

Narrator (Sam): Hi, I am Sam, the founder and CEO of The Midnimo Education Project. Here, our team has a conversation with Aicha Abdoulaye, a survivor of sexual violence. We cover her story of growing up in Niger, around the practice of Female Genital Mutilation/Cutting (or FGM/C) and her sister's experience of this practice. We also chat with her about her opinions on cultural competency, community advocacy measures, her personal experiences, legislative measures, healing, and our U.S. based-initiatives including Mandated Reporter course revision and encouraging Medical Interpreter certifications. A formal transcript of this interview is linked down below and all information about our initiatives can be found on our social media pages. Please do not hesitate to contact us with any questions. Trigger Warning: This interview contains discussions of child sexual assault, abuse, and gender-based violence on minors.

Alina: I guess, let's do introductions.

Sam: Oh yes, that's a good idea.

Alina: I'm Alina Schear.

Aicha: I'm Aicha Abdoulaye.

Paley: I'm Paley Holloman-Kincaid.

Sam: And, I'm Sam Rajagopalan.

Alina: So we had some questions for you, Aicha, about culture.

Aicha: Yeah.

Alina: First thing we can say is, like, what can allies start doing or stop doing in regards to addressing the culture that is associated with FGM?

Aicha: Like I said earlier, when we weren't on record, I felt like what you guys are doing right now, you're doing the right thing. Like, looking for people let's say—I am from Niger, and then you want to advocate on FGM in Niger, you are talking to someone from Niger, and to learn about how they do the practice, how the culture is, and learn the terms to use so that you don't offend anybody. And, also if you are dealing with someone from Gambia, you find someone from Gambia and talk to them. Like, don't generalize, and assume that because FGM is everywhere in Africa, at everywhere is the same practices. Like, if you do it, it's the same problem, but it's a different way of people—the way people do it.

Sam: Yeah, and a different way of addressing it—

Aicha: addressing it—

Sam: yeah

Aicha: that's, that's all, because the way the FGM is done in Niger and the way they treat women and the way they they do it is completely different than what they do it in Gambia, so we have to know how—what to know, and how—to learn the, the culture first and then we find the people from that culture and then advocate, or put them in the front. Do I—do I make sense?

Sam: yeah

Aicha: Because some people want to advocate and they want to put themselves in the front, when you have to put the real people.

Sam: mhm

Aicha: Do I make sense?

Sam: So we need real stories to help—

Aicha: Real stories, yes, to help.

Sam: Um, so are there any specific instances you've had where allies have been more or less culturally sensitive than you've expected, or have they done more damage?

Aicha: Uh, I mean, I've heard of stories—

Sam: okay

Aicha: where allies have been, um, have done or said things that are offensive, but not because they want to be offensive its just because they are so passionate about it and they just like, want to say certain things but it doesn't mean that they did it on purpose or—but it's just, it's just like, people have to be sensitive because remember this culture has been there for years and they have a belief behind everything, right? So you have to have a way of educating first, and then finding the natives to talk about it, um because, in Niger, in Gambia, there's always advocates, the is people that are over there that are advocating for this, and you don't—there voices are not powerful or heard. You can find those people that can help you in the specific situation of where you are advocating. Because, I don't know where you guys will go next if you choose—are you

trying to advocate only in the United States, or are you trying to travel out of the United States and advocate?

Sam: So right now we are trying to get our U.N. accreditation, so we are trying to expand out of the U.S. Um, right now we are focusing on California specifically—

Paley: yeah

Sam: because we live here, and then obviously we are going to college next year, so maybe we'll be able to branch out the United States, throughout the country, and then, like, further, uh, through the U.N. as well.

Aicha: Yeah, that is awesome! Like, I am very proud of you guys to start it now, and as you go, you're just gonna learn as you go, to be honest with you. No matter what answers I gave you, no matter what I said, but I feel like the, the real learning is learning on the ground, right? And, by—

Sam: on the job

Aicha: yeah. And, you will because you obviously have the passion for it.

