## **Supplementary File 5: Detailed Characteristics of Included Studies**

No.	Authors and date	Country	Study aims, focus and/or research question	Region and Setting (where specified)	Methodology and/or theoretical perspective	Methods and recruitment (where stated)	Data analysis	Whole study sample	Eligible participants and country of origin
1.	Abdi, R. (2012) <sup>1</sup>	UK	To determine the role of FGM/C in creating a social, individual and gendered identity for a Somali woman.	East and Northeast regions of London.  African Well Women's Service in North London.	Narrative and life history approach.	In-depth interviews. Recruited women who held a strong anti-FGM/C opinion. Snowball sampling used.	Analysis using theoretical concept of the 'three-bodies'.	gynaecologists, 1 counsellor and 1 midwife 16 Somali women 2 men  Age range 20 – 72 years	16 Somali women
2.	Abdullahi, A., Copping, J., Kessel, A., Luck, M., & Bonell, C. (2009) <sup>2</sup>	UK	To explore the barriers to uptake of cervical screening and to identify strategies for overcoming these barriers.	London boroughs, Camden UK, North London. Somali community centre.	Qualitative methods	Focus groups and in-depth interviews.  Recruitment from a range of settings.  Included snowball sampling.	Thematic analysis informed by an interpretivist approach.	50 Somali-born women  Age range 25-64 years	50 Somali- born women
3.	Ahlberg, B. M., Krantz, I., Lindmark, G., & Warsame, M. (2004) <sup>3</sup>	Sweden	Questions why FGM/C persists despite eradication interventions and the migration to non-FGM/C practising areas.	Different forums including a school, youth clinics and a girl's football team.	Emergent research design in the tradition of qualitative research.	Individual and group interviews.  Snowball sampling used.	Thematic analysis.	30 men, 50 women, 10 girls, 5 boys and 15 professionals	50 women of Somali origin
4.	Ahmed, M., (2005) <sup>4</sup>	UK	To explore the influence of cross-cultural psychology, women's experience of FGM/C and their attitudes towards it.	West, East and South London and Sheffield.  Women's homes, community centre and a mosque.	Qualitative methods	Focus groups recruited via word of mouth, through attending Somali community centres and verbal advertising of the project	Thematic analysis.	56 women  Age range 18– 70 years	56 women. The majority born in Somalia – with some born in UK and the Middle East

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5.	Ameresekere, M., Borg, R., Frederick, J., Vragovic, O., Saia, K., & Raj, A. (2011) <sup>5</sup>	USA	To assess the prevalence of FGM/C in the interviewed sample, gain insight into commonly held beliefs about caesarean delivery, and understand patient perceptions of communication surrounding caesarean delivery and FGM/C by obstetric providers in the USA.	Greater Boston	Exploratory qualitative study	Semi structured in-depth interviews  Snowball sampling and linkage with the Somali Development Centre (SDC), a local community based organization	Thematic analysis	23 Somali immigrant women Age range 25-52 years	23 Somali participants
6.	Asefaw, F. (2007) <sup>6</sup>	Eritrea and Germany	To explore whether migration changes their attitude towards FGC. How do circumcised women deal with it in a society that opposes FGC? Can coherence and reasons be determined for why circumcised women subjectively suffer more in migration compared with when they live in their country of origin?	In the migrant's homes, in clinics or as part of awareness campaigns of the woman's organisation FORWARD	Mixed methods. Survey and qualitative methods	Survey and semi- structured qualitative interviews.	Unclear	420 women and 50 men  Age range 15-70 years	31 Eritrean migrants
7.	Baldeh, F. (2013) <sup>7</sup>	Scotland	To explore the experiences of obstetric care in Scotland among women who have undergone FGM/C. The objectives are to explore: · How women with FGM experience obstetric care in Scotland · The role of health workers in helping or hindering communication; · Potential changes and improvements in services.	Glasgow and Edinburgh In participants homes	Qualitative approach interpretivist paradigm and a feminist perspective	In-depth interviews.  Convenience sampling used.	Thematic analysis	7 women	7 women in total. 2 from The Gambia, 1 from Ghana and 1 from Sudan.

