative; in order to gain asylum, lived experiences of trauma need to be narrated according to Eurocentric notions of persecution and refugee-ness (Kea and Roberts-Holmes 2013; Kynsilehto

and Puumala 2015). The asylum process has been criticised for reducing the complexities in women's lives and cultures into stereotypes (Baillot, Cowan, and Munro 2012; Freedman 2008b; Kea and Roberts-Holmes 2013). When it comes to claims on the grounds of GBV, it has been argued that successful claims require women to reinforce Orientalist constructions of a backward and violent 'Third World' in order to be viewed as credible victims (Kea and Roberts-Holmes 2013; Smith 2017).

Methodology

The analysis presented here is part of a larger study on FGC and cultural change among African and Middle Eastern migrant communities in Scotland. The fieldwork, carried out between March and December 2018 for a doctoral thesis, examined the role of changing cultural and structural conditions in influencing women's vulnerability to FGC and other forms of GBV. The fieldwork was preceded by a development of a Community Advisory Board comprised of FGC-affected refugee women, who participated in reviewing the research focus and ethical considerations, and who piloted the data collection activities. This approach was informed by previous recommendations to utilise collaborative partnerships as a strategy to address the complex practical and ethical challenges in researching FGC as both an illegal and taboo topic (Johnson, Ali, and Shipp 2009).

The study employed individual and focus group interviewing and feminist zine-making as methods of data collection. This paper presents narrative data from selected interviews and focus groups. A narrative approach has been argued to be particularly well-suited for exploring the radical discontinuities in the lives of refugees (Earthy and Cronin 2008; Eastmond 2007). In contrast to asylum interviews which centralise the role of 'truth', narrative interviews explore socially produced representations of lived experience (Wernesjö 2020). My choice of narrative inquiry reflects my interest in hearing the stories of female refugees who are often excluded from the formation of the dominant representations about themselves as 'passive victims' or 'bogus' asylum seekers (Eastmond 2007; Smith 2017). While women's perspectives cannot shed light into the interviewers' thought processes (Souter 2011), throughout this article, I demonstrate how these illuminate the pressing contradictions between lived experiences and institutional assumptions about vulnerability and persecution.

The study used purposive and snowball sampling to recruit key informants and community participants from communities that are considered 'potentially affected' by FGC in Scotland⁴ (Baillot et al. 2014). Most of the participants were recruited through gatekeepers from women's support organisations to gain trust and to further sense-check that the data collection activities were sensitive to the needs of the participants. The fieldwork was conducted in a third-party location which the participants had previously attended for support and group activities. However, all participants were informed that the study was independently conducted from these organisations, and that a decision not to participate would not have any implications to their rights and access to services.

It has been argued that written consent forms can be culturally inappropriate or intimidating, especially in research with displaced participants who may have experiences of state hostility and coercive tactics (Johnson, Ali, and Shipp 2009). For these reasons, oral consent was offered as an alternative to written consent, in which case the researcher

noted down the details of oral consent in the consent form. In either case, participants were explained the purpose of the research and the voluntary nature of participation; their right to withdraw consent at any time; and arrangements for data protection to ensure confidentiality. Before the data collection, the study was granted ethical approval from the University Ethics Committee.

This article focuses on a sub-sample of FGC-affected women who had claimed derivative asylum to protect their daughters from FGC. The findings presented here are drawn from the narratives of Joyce (Malawi), Star (Malawi), Olufunke (Nigeria), Chibundu (Nigeria), Isatou (The Gambia) and Vera (Malawi).⁵ These women had resided in the UK between two and ten years and at the time of the interviews, only one of the participants (Vera) had been granted asylum. Vera and Joyce disclosed being subject to elongation,⁶ while all other women had experienced cutting. However, as illustrated in the next sections, all women had similar experiences of asylum interviews regardless of the type of FGC.