Sam: Thank you!

Alina: Tying into that, um, what has been your experience with advocating about FGM right here in California? And, how can we challenge the assumption that this is only something that happens in Africa?

Aicha: (*chuckles*) Yeah, so people forget that, um, the United States is a multicultural place, right? People from Africa move here, people from Chad, India, Asia, move here. And, when people move they don't come and adopt the American culture. They bring their cultures with them, so which make it like "ok", they practice their cultures here. Like, I know a girl in New York, that had to fight and even write to Obama, so that they don't do FGM to her here, because they—her family tried. She lived in New York. Because her family brought the culture here, so is—is an assumption that it doesn't happen in the United States. It does happen in the United States, it's just like a child marriage. People think that child marriage doesn't happen and everything, but it does happen in also in the United States, so. Um, we just have to challenge it, like, like what you guys are doing now, and have real stories be told, because, um, people travel internationally with their, with their, with their culture, and it's practiced here. We'll just have to prove it to people, that no it does happen, right? With the real stories, just like what I'm telling you guys. What was the other question you said? Sorry—

Alina: Um, yeah, just what has been your experience—

Aicha: Oh, my experience!

Alina: but you covered that. And how, like, how, how can we let people know that, basically, this is an issue that is in their communities, also.

Aicha: Oh! I mean like interviews like this, advocating, social media presence, tweeting about it, because right now, either we like it or not, the world is on social media, and everybody is there. And, we have to bring—and by lobbying, and also by advocating in Congress, and different places, like uh, talking to our Constitution, like in California about it. And then, asking to speak in Congress with it and have, uh, write articles about it, because that is the only way—I mean that's the ways that work so far for Tahirih. Using LinkedIn, like—

Sam: Yes, yeah.

Aicha: Things like that.

Sam: So actually a follow-up, on—you were mentioning about legislative action that could be taken through California. Would you say that, I guess, more punitive action, meaning that, um, I guess, that people who carry out the practice would be penalized, like the practitioners, or would you say that's more important that providing protective sort of measures? Like, medical care and that sort of thing?

Aicha: Are you asking me if the practice is done by the medical practitioners?

Sam: No, no no. Uh, I'm asking that—should we have legislation that's like, preventing the practice—

Aicha: Oh yeah! Definitely!

Sam: or just, um, more legislation that is oriented towards helping people who have already gone through the practice, and providing medical care, and that sort of stuff?

Aicha: So, so not only medical care is needed, education is needed in different groups—

Sam: Absolutely.

Aicha: Like uh, like uh, if we can find churches and mosques, right? People where, culturally people go—

Sam: mhm

Aicha: like, get together and praise God, or wherever they have, and just have like uh, clinics, to talk about it, and educate people about it. That for me is, that there. Then, yes, legislation, we have to have laws that ban that completely, right? And, also when we educate, hopefully, people that carry out the practice will know that “Oh! It’s not in there—it’s not necessary,” because they’re educated. Because they have their mentality, and their mindset of why they do it, but with the education, let’s say, your group, right, um, will have clinics, in like uh, at the mosque or at the church. People will come and listen, you know? Or make it like a woman event, right? People will come and listen, and you will educate on that, and tell them, uh, why it’s very bad to do that to a young girl.

Sam: mhm

Paley: I think that’s a really good idea, because a lot of our awareness has really been focused on social media, like you said. So having more, like, community-based events—

Sam: Yeah, I agree because we were looking to go to, I guess, more hospital-based events, like Women’s Health Forums, but I think that community centers where people who might have gone through this practice or might be at risk—

Aicha: People hide those things.

Sam: Yes, yeah.

Aicha: People hide those things to, to um, nurses because they know the nurses can call police or social worker, like uh, you have to go to the, to the people, right? And educate about it, and talk about it. And, and, and also sensitive-wise, like, tell them why it’s very imperative, important that they don’t do that to their young girls.