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8.	Ballesteros Meseguer, C., Almansa Martinez, P., Pastor Bravo, M. d. M., & Jimenez Ruiz, I. (2014) <sup>8</sup>	Spain	To explore the perceptions of a group of women who had experienced FGM/C regarding their sexual and reproductive health, with an aim to consider the impact on their sexual relationships, pregnancy and labour, as well as the social repercussions of this practice.	Region of Murcia, Spain.  In participants' homes.	Phenomenological qualitative study	In-depth interviews using structured openended approach  Informal conversations with midwives	Discourse analysis	9 sub-Saharan Africa women. Mean age 30 years	9 women from Senegal
9.	Behrendt, A. (2011) <sup>9</sup>	Germany	To listen to the opinions, perceptions and propositions of immigrants from Sub-Saharan Africa regarding the practice of FGM/C. To develop an effective and locally adapted approach to promote the abandonment of FGM/C among immigrant groups in Hamburg.	Hamburg	Participatory, cooperative approach which engages community members in a joint evaluation research process. Triangulated research design behaviour change model.	Mixed methods.  Qualitative and quantitative data collection from different target groups (1) key informant (health professional) interviews, (2) semi-structured individual interviews with African community members, (3) survey with community members. Snowball sampling	Qualitative data analysed and classified into themes.  Quantitative data analysed using SPSS	Total number of 1,767 participants with African migration background were interviewed for the quantitative survey  91 semi structured interviews with African community members  27 interviews with health professionals  Age range 15-83 years	91 key informant interviews - largely from Ghana, Nigeria and Togo
10.	Beine, K., Fullerton, J., Palinkas, L., & Anders, B. (1995) <sup>10</sup>	USA	to understand their cultural beliefs and behaviours better during pregnancy and to determine their attitudes toward their prenatal care experiences in San Diego,	Conducted at International Rescue Committee office or private	Exploratory study	Focus group interview.  Recruitment via community social networks	Content analysis	14 women  Age range 20 to 42 years	14 Somali women

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			in order to inform providers and enhance culturally relevant service programs.	homes of group participants					
11.	Berggren, V., Bergstrom, S., & Edberg, AK. (2006) <sup>11</sup>	Sweden	To explore the experience of FGM and the experiences of encounters with Swedish maternal health care among women from Eritrea, Somalia, and Sudan living in Sweden.	Three different cities in Sweden,  Conducted in the women's homes	Exploratory qualitative study	26 interviews recruited via snowball sampling or net- work sampling	Latent content analysis	22 women, 6 from Eritrea, 11 from Somalia, and 5 from Sudan (1 excluded as no FGM) Age range 24 to 73 years	21 women from Eritrea, Somalia, or Sudan
12.	Betts, V. (2011) <sup>12</sup>	Canada	To critically examine popular ideas of Somali women's identity, gender and sexuality in Canada; and, to evaluate Somali women's experiences with Canadian health care professionals, and how it compares with their experiences with medical professionals in Somalia.	Greater Toronto Area, Canada. From Community Centre in a small office	Anthropological methods	Individual and paired interviews one discussion group of fourteen women.	Placed loosely into categories	Thirteen women aged 18-65 years	13 Somali women