The data presented in this article was collected through six sequential focus groups ($n = 5$) and three sequential individual interviews ($n = 1$). Sequential interviewing enhanced the data quality through facilitating the research in uncovering the complex 'layers of subtlety and ambiguity' (Read 2018, 4), in the participants' narratives about displacement and vulnerability. This approach was also beneficial for developing rapport and creating safe spaces for disclosures of personal traumas (Earthy and Cronin 2008; Read 2018). As illustrated by the findings of this article, retelling stories in a supportive space stands at odds with women's experiences of the asylum interviews in which their 'stories are either not deemed relevant or credible or, increasingly, not heard at all' (Eastmond 2007, 261). The interviews had a loose structure to encourage women to reflect their migration trajectories and to give the participants more control over their choice to share their personal experiences of GBV.

The interviews and focus groups were recorded and immediately transferred to storage to a secure university cloud server. The research combined thematic and narrative analysis to develop both cross-case and within-case understandings of the data (Shukla, Wilson, and Boddy 2014). Inductive thematic analysis was used to gain a rich overview of the full dataset which then provided a contextual framing for understanding the particularities in individual participants' experiences and moments of narration (Squire 2008). This approach was beneficial for identifying shared experiences of culture of disbelief, while also attending to the different ways individual participants reconstructed their experiences, changing positionalities and vulnerability. After verbatim transcription and familiarisation of the data, NVivo 12 was used to aid initial in vivo coding. At this stage, several transcripts were also co-coded by another researcher to review the codes before identifying and refining themes and sub-themes in the data. This was followed by a more interpretative analysis combining the thematic emphasis on the 'lived life' with the narrative analysis focus to the 'told-story' (Earthy and Cronin 2008). In focusing on both the content and the narration as a process, I analysed the data through interrogating the key questions of why the participants had shared their stories in a particular way, how mine and other women's presence influenced their narratives and how individual excerpts were situated in relation to the overall narratives of individuals and other participants (Earthy and Cronin 2008).

Findings

The next sections present the findings on the different strategies of denial that interviewers had employed to undermine FGC-affected women's claims for asylum. The findings are presented under three sub-sections which focus on the assessment of the claimant's credibility, interviewers' responses to evidence and the internal relocation and protection alternatives, which states can invoke to deny refugee status even if the risk of persecution has been established.

Questioning credibility

All of the participants described the asylum process overwhelmingly in negative terms as 'exhausting', 'frightening', 'inhumane' and as 'torture'. Most of the participants had waited years in the asylum process, which they experienced as a state of limbo in-between violence and protection:

- Star (Malawi): *I'm very worried and ... I'm on medication, I don't sleep and all that, because I don't know what will happen next. I'm here, should I feel comfortable, but I don't know what the Home Office will decide. If I go back home, am I going to go through what I went through again?*
- Chibundu, (Nigeria): *The Home Office, they talk about FGM, but they don't care about doing the right thing. They traumatise women that have been through FGM, that is what they do.*

These accounts highlight how the prolonged asylum and appeals processes continue to keep women in harm's way through the ongoing threat of deportation which sustains women's fears of further violence. Participants described how the prison-like interview setting and confrontational questioning had made it harder for women to recount their experiences of violence to strangers. The interviewers were said to lack empathy, often accusing women of lying about their circumstances:

- (Olufunke, Nigeria): *They say this country goes against FGM, but when somebody has a case of FGM, they refuse to believe the person is going through that process ... we try to escape to a country that goes against it, and this country will tell us no.*
- Joyce (Malawi): *It's just the same thing when I tell them, if I go back they [extended family] will force me to marry someone. They [interviewers] don't believe it because they say you are a grown up, you can say no ... They ask questions which you think to say, if you were in my position, what would you think? "You say you are in danger in Malawi? I don't think you are in any danger". Sometimes you even think to say, have you ever been thrown to trouble? Have you ever been thrown to difficulties? Because they are so heartless.*

Olufunke and Joyce convey the sense of desperation women said that they had felt in disclosing their vulnerability to unsympathetic interviewers. Joyce had applied asylum to protect her daughter from FGC and herself from forced marriage. Her quote illustrates how, regardless of her age, culturally she remained 'her mother's child' until married, which meant that her mother could take her daughter away and decide for Joyce to be married against her will. Her vulnerability reflects the established gender and age-based hierarchies that characterise the social order in many FGC-practising

communities. These cultural complexities can get lost in the asylum process, prompting accusations of lying; for example, the COI report about Malawi which informs asylum determinations only covers forced marriage with regards to minors (Home Office 2017).