Sam: Exactly. Yeah, mhm.

Alina: I absolutely agree, I think on social media, if we are targeting, like, feminists, right, or people who care about women, we get caught in an echo-chamber of people who say “of course FGM is bad,” and now we don’t reach the people who don’t think the same ways—

Aicha: I know, we can do both. I, I'm—we should do social media and also we should do, uh, in-person in communities, and just like, keep educating and sensitivity, because that's important, right? People have to be familiar to you to be open up to you—

Paley: yeah

Aicha: so you have to target community-by-community and be really resilient on your message, and what you say, and that—when they are familiar with you, they'll be open, so then you can learn more. And, people keep secret, like, keeping secret in African culture, I can speak to that, is like a virtue, even though it's killing you.

Sam, Paley, and Alina: mhm

Aicha: So letting kids, young women know that “you don't have to keep those kind of secret,” and be familiar with them, I feel like that would be an open place to start. You should do both.

Sam: I agree. Thank you.

Paley: Ok, I guess I wanted to get your opinion on one of the initiatives that we're starting, which is updating Mandated Reporter trainings to include recognizing signs of FGM/C, and— I guess just, how effective do you think it can be and what can we put in the courses to help?

Aicha: Explain to me, what that mean, when you say—what you just said.

Paley: Uh, Mandated Reporter course?

Aicha: Yeah, Mandated Reporter course, what does that mean?

Paley: So basically what they are is people, like teachers, like coaches, and other instructors—coaches too, right?

Sam: Yeah, so anyone who works with, uh, kids or minors, uh, they are Mandated Reporters, which means they are mandated by law to report child abuse, so—

Aicha: Yes, so, so the reason why I wanted to know the definition of that—and you remember earlier I spoke about secret—

Sam: yes

Aicha: I don't, I don't know, but I feel like kids or young adults, you have a coach or teacher, you were warned at home not to open up to them. Unless the kid is very rebellious, like I was, and say "well, I need help, I will tell someone," usually kids, kids that really go through that they don't, they don't—they can't open up.

Sam and Paley: Hmm.

Aicha: They may open up to psychologists.

Paley: But probably not to another figure?

Aicha: Another teacher or just a teacher or a coach. They need to be—unless the coach is like, show them that "I'm your friend" or "I'm here to help you", you know? It's, it's difficult to open up, I, I—because I know personally, when I was sexually abused by my uncle when I was 8 years old until I am like, uh, 12, I couldn't open up to nobody. Because my uncle told me if I opened to nobody, it's a shame on me. And, the culture support that. So if the culture support that, how can you go to your teacher and say "oh this, this has happened." This is a shame. There's a, there's a shame that come with all of those things. And, it's not easy to open up—like easily open—like for someone that—a survivor of, a person, victim of sexual abuse or FGM, it's so hard to just open up to people that you do day-to-day activity with, unless those people are really close to you and know you're one of them. Maybe pastors, like maybe a pastor that—

Sam: Ooh, pastors are Mandated Reporters—

Aicha: Yes, pastors or imams, yes.

Sam: Yes, they're all Mandated Reporters.

Aicha: Okay good! Good!

Sam: Yeah!

Aicha: Or therapists, yes—

Sam: Yes, they definitely are—

Aicha: Good! So yes, the answer is yes.

Sam: So it would help.

Aicha: Yes.

Sam: So a lot of—I took the training to scope out what, um I guess, what the course covered to find out if it covered FGM/C or not. And so, I took the Child Care Providers training which is, I guess, infants and kids who are really young, so like toddlers. And, I guess, part of the daycare sort of stuff is, like, changing their diapers and that sort of stuff. There was nothing on the physical signs of FGM specifically, there was physical signs of sexual abuse—

Aicha: Oh yeah

Sam: like molestation, all of that. Nothing on FGM, so you think that would help, a little bit?

Aicha: Yes, it will definitely help—

Sam: okay

Aicha: yes, definitely. Now that I'm—I understood the question better, yes, yes it would help.