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13.	Bravo Pastor del Mar, M. (2014) <sup>13</sup>	Spain	To identify the knowledge, attitudes and experiences regarding genital mutilation of a group of women from Sub-Saharan African countries where FGM/C is a traditional practice.	Region of Murcia, Spain.  The interviews were held individually at the homes of the participants, at their request, always in the absence of the husband and occasionally in the presence of minor children.	A qualitative study using the life story method	Life Story interviews held until data saturation was reached. Informal conversations including telephone calls, emails, informal chats and informal meetings with key informants. Socio- demographic Questionnaire  Contact through different associations for African women and snowball sampling	The analysis was carried out using the categories that emerged from the narratives collected in the interviews.	20 Senegalese women, 2 Nigerian women and 2 Gambian women  Age range 23 - 42 years	20 Senegalese women, 2 Nigerian women and 2 Gambian women
14.	Bulman, K. H., & McCourt, C. (2002) <sup>14</sup>	UK	To develop an understanding of the reality faced by Somali women in their contacts with the maternity services in the UK and to explore professionals perceptions of Somali women and their maternity care needs - how they approached providing for these needs and their ideas for improving services.	West London  Conducted in participants homes or clinics	Qualitative (ethnographic context narrative approach)	6 individual interviews and two focus groups with Somali women, recruited via snowball sampling method  2 focus groups with midwives, (caseload and hospital midwives). Individual interviews with a Somali health-link worker, a woman on the Health and Race Working	Thematic analysis	12 Somali women participating in qualitative interviews  Health workers (number not specified) were also interviewed	12 Somali women

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						Group, and an obstetric registrar.			
15.	Carroll, J., Epstein, R., Fiscella, K., Gipson, T., Volpe, E., & Jean-Pierre, P. (2007) <sup>15</sup>	USA	To explore the range of both Bantu and other Somali women's experiences with communication about preventive health services in the US in order to understand the role communication plays in disparities in this population.	Rochester, NY, USA. At a time and place convenient to the participant	Grounded theory	Individual interviews, a Somali women's focus group was conducted to check thematic validity and clarify questions and concepts. Word of mouth, key informants and primary care provider referrals; and snowballing	Grounded theory, a coding/ editing method that extracts emerging themes	34 women Age range 18 - 53 years (median age 27 years)	34 Somali refugee women
16.	Chalmers, B., & Omer- Hashi, K. (2002) <sup>16</sup>	Canada	To explore recent perinatal experiences in Canada	Greater Toronto region, at participants home	Unclear	Sampling from community sites and snowball sampling.  Structured questionnaire with 4 open ended questions, administered face to face involving reflection and discussion	Unclear	432 Somali women Mean age 34 years	415 Somali women (who responded to the open ended questions)
17.	Degni, F., Suominen, S. B., El Ansari, W., Vehviläinen- Julkunen, K., & Essen, B. (2014) <sup>17</sup>	Finland	To explore immigrant Somali women's experiences of reproductive and maternity health care services (RMHCS) and their perceptions about the service providers.	Helsinki, Vantaa, Espoo and Turku cities in Finland. Conducted at	Exploratory, qualitative study	Focus group discussions via purposeful sampling	Guided by concepts of cultural care	70 women  Age range 18~50 years	70 Somali women

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				woman's home and swimming pool hall					
18.	d'Entremont, M., Smythe, L., & McAra- Couper, J. (2014) <sup>18</sup>	France	Explored the experiences of childbirth for women who have been excised.	At a place of the woman's choosing	Hermeneutic phenomenology Gadamerian philosophy	Interviews Purposive sampling methods	Constant, circular process of thematic, textual interpretations	4 women	4 women from different countries
19.	Essén, B., Johnsdotter, S., Hovelius, B., Gudmundsso n, S., Sjöberg, N. O., Friedman, J., & Östergren, P. O. (2000) <sup>19</sup>	Sweden	To explore the attitudes, strategies and habits of Somalian immigrant women related to pregnancy and childbirth, in order to gain an understanding as to how cultural factors might affect perinatal outcome.	Localities of the different Somalian immigrant associations in their own residential areas	Qualitative	Qualitative indepth interviews. Recruited from community organisations	Systematic textual analysis	15 women  Age range 20-55 years	15 Somali women
20.	Fawcett, L., (2014) <sup>20</sup>	USA	To identify and measure patterns of cultural knowledge and variations (cross-cultural agreement and disagreement) between Somali resettled refugee women (SRRW) and healthcare providers (HCP) on childbearing models. To investigate and measure intra-cultural variations in the domain of childbearing knowledge among Somali resettled refugee women. To explore the subjective	Arizona Metropolitan Phoenix area, in a café or participants' homes	Quantitative survey and ethnographic methodologies and phenomenological approaches using open-ended semi-structured interviews.  Used theory of Cultural Consensus Model and concepts of embodiment.	Culture consensus questionnaire (CCM), participatory observations, in-depth semi-structured interviews.  Used snowball sampling via community organisations	Phenomenologic al analysis and inductive explorative approach	Questionnaires (N=174)  Interviews; Somali resettled refugee women (SRRW, n=30); Healthcare Providers (HCP, n=10)  Age range 18-70 years	30 Somali resettled refugee women