Similar experiences of heartless bureaucracy were also recounted by other participants. Three of the interviewed women had been forced to leave their children behind when fleeing persecution, only to wait years in the asylum system. This had prevented them from applying for family reunion. Star (Malawi) had endured prolonged abuse and FGC perpetuated by her husband and his sisters after being forcibly married at the age of 14. Although she had eventually managed to flee, she had been forced to leave her two older children with her husband. After giving birth to a girl in the UK, Star had applied for asylum to protect her daughter from FGC. However, instead of showing sympathy to her situation, Star's disclosure was met with confrontational questioning:

Star (Malawi): *When I said, if you send me home, my daughter is going to go through FGM and my husband is going to do this [domestic abuse], they [the interviewer] were like, "Does your husband know you are here?" I said I don't know, but I never told him. Even my kids don't know that I'm here. But if I go home, I would want to see my kids. And they asked: "Why would you want to see your kids?"*

Star's account demonstrates the extent to which interviewers can dehumanise asylum seekers to discredit their claims. Star's experience illustrates how cultural expectations surrounding motherhood collide with the politics of deterrence; in acting against the stereotypical perceptions of what it means to be a good mother, regardless of the circumstances, her credibility came under suspicion. This was also experienced by Isatou (The Gambia), who described her experience of seeking asylum as a choice between two evils:

Isatou (The Gambia): *My first daughter nearly lost her life, so I won't allow that to happen to my other children. My mum said: "You're joking ... These two will be circumcised." I said okay mummy, if this is the case, I am not coming to this country. And she said: "I don't mind, but anytime you land here, even if you land at midnight, I will get them circumcised". I don't mind Home Office taking me to detention, but I prefer that than my children to being cut. And I am ready for that. Even the Home Office would put me in jail for life, I am fine with that, but my children will not experience that, no.*

In Isatou's case, her mother would not cut her daughters without her being present because of the need for the mother to look after the daughters in the likely event of complications. Although her daughters faced bullying as a result, Isatou was able to protect them from FGC by making the difficult decision to stay apart from them. Isatou had struggled to convey these dynamics to interviewers; although mothers' central role in participating in FGC has been well-established, women's strategies of resistance against FGC remain under-researched and poorly recognised.

It is also possible that the circumstances which had led both women to claim asylum only further prompted the interviewers to question their credibility. Isatou had been on holiday in the UK when she received a call from her mother informing her of the plans to arrange FGC over the summer holidays. After fleeing her abusive husband, Star had worked as an irregular migrant until the extended family pressure to subject her daughter

to FGC had led her to claim asylum. The nature of FGC as a normalised cultural practice also meant that some of the other interviewed women (Joyce, Chibundu, Vera) had only begun to make sense the damaging physical and psychological consequences of FGC after their arrival in the UK. These circumstances demonstrate how FGC-affected women's pathways to seeking asylum do not always conform to the stereotypes about displacement and the images of refugee women as passive victims who have been deprived of their agency (Smith 2017).