Sam: Okay, yeah, thank you.

Alina: I think also, like, what you're saying—shame, I think for older, older children, I think these courses can help these childcare providers to know the signs and prod those kids and know the right questions to ask—

Aicha: yes

Alina: to make them feel like they can open up.

Aicha: Yes, I agree.

Alina: Because, just any, like, even if they mean well, not all coaches, teachers, are sensitive about these issues and some things might say—might make them feel like they cannot open up to them. So it's very important—

Aicha: Absolutely, yup!

Sam: Um, I did want to know, I guess, building off of the Mandated Reporter thing, so a lot of healthcare workers are also Mandated Reporters—pretty much all of them, so all nurses, all CNA's, all, like, Medical Assistants, etc. etc. So what discrepancies have you noticed in

healthcare in terms of that sort of treatment and, I guess, them recognizing the signs., if you've noticed any?

Aicha: Hmm, I mean it depend on the hospital. Um, because I can take an example of my kid and—it depend on the hospital, if you—the hospital or the area is well funded a hospital, I feel like more people are prone, available to notice, right, and—and say. Or sometimes the hospital in certain areas or certain neighborhood, nobody really have time to pay attention, I feel like. And, I'm speaking from experience, right? Because I saw with my son, we used to go to seven hospital, and people—when I came and I said “Oh, he have fever, he needs to get this, this, this treatment,” they would be like “oh look at him, he looks good. He needs to go home.” First, because he's black, and second because they think black people are resistant to pain. So it's just, it depends on the hospital, let me just say that. Yeah.

Sam: Yeah,

Aicha: It depends on the hospital. So I feel like yes, some hospital would be able to recognize the signs and help, but some, I don't know. Because in the United States, let's be clear and honest, it's not every area and every citizen get right access to the places to get help.

Sam: Absolutely.

Alina: Maybe we can segway into, of course, your personal experience advocating, um, for FGM. What would you say, like, maybe gave you the courage to speak about this thing, and how—like what advice would you give to others: survivors and just advocates in general, on how to properly get your voice heard?

Aicha: I mean, to me personally, I watch my sister, like um, when I was younger—like this is a age of 11, or so. Like, I saw how, uh, they forced my sister to—so this is how it happened in the village where we were: My mom took us to, like, a vacation/summertime, um, to this, like, they organize it like a cultural “big moment” for young girls to go to adulthood—

Sam: Like a rite of passage?

Aicha: Yes, rite of passage, after—so that's why I was mentioning earlier that every culture does it different, every culture does it just—they make it like “Oh, this is your moment, you're gonna go to this big thing that they're gonna...” And, I was excited; I get to go visit the village, because I'm like “wow this is awesome! Like, oh, I am getting big!” You know how when you were younger you wanna? And, we get to the village and the day that come, like every young girl from every village was coming together, they will, they will have, like, cooking and women dancing and singing, right, to bring all the young kids to this event. Then, when the event itself start, I

saw—I can hear girls screaming, to the lung, like, to the top of their lungs. And I am, I am next to this? What is—because I, I didn't have an idea and my mom didn't prepare me that they're gonna, literally, touch you and do—and cut a piece of meat on your body, and threw it, and people will clap and scream like you did something good, but it's something hurtful. So when I heard the scream, my sister was shaking, she was scared. And I—and all the, uh, older kids go first, then the younger kids, you know? And, I am like “no, I am not doing—” my sister went and she scream—I heard her screaming, yelling, crying, being in pain. I run away. I didn't know this village my—we visited it. I just run away from it. I run away—they look for me all day, and I was hiding, like, in the next village, because I was, literally, terrified and scared, because I saw 5 girls go, screaming, yelling, blood, uh, pads coming out. And, it was a man that was doing this! Not even another woman. I'm like no. So I didn't do it, but I saw my sister suffer, and as soon as I saw my sister, that was a click for me: I didn't even know what happened, I just blackout and start running for my life. And, when I saw that, and after I saw how my sister suffer from it, how much blood she lost, how she was so—she never was the same, since then. So I, I, I just like no—I need—when I came here and start talking about it. Uh, I'm supposed to do more about it but it's that about FGM, it's that I work more on sexual violence because that's what really happened to me personally, but FGM is about my sister. That was what prompt me to start talking about FGM. That's what start—prompt me to talk about a little bit of it, but I speak more about forced marriage and sexual violence. But, yeah that's the—my cue to advocate for my sister. That's why I'm so happy that you guys are doing this because that's gonna change a life. Because my sister's life was never the same, and she end up dying. She end up passing away.