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			and intersubjective perceptions of female circumcision.						
21.	Gali, M. A. (1997) <sup>21</sup>	USA	To explore the relationship between the psychological and medical concerns circumcised women face and barriers to reproductive health care delivery in the United States.	San Francisco Bay Area.	Qualitative exploratory research	Semi-structured interviews were conducted in person and by mail.  Recruitment using community organisations	Content analysis	26 women Aged 21 -45 years	26 women from Sudan, Eritrea, Ethiopia and Egypt
22.	Ghebre, R. G., Sewali, B., Osman, S., Adawe, A., Nguyen, H. T., Okuyemi, K. S., & Joseph, A. (2015) <sup>22</sup>	USA	Exploring suitable language, structure, and context to describe cervical cancer prevention and screening methods among women in Minnesota's Somali community.	Minnesota  Community locations	Qualitative study with community engagement socio- ecological framework	Informant interviews. Used snowball sampling.	Themes and subthemes using the socio-ecological framework	23 participants  Age range 26-45 years	23 Somali women
23.	Glazer, E., (2012) <sup>23</sup>	Canada	Aimed to explore this possibly primarily through subjective reports of pain discussing testable pain along with interpretation and meaning of bodily pain and FGM/C from the perspective of women with FGM/C	Greater Toronto Area, Canada at community health centre (CHC)	Mixed-methods, including a qualitative component drawing upon interpretive and embodied phenomenology	Qualitative interview semi- structured interviews using a convenience sample	Phenomenologic al analysis	14 Somali- Canadian participants Age range 21-46 years	14 Somali- Canadian participants

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24.	Glover, J., Liebling, H., Barrett, H., & Goodman, S. (2017) <sup>24</sup>	UK	Investigate the experiences of women who had undergone FGM and the psychological effects they had experienced. It also sought to understand the psychological impact of physical health complications, survivor's resilience and their cultural context	Multiple UK settings	A qualitative methodology of grounded theory Principles of feminist research were observed	In-depth interviews from a non-probability convenience sampling frame based on snowballing sampling	Theoretical memos and grounded theory analysis	20 women survivors of FGM Mean age 38 years (SD=6.5, range=25-51)	20 women from various countries Somalia (n=10), Kenya (n=2), South Africa (n=6), and The Gambia (n=2)
25.	Guerin, P. B., Allotey, P., Elmi, F. H., & Baho, S. (2006) <sup>25</sup>	Australia and New Zealand	To enhance the understanding of the immigration experience on the reproductive health of women from Horn of African and Middle Eastern countries resident in Victoria to provide a safe means by which Somali women could express their views about FGM/C	Melbourne Australia and New Zealand. In homes of the participant	Ethnographic cohort design Community-Based Participatory Research	In-depth, open- ended and unstructured interviews, focus group discussions and participant observation. Sampling involved using community networks and snowball approach.	Thematic analysis	Australia (n = 255) and New Zealand (n = 64). African women in the sample (n = 141) Middle Eastern women (n = 114) 54 women; 19 and 50 years	10 women from Somalia, Ethiopia, Eritrea, Sudan and Nigeria
26.	Hill, N., Hunt, E., & Hyrkas, K. (2012) <sup>26</sup>	USA	To describe and better understand Somali immigrant women's health care experiences and beliefs regarding pregnancy and birth in the Unites States.	North-eastern United States Setting not given	Qualitative study	Focus group convenience sampling and women in turn identified friends and family	Thematic content analysis	18 participants  Age range 27-42 years	18 Somali women
27.	Hussein, E., (2010) <sup>27</sup>	UK	To gain an in-depth understanding of some of the experiences and perceptions of women coming from countries with high prevalence rates of FGM/C living in Bristol.	Setting not given	Participatory Ethnographic Evaluation and Research (PEER) and tenets of social construct	Informal in-depth interviews in third person loosely structured interviews. Equipping members from the community to become 'PEER researchers	Not stated	8 adult women	8 Somali and Sudanese adult women