Contesting evidence

In addition to accusations of lying, interviewers had sought to undermine the threat of FGC in women's countries of origin:

Olufunke (Nigeria): *It is a scar in every woman who has gone through FGM, something you feel within yourself for the rest of your life ... I cannot watch my child being caught going through this pain for so long. People cannot see this, they don't know the pain that I go through. But me telling them [the interviewer] this, how can they say that I don't think they do FGM in Nigeria, how can they say that when I'm telling them what they did to me?*

Much like Olufunke, other Nigerian and Gambian participants also said that interviewers had questioned the threat of FGC facing their daughters in their countries of origin, even the prevalence of FGC in these countries and within their ethnic groups has not only been well-documented (UNICEF 2016) but also recognised by the Home Office (Home Office 2016a, 2019). Malawi provided an exception to this; although Malawi is frequently omitted from the international estimates of the prevalence of FGC (UNICEF 2016), during the course of my research I interviewed Malawian women who had been subject to cutting and elongation. This incomplete global picture about the prevalence of FGC heightens the burden of proof for Malawian women, as the COI report for Malawi frames FGC as an issue which only affects few ethnic groups, without specifying what these affected communities are (Home Office 2017). Crucially however, the threat of FGC was questioned even when these women had provided other evidence to support their case; although Star supplied letters as evidence of the extended family pressure to subject her daughter to FGC, this had made little difference to her application.

Convincing the interviewers of the prevalence of FGC only represents the first hurdle women must go through in constructing themselves as 'genuine' asylum seekers. What is more, these hurdles are riddled with contradictions; Olufunke had made a case for the prevalence of FGC, only to have her experience of being subject to cutting as a form of persecution undermined:

Olufunke (Nigeria): *Somebody has gone through a professional who says that they did FGM on her ... how can they say that they did it to me, but it's not that deep?*

Olufunke's account exemplifies how responses to women's disclosures are fundamentally insensitive to experiences of the lifelong trauma. Similar experiences were also described

by other women who recounted how interviewers had challenged women's FGC-status despite the documented medical evidence:

- Chibundu (Nigeria): *Sometimes they say that you are lying, but in this case there shouldn't be any way of feeling that I'm lying because everything is there ... even the health visitor knows what I've been through. The doctor's certificate is there. Everything is there, but it's just the way they want to feel about this.*
- Star (Malawi): *They said you need to go to the doctors and get checked, so I went and the doctor wrote stuff and said it is true, she has been cut ... But they said that the way the doctor described it was like she was just listening to me. But she was talking about what she saw down there! The Home Office is just something else, honestly ...*
- Vera (Malawi): *Despite medical evidence revealing that the woman or her older sister has gone through FGM, cases are being refused by the Home Office and women can face deportation.⁷*

Recent research has highlighted the invasive and sometimes traumatising consequences of genital examinations (Johnsdotter 2019). Women's accounts illuminate how both evidence of cutting and elongation are questioned during the asylum interviews. Questioning women's FGC-status is a central strategy for undermining the well-founded fear of persecution faced by women's daughters, as the mother's FGC-status and membership to a practising community are considered key risk factors to FGC.

Internal relocation and state protection

There was a consensus among the participants that the interviewers had failed to consider the gendered realities facing women in their countries of origin:

- Star (Malawi): *They [the interviewers] say I can go back home and go stay in another city in my country where I can't get in contact with my partner's family. But I say to them, in Malawi, you need family, family help each other, nobody else can help you. Unlike here, here you can work and look after yourself.*
- Joyce (Malawi): *They keep asking that question from me as well, they say that I can go and live in the other city. So, I told them that living in the other city is difficult, it's not like moving from Edinburgh to Glasgow and I'll be okay ... In Malawi, if you decide to move to another city [to escape abuse], there is a village head man and everyone else who would like to know your business: "Why are you here? If you want us to protect you, you have to pay". If you don't go along with them, then amongst them there will be someone who goes and makes people know where you are, because they want money.*

Although poverty and underdevelopment do not qualify for grounds for asylum, international guidelines stipulate that the possibility of economic survival is a necessary precondition for internal relocation (UNHCR 2003). Women's accounts exemplify how the interviewers assessed their possibilities for international relocation through a Western lens, overlooking the cultural and structural constraints which inhibit women from surviving independently from the family unit in their countries of origin (Käkelä 2020; Middelburg and Balta 2016). As described by Star, family plays a central role in women's survival in contexts where converging gendered cultural norms, limited state social

security provision and labour market inequalities constrain women's financial independence. As articulated by Joyce, women's barriers to relocation are further constrained by their reliance on informal sources of support, which can expose women to community pressure and control. This dependency increases women's vulnerability to forms of GBV which are normalised as part of family and cultural life. Crucially, participants emphasised how practices like FGC only further consolidated women's dependency through the role these practices play in the socialisation of girls into the restrictive roles of a caregiver and a wife.