Sam, Paley, and Alina: I'm so sorry.

Alina: So did you, as soon as this happened—not like as soon as that happened, but like, recently after that, were you feeling like “I should speak out” or was it later in your life that you felt that you should?

Aicha: Oh, definitely. No it's, it's a later, it's a later in my life, because when I was in Africa, in Niger, I was dealing with a lot, beside that, right? Like uh, physically my step-mom, like, beating me. If you look at my face you see so many marks, my legs, so many marks. Like, there was abuse in my home and then there—also the sexual violence, growing up. All of that—and I didn't have a language to even know that what was happening to me was wrong, because I didn't have a language. I start having a language, mind you, when I was about 20, when I, when I started going to Tahirih, and start working with Tahirih, and having—Tahirih Justice Center, and having, like, a therapist. And telling my story, she gave all the language about, “Oh, this wasn't right. Your uncle did that? That was, uh, sexual violence. This wasn't right. Oh, that was FGM!” It was just for all— “That happened to you? Oh, that was, uh, trafficking.” That was for all—so I didn't have language, because it was normal, because most of the people were a group that was

living that. There was no way I was speaking against it then. I start speaking about it once in U.S. and once I started working for Tahirih.

Alina: Absolutely. Well that ties in really well to, um, one of our other initiatives about finding interpreters, medically for people to get the language to talk about—

Aicha: Oh! Yesterday I wrote that down, I start—I read that on the email you sent me. And I’m like: “Can I be a medical interpreter? Can I do that?”

Alina: Yeah, absolutely.

Aicha: I think I can do that, that I can make a bigger difference, like in that. I definitely, I think I am interested on that.

Sam and Paley: Yeah!

Alina: For sure. Do you wanna talk a little more about that, Sam?

Sam: Yeah, so the program we’re funding—so there’s two ways to get certified through two different organizations. The problem with those organizations is it makes it really accessible, requirement-wise—you only need to be 18 and have a GED—um, but it costs a lot of money. It’s \$530 for a certification—

Aicha: Oh my god.

Sam: and then \$330 every 2-4 years depending on the certification you get. So, not only is it, like a um, time commitment to do the courses and then take the exam, it’s also a money commitment.

Aicha: Yeah.

Sam: That’s a lot of money for something that’s supposed to be accessible.

Aicha: Oh yeah!

Sam: So, what we’re doing is—I teach, uh, fine arts to kids, so I use that to fund this program that we’re running—

Aicha: Yeah!

Sam: So we completely pay for all the certification requirements including the exam, the \$530 plus \$330. Um, and then we also pay for the, um, portion where you're supposed to get trained, with the coursework.

Aicha: Cool.

Sam: So, yeah—

Aicha: How long is this training?

Sam: So, the training itself, I think it's about 35 hours, so as long as you complete the required, like, I think it's about 4 courses—

Aicha: ok

Sam: the, um, and then prove that you are proficient in both the language you are interpreting in and English, um—

Aicha: I speak nine languages by the way.

Sam, Paley, and Alina: Wow!

Aicha: I'm serious, I do. I like, I, but—it's just, um, yeah. But, most of them are, like a—so my mom is from Togo and my dad from Niger—

Sam: uh huh

Aicha: I grow up to Togo and Niger, and so, yeah. I, and I, I, I—all the dialects spoken in Togo, all the dialects spoken in Niger, English, and French, you know?