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28.	Hussen, M. A. (2014) <sup>28</sup>	New Zealand	To understand the situation of both the Christchurch women with FGM and their health providers, in order to increase knowledge of FGM and ensure improved health services for women with this condition.	Christchurch, New Zealand, at community gatherings	Qualitative descriptive research methods	Focus group approach for women from East Africa known to the social worker and researcher  Individual interviews with health professionals	Thematic analysis	20 focus group participants – mean age 21-65 years 3 health providers	20 women from Eritrea, Ethiopia, Somalia and Sudan
29.	Johansen, R.E. (2017) <sup>29</sup>	Norway	Explores experiences and perceptions of premarital deinfibulation. It explores whether Somali and Sudanese men and women understand deinfibulation as a purely medical issue or whether their use of the services is also affected by the cultural meaning of infibulation.	Oslo and other villages and towns in Norway. From participant home, workplace or public space such as a coffee bar or a park	Qualitative study	In-depth and key informant interviews Participant observation validation seminars. Utilised Snowball sampling	Themes and patterns	23 women and 13 men Age range 18-65 years	23 Somali and Sudanese women
30.	Jones, A. (2010) <sup>30</sup>	UK	To understand the experiences and views of women who had undergone female genital mutilation (FGM/C).	South England, UK, in participant own home or the community centre	Interpretative phenomenological analysis (IPA) relativist approach.	Semi-structured interview. Recruited from FORWARD, community group	Interpretative Phenomenologic al Analysis (IPA)	Six participants  Age range 19-45 years	6 participants from Sudan and Somalia
31.	Khaja, K. (2004) <sup>31</sup>	Canada and USA	To describe their experiences with circumcision and to share the personal and cultural meanings of those experiences	Toronto, Canada, and Salt Lake City, Utah. Setting not stated.	Life history methodology / ethnographic	Face-to-face, individual life history interviews. Purposive sampling recruited with the assistance of targeted Somali community members or service providers	Content analysis	17 women  Age range 20-79 years	17 Somali women

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32.	Khaja, K., Lay, K., & Boys, S. (2010) <sup>32</sup>	Canada and USA	Examined the lives of Somali Muslim women who were circumcised.	Ontario Canada and Salt Lake City, Utah North America Setting N/S	Exploratory qualitative	Face-to-face interviews	Not stated	17 circumcised Somali women Age range 20-79 years	17 circumcised Somali women
33.	Lundberg, P. C., & Gerezgiher, A. (2008) <sup>33</sup>	Sweden	to explore the experiences from pregnancy and childbirth related to FGM/C among Eritrean immigrant women	At informants' homes or in a separate room	Ethnographic method	Semi-structured and open-ended in-depth interview Purposive sampling with snowball sampling technique	Thematic analysis	15 women  Age range 31-45 years	15 Eritrean women
34.	Maier, C. (2003) <sup>34</sup>	Austria	Three questions:  · How did the affected woman experience and handle her genital mutilation when she was a girl? How did this influence her life and what are the physical and mental consequences? · In the context of FGM: Did immigration add new problem areas?	Not stated	Qualitative research	Guided interviews with a relatively open design	Not stated	3 women	3 women from different countries
35.	Maternity Action. (2014) <sup>35</sup>	UK	To explore potential barriers to healthcare, both for women in general, and for women who experience comparatively poor health outcomes, in order to contribute to an understanding of how these may be addressed	Leeds, Manchester and London, UK. Community groups were hosted and facilitated Organisations	Online survey, and a series of focus groups	Focus groups recruited from service user networks	Themes from the literature	261 in the survey  23 women in focus groups.	23 women from several countries
36.	McNeely, S., & Christie-de Jong, F. (2016) <sup>36</sup>	USA	To explore perspectives of Somali refugees on FGM/C and potential changes in, these after migration to the USA.	Denver metropolitan area, USA in participants' homes	Descriptive, socio- cultural study	Semi-structured and open-ended interviews snowball sampling with two gatekeepers	Thematic content analysis	13 Somali refugees Age range 20-70 years	13 Somali women