In addition to overlooking the contexts which are conducive to FGC and other forms of GBV, interviewers had also undermined women's barriers to state protection:

- Chibundu (Nigeria): *Why won't the Government of the United Kingdom understand that I have been through a lot? They just say they don't know the culture of Nigeria, they don't know what a man can do if the police gets involved... When your husband is telling you that you have to do it [FGC] or your in-laws are telling you, maybe your in-laws are rich, it comes with worth. Because this wealth is not evenly distributed in Africa. So, when one person in a big family is wealthy, he controls everything. And because the police are bribe-able, you don't want to call the police and say, oh my husband or my uncle are going to cut ...*
- Olufunke (Nigeria): *They [interviewers] will tell you, we know they are doing FGM in your country, but you can say no to it. It doesn't really work, because we don't have the power to stop the tradition ... in Africa, you can't resist it. Only if you have a parent that will stand behind you and if they're rich and very powerful, maybe in the political arena or stuff like that. You know, so that your husband's relatives can be afraid. Anything aside that my sister, just run.*

The claim that women can say no to FGC further reflects interviewers' disregard for the overlapping gendered and age-based hierarchies which form the basis of social organisation in FGC-practising communities. Crucially however, these accounts illustrate how, while FGC is legitimised by culture, these practices are also entangled with wider economic and political conditions that sustain women's barriers to state protection. As articulated by both participants, the decision-making power over FGC is fundamentally tied to wealth and higher social position. Chibundu's account exemplifies how corruption functions as a mechanism for male domination. As argued by Isatou (The Gambia), at this collision of gendered cultural beliefs and political instabilities, 'women have no protection'. Nevertheless, the participants described how interviewers had failed to recognise the way FGC was constructed as a private matter both by communities and the state in their countries of origin:

- Star (Malawi): *The interviewers just tell you that you can go to the police ... but the police will tell you no, it's [FGC] not done here.*
- Vera (Malawi): *People from my country, they say "FGM? In Malawi? We don't do it". But whatever they've done to you below there, it is something and it has to be taken seriously.*
- Chibundu (Nigeria): *In Nigeria, FGM is a lesser crime, it's as if it's nothing ... It's not a priority, I mean, nobody cares.*

Participants' narratives illuminate how political instabilities can compound the systematic and culturally justified devaluation of women's lives. These experiences exemplify

interviewers' simplistic assumptions that the existence of legal provisions or state declarations against FGC would translate into the enforcement of the law on the ground. Crucially, FGC-affected women's narratives illustrate how the sense that *'nobody can help you'* characterises women's experiences of state refusal to protect them both before and after migration.

Discussion

The findings presented in this article contradict the claims that the nature of FGC would offer an exception to refugee women's persistent struggles for asylum (Oxford 2005; Razack 1995; Wettergren and Wikström 2014). Despite the dominant representations of 'women and children' as the most deserving refugees (Freedman 2010), and the descriptions of FGC as a 'devastating' and 'barbaric' crime put forward by consecutive Home Secretaries (Home Office 2016b; Javid 2018), all women had experienced interviewers' attempts to undermine the risk of FGC facing their daughters. These tensions are reflective of the collision of anti-FGC and anti-immigration discourses, whereby women are perceived as helpless victims on the account of their gender, but as a threat on the account of their race and culture.