Alina: Yeah that's incredible!

Sam: That's awesome! So, yeah so, with this course, um I mean, the potential in California specifically is pretty, like—you can earn a lot of money for being a medical interpreter, and it is really flexible. Like, you can either do volunteer work, or you can do part-time, you can do contract—

Aicha: *(chuckles)* So much better than the jobs I do now!

Sam: *(chuckles)* You can do part-time, you can do contract, or you can be a full-salaried employee through a hospital.

Aicha: Oh wow

Sam: So, as long as you get certified, it boosts your chances, uh, from like 50% to 100%, that you'll definitely get employed.

Aicha: Yeah definitely. Because, see, with me personally and my life, like, I've been through a lot, a lot, a lot in life. And, I feel like I, I, I've overcome so much, and becoming the other side of it, and because of my faith, and the love that my mom raised me with, even though she did some mistakes, I feel like I'm able to—I wanna do jobs that are rewarding, like what you guys are doing. That's why I work with Tahirih Justice Center and volunteer and do all the things that I do, with them. Um, I would love to do something like that, just like, even to give back, because it'd make me happy to interpret. I'm trying to learn Spanish, you know?

Sam: Me too.

Aicha: Yeah, me too.

Sam: Yeah, so I mean there's a huge shortage of medical interpreters in this state—

Aicha: yeah

Sam: there's, like, 39.4 million people living here—

Aicha: Wow!

Sam: and there's 738 interpreters.

Aicha: Oh, definitely going to look into it.

Sam: So, yeah.

Paley: So the next thing we wanted to ask about—I guess in terms of supporting survivors there's a lot of different routes to go to and I think it is important to explore, like, multiple routes. But, we were just wondering where should we be trying to direct people's focus, cause there's like, there's like healthcare and trying to connect survivors with medical professionals, but there is also therapy through art or just informing more therapists in general. Like, what has personally—

Aicha: helped me?

Paley: helped you?

Aicha: Personally, I felt like what helped me was community, right? And therapy, and music. So like I, I remember when I was molested with my uncle and my sister's situation happened (when FGM all the things happened), I went to clubs and danced all the time. Even though it was not permitted we hide when everyone's sleeping and fly the wall, and dance and dance and just music, dancing, that's why today I still do Zumba as exercise. It's the exercise I would do when I—music is important. Healthcare is important, like, because there's, there's an assumption that when people are here and they are immigrants, they get access to everything, but no. Illegal immigrants doesn't have access to the healthcare. When you don't have status, you don't have access to Medicare or Medicaid, at that time. I don't know now if it's change or not. So, healthcare is so important, but through music, through therapy, and community, they really do help. I think that's the things that really helped me, personally. Yeah.

Paley: Do you think there's any, like I guess, particular initiatives that, like, groups like us (advocacy groups) could do? Since, like, music and community tend to be very personal experience that you find on your own, and tend to be very self-driven. Do you think there's anything, like, we can do as a group to, like, help create that?

Aicha: I mean, as a group we can do classes like Zumba classes, right? We can also go to churches and see if we can bring food and be part of whatever they do on Sunday, and get people to talk to us, right? Um, uh, with the, with the therapy, right, we can talk to a group of therapists, right? And, see if they can create courses or something that we can suggest to people for them to use, because it's, it's, trust first, then other people—other things will come. We create other things that they can—we need a trust first.

Alina: Very true.

Sam: Absolutely.

Aicha: And we can introduce them to Zumba class, the arts, the music, all of that.

Sam: Yeah, so—

Aicha: Because those things really helped me. Go ahead.

Sam: Us three, we're all really artsy people, like I have, uh, I—

Aicha: (*chuckles*) I'm so bad at arts.

Sam: (*chuckles*) I've played violin for the past 13 years, and—

Aicha: Wow!

Sam: Paley is, um, theatre, of course.