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37.	Moxey, J. M., & Jones, L. L. (2016) <sup>37</sup>	UK	To explore how Somali women exposed to FGM, experience and perceive antenatal and intrapartum care in England	Birmingham, West Midlands  In a private room at a community centre	Descriptive qualitative methodology	Semi-structured Face-to-face interviews purposively sampled from community centres and using a snowball approach	Inductive thematic analysis	10 women  Age range 20-49 years	10 Somali women
38.	Murray, L., Windsor, C., Parker, E., & Tewfik, O. (2010) <sup>38</sup>	Australia	To uncover first-person descriptions of the birth experiences of African refugee women in Brisbane, Australia, and to explore the common themes that emerged from their experiences.	In room at a clinic or in participant own homes	Phenomenology Husserlian phenomenological framework.	Semi structured interviews purposeful, snowball strategy	Giorgi's phenomenologic al analysis.	10 women  Age range 20-40 years	10 women from Sudan Liberia Ethiopia Somalia
39.	Norman, K., Gegzabher, S. B., & Otoo- Oyortey, N. (2016) <sup>39</sup>	UK	Rapid participatory study amongst migrant communities in Norfolk and Essex, to help shed more light on this issue and to support their community engagement programme.	Norfolk, and Essex, in the community	Participatory Ethnographic Evaluation and Research (PEER) PEER is a qualitative, participatory research methodology	Interviews using snowball sampling	Participatory thematic analysis	18 peer researchers and 33 interviewees (each of the peer researchers chose two friends/peers to interview)	33 women from various countries
40.	Norman, K., Hemmings, J., Hussein, E., & Otoo- Oyortey, N. (2009) <sup>40</sup>	UK	To gain in-depth insights from women originally from high-prevalence FGM countries, and currently living in and around Westminster.	Borough of Westminster, London in the community	Participatory Ethnographic Evaluation and Research (PEER) a qualitative, participatory research method	In-depth conversational interviews snowball sampling used	Participatory thematic analysis	10 peer researchers conducted interviews with 3 friends each (n=30). Peer researchers were also interviewed. Age range 25 years +	40 women  (10 peer researchers who were also interviewed and 30 other women) from Sudan, Eritrea and Somalia