Women's experiences illuminate how racialised gender stereotypes intersect with the notion of 'bogus' asylum seekers and the wider culture of disbelief which characterises the immigration control in Britain. The findings build on previous arguments that a successful FGC claim entails a self-production of victim identities, necessitating the claimant to represent herself as a victim of a 'backward' practice (Kea and Roberts-Holmes 2013). These expectations overlook asylum seeking women's strength and resilience (Kea and Roberts-Holmes 2013). In fleeing, speaking against FGC and claiming asylum to protect their daughters, the participants had displayed resistance which goes against the stereotypical epitome of powerless, silenced victims of FGC (Njambi 2004). These displays of resistance render women's experiences implausible to interviewers. Furthermore, women's active opposition contradicts the Eurocentric representations of essentialised vulnerability which are central to the discourses of deserving and undeserving refugees (Smith 2017). Women can also be disadvantaged by the convergence of these stereotypes and lack of knowledge about FGC; The nature of FGC as a normalised cultural practice means that women who only come to reject and resist these practices after migration can be easily dismissed as 'undeserving' economic migrants, if they have initially arrived in the UK to study or for a holiday.

The participants' experiences illuminate how racialised, gendered othering is enacted during the asylum interviews. It has been argued that successful asylum claims depend on 'neoliberal premises of rescue and victimization that require applicants to conform to categories that obscure, rather than illuminate their credibility' (Shuman and Bohmer 2014, 952). This is illustrated by women's struggles to gain asylum, as their sacrifice of leaving their children behind is constructed as a sign of deviance, rather than viewed to testify to the hopelessness of their situations. The widespread use of images of refugee mothers holding their children epitomises the central role motherhood plays in the perceptions of deserving and vulnerable female refugees (Freedman 2010; Tschalae 2020). In Isatou's case, the homogenisation which masks the dynamics of diverse FGC practices had converged with Western stereotypes about motherhood, resulting

in the interviewers' inability to recognise her decision to stay away from her daughters as a protective act. Likewise, in asking why Star would want to see her children, the interviewer had presumed Star as an uncaring mother. These experiences exemplify interviewers' constructions of refugee women as '(M)others', which are utilised to cast the claimant as deviant and inferior. Although Star's experience may be an extreme example of the lengths to which interviewers go to question women's credibility, it is nevertheless telling of the institutional climate which condones this line of questioning.

Participants' narratives also illuminate the interviewers' unproblematised assumptions about women's abilities to resist FGC or relocate to safety within their countries of origin. The interviewers' disregard to the way in which FGC practices are situated in relation to wider gendered economic inequalities and political instabilities can be traced back to the anti-FGC discourse; the dominant representations of FGC frequently disregard the complexities of these practices in favour of colonial stereotypes about the backwardness, barbarity and ignorance of the 'Third World' (Njambi 2004). While it has been previously suggested that constructions of FGC-affected women in Orientalist terms as victims of 'backward' cultures can increase women's credibility (Kea and Roberts-Holmes 2013), I argue that the culturalisation of FGC can also work against women's claims for asylum by obscuring the conditions which prevent women's help-seeking and internal relocation in their countries of origin. As argued by Razack, 'the economic and social conditions are seldom part of the contextualising that ought to be done in order to fully assess an individual woman's vulnerability ... a stereotypical view of the claimant's culture is often the only factor considered' (1995, 78). Crucially, in disregarding women's economic dependency and the role of state inaction and complicity in the continuation of FGC, interviewers had reduced FGC to a private act of violence, colluding with the 'regimes of denial' (Souter 2011) which sustain FGC in women's countries of origin.

Concluding remarks

In this article I have demonstrated how the Home Office interviewers pick apart the definition of a refugee, questioning each of the conditions of the Refugee Convention in turn to undermine FGC-affected women's claims for asylum. Although consistency is central to successful asylum claims, this expectation remains one-sided; women's experiences illustrate the contradictions whereby interviewers simultaneously question the prevalence of FGC, women's and girls' inability to resist and evade these practices, and mothers' experiences of being subject to FGC in the first place. In addition to illuminating the extent of the culture of disbelief, these findings illustrate the intersectional erasures during the asylum process. The findings exemplify the need to inform asylum determinations with an intersectional analysis of the subordination FGC-affected women experience on the account of their gender, class, culture, race and immigration status.