Paley: Yeah, I've been doing theatre for, yeah like, 12 years.

Aicha: Wow, you are superstars. I can see it in your eye that you are theatre. Like you are, like, like I can feel that. That's good. And, I can see arts. That's good, yeah.

Sam: So, we wanted to do more initiatives where we're, like, teaching people how to do, like, theatre, and like, fine arts. Like, I've learned 9 instruments, so I can teach all of them.

Aicha: Wow, yeah.

Sam: So, I was thinking, like, would that be, like, a viable thing to do at churches and mosques or community organizations?

Aicha: Oh yeah, oh yeah, definitely! You know Bahá'í's, we have also like a—we do at the parks, where we do arts and kids come. I feel like, have you crossed relatings?

Alina: Um, I'm not sure.

Aicha: We go, we go to the parks and then we, um, we have, like uh, art and music playing and different games, and things to do in any neighborhood. And, kids will just naturally come. And throughout, they will be talking to somebody that is professional that will be asking questions to the kids, and we will learn so much about their families and everything, right there and then, you know? So, it's important, like, to do that. And more you do that, in certain neighborhood, more people know that "Oh, these people are just here to help us." So people come and open up and we find healing and community like that. So, yeah, this is a good thing.

Paley: That's wonderful to hear.

Sam and Alina: Yeah.

Aicha: You guys are on such a good track of doing the right thing.

Alina: We're excited, I think, to connect with people a little bit more. We've been doing a lot of, like, administrative stuff, legislative stuff. Yeah, I think we should really get into the community here.

Sam and Aicha: Yeah, yeah.

Aicha: I, I'm, I'm here to help in anyways I can.

Alina: Thank you so much.

Sam: Thank you.

Sam: A pretty big, um, question that we were thinking about in the pre-interview was: Are there any harmful myths or stereotypes about FGM/C, outside of the lack of awareness between individual cul-cultures?

Aicha: Um, I didn't see yet, but what you guys can go, like um, on Ted Talks. There's a lot of people that talk about FGM/C, and learn about that. I don't know, honestly, I'm not sure. I know the myths at least, but, um, the other big stuff, um, I know a woman. She's an activist, she's a Bahá'í too. She traveled to Ghana, right, and went to the hospital, where woman—survivors of FGM—were. And, one person that was with her said certain things to—said things like “How can you let them do that to you?” Like, like, you cannot say that. Like, she—yes, it's not right, but she's in the culture. It's not, we, we can't blame the victims, right? Like, we can't. Like, no blaming the victim, being compassionate about their mentality and what they allow that to happen to happen to them. You can't say no when a whole village is doing it. Like, you can't just be the only one that won't listen, right?

Sam: So, the implication that it's a choice—

Aicha: It's a choice, exactly. And people are like “Oh, why didn't you tell a police officer, why didn't you seek for help?” Well, you know, it's not easy like here. Not everybody's—most people are corrupt in those societies there. So, being compassionate to the victims, I think is a big thing, especially when you travel out of United States. Even here, right? And, get them to trust you so you can know the real story.

Alina: Absolutely.

Sam: Should we conclude it here?

Alina: Yeah, anything else, anything else—

Sam: you want to say?

Alina: you want to talk about?

Aicha: Um, I just want to say that I am really proud of you guys as 3 female, that different backgrounds, sitting here and doing the good for the world. It's a good service. I am so happy, like, I know you guys and I've been sitting here nearly. So, you're doing a great thing and you're on a great path. Uh, just keep doing what you're doing, you're doing the right thing. Like, I am so proud of you guys, honestly.

Sam, Paley, and Alina: Thank you. That means a lot.

Aicha: And, hopefully, one day we will bring so much awareness that every young girl in every corner of the world will say "My body is my choice."

Alina: Absolutely.

Sam: I agree.

Aicha: Yeah, because they have to understand that, uh, but so many doesn't know that.

Sam, Paley, and Alina: Thank you so much!