Women's experiences of negotiating constantly changing benchmarks of credibility suggest an urgent need to review the role of written and medical evidence in the determination of gender-related asylum claims. The findings demonstrate a number of issues in relation to the inconsistent treatment of evidence. In the case of Malawian participants, the incomplete COI reports were outweighing women's disclosures and other written and medical evidence. However, in contrast, Nigerian and Gambian participants'

experiences of the interviewers' attempts to challenge the prevalence of FGC and women's barriers to relocation call to question the assumed central role of COI reports in the asylum determination process. Crucially, although it has been argued that 'as the injured body has become the terrain of 'truth', medical certificates are replacing refugees' own words' (Eastmond 2007, 261; see also Kea and Roberts-Holmes 2013) the findings suggest a need for critical evaluation of the role that genital examinations play in the asylum determination process. The heavy burden of proof placed on women pushes them to expose themselves to invasive genital examinations, without guarantees that this will be addressed sensitively, or that it will aid their claims.

The interviewers' responses to women's disclosures of FGC are telling of the political and economic context in Britain that underpins the state resistance to grant refugees asylum. The number of years which most of the participants had spent in the asylum process reflect the state strategies of deterrence and increasingly widening net of controls which, as argued by Bhatia, create 'a feeling of omnipresent captivity, a sense of isolation, a (symbolic) distance from the outside world and a lack of ability to envisage a (secure and stable) future' (2020, 278). The findings exemplify contradictions between institutional policies, as women's experiences also contradict the Home Office guidance which states that the interviewers must 'provide a safe and open environment to facilitate disclosure ... through a sensitive, focused and professional approach to the claimant's oral testimony' (2015, 4). As exemplified by women's accounts of re-traumatisation and worsening mental health, the culture of disbelief compounds women's experiences of past violence and trauma (see also Canning 2017). These findings underscore the central importance of relocating considerations of vulnerability at the heart of asylum determination process and practices.

While further research is needed to establish the scale of these institutional hostilities, women's narratives are illustrative of the lengths to which the Home Office goes to deny women protection. This is also apparent in the current Home Secretary Priti Patel's legal challenge to deport an 11-year-old girl to North Kordofan, Sudan with an FGC prevalence rate of 97.7% (Summers 2020). Much like the participants discussed in this paper, this girl comes from an FGC-practising community, has close family members who have been cut and like Isatou, has a family member who has experienced the most extreme complications of FGC. Together, these cases suggest that despite the Home Secretaries' vocal claims of protecting girls and women from FGC, the Home Office continues to view women's attempts to find protection from FGC a greater threat than the practice itself.

Notes

1. Much like these practices, the language used to describe them remains contested. I have chosen to use the term 'female genital cutting' to balance the need for clarity about the damage done to women, without using terminology that can be counter-productive by either stigmatising survivors as being 'no longer fully women', or by demonising affected communities in ways that can contribute to further resistance to abandon these practices.
2. Between 2012 and 2016, only 38% claimants were granted Leave to Remain at initial decision. After successful appeal the percentage of approved claims rose to 55%, with an overturn rate of 40% (Walsh 2019). In women's cases, the overturn rate has been as great as 50% (Asylum Aid 2011).

3. COI resources are produced and updated by the Home Office Country of Origin Information Service. The COI reports draw from external sources to provide a summary of human right issues in the given country.
4. The research also included participants from Malawi which is not included in the Scottish estimates. All these women disclosed experiencing either cutting or genital elongation.
5. All names are pseudonyms to protect participant anonymity.
6. Although elongation is commonly done by girls themselves, I argue that girls are nevertheless subjected to these practices because of the pressure from their peers and older women who instruct girls on how to stretch their labia.
7. Vera also shared wider perspectives that she had gained through her role of supporting other FGC-affected women.

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