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41.	O'Brien, O., Baldeh, F., Hassan, J., & Baillie, M. (2017) <sup>41</sup>	Scotland	To facilitate community engagement with FGM affected populations, to enable their voices to contribute to the development of awareness raising around FGM and to ensuring culturally appropriate FGM services for Scotland.	Glasgow and Edinburgh Scotland, in the community	Participatory Ethnographic Evaluation Research (PEER) ethnographic research principles	Interviews with contacts in community-based organisations and friends	Participatory analysis	19 peer researchers (who were also interviewed) and who then carried out 29 interviews	48 women  (19 peer researchers who were also interviewed and 29 women) from Sudan Nigeria Zimbabwe
42.	O'Brien, O., Baldeh, F., Sivapatham, S., Brown, E., & O'May, F. (2016) <sup>42</sup>	Scotland	To facilitate community engagement on FGM with women, men, young people and religious leaders to enable their voices to be heard and contribute to the development of awareness raising around FGM as well as ensuring culturally appropriate services for Scotland	Glasgow and Edinburgh Scotland, in the community,	Participatory Ethnographic Evaluation Research (PEER) ethnographic research principles	Interviews and focus groups. Convenience and snowball sampling through contacts	Participatory analysis	28 peer researchers (12 women, 16 men) who carried out 78 interviews	39 women  (9 female peer researchers who were also interviewed and 30 women) from 17 African countries
43.	Palfreyman, A., Brown, E., & Nam, S. (2011) <sup>43</sup>	UK	To explore FGM within the context of Birmingham.	Birmingham	Participatory Ethnographic Evaluation and Research (PEER)	In-depth semi- structured interviews with and by peers recruited using community organisations and snowball sampling	Participatory thematic analysis	Fifteen peer researchers conducted a total of 90 interviews  Age range 17 - 48 years	105 women  (15 peer researchers who were also interviewed, and 90 women) from Somali, Eritrea, Sudan, Sierra Leon and Gambia

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44.	Recchia, N., & McGarry, J. (2017) <sup>44</sup>	UK	The overall aim of the study was to develop and facilitate a participant led arts-based workshop with women who were survivors of FGM in order to explore their experiences and the impact of FGM on their health and well-being.	Nottingham  At a local FGM specialist support organisation	Creative narrative approach which included the sharing of personal stories, the creation of pottery models and the sharing of artefacts - arts-based research approach using a feminist theoretical framework	The composition of the workshop essentially encompassed two main strands: the creation of a persona and sharing artefacts. Recruited though a local FGM specialist support organisation	Narrative approach	Six women agreed to take part in the project Age range 25-51 years	6 women from Kenya, Nigeria and Ethiopia
45.	Safari, F., (2013) <sup>45</sup>	UK	Explored women's experience of deinfibulation and its aftermath.	At NHS hospital, or participant's home	Qualitative approach Interpretive Phenomenological Analysis (IPA)	Semi-structured interview	Interpretive Phenomenologic al Analysis (IPA)	9 women  Age range 19-44 years	9 women from Somalia Eritrea
46.	Salad, J., Verdonk, P., de Boer, F., & Abma, T. A. (2015) <sup>46</sup>	Netherlands	To explore the perceptions of Somali women living in the Netherlands regarding measures to prevent cervical cancer	In cafés, libraries, schools, and community centres	Qualitative approach Intersectionality is therefore integrated in the HBM in this study	Semi-structured interviews, group discussions, recruited though Purposive sampling using Snowball sampling	Framework of intersectionality enabled a comprehensive thematic content analysis	Interviews with 14 young women (aged 17-21) and 6 older women (mothers aged 30-46)  Group discussions with 26 women (mothers aged 23-66)	46 Somali women

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47.	Shaw, E. (1985) <sup>47</sup>	USA	To 1) provide a summary of basic information about female circumcision; 2) summarize the results of an exploratory study which identified special needs and concerns of circumcised women who have used the western medical system while living in the United States, and 3) identify problems and concerns student health care providers have encountered while caring for this group of women.	Southwestern University town. Setting not stated.	Exploratory study	Informal interviews	Thematic analysis	12 circumcised women Six Planned Parenthood Centres and four obstetric gynaecological clinics responded	circumcised women from Sudan, Egypt, and Somalia
48.	Shermarke, M.A.A. (1996) <sup>48</sup>	Canada	Explores female circumcision within the Canadian community perspective	Montreal, Quebec and Ottawa, Ontario.  In homes of the interviewees or in selected, quiet, public places	Case study and Qualitative methods	Individual interviews selected through personal contacts	Thematic analysis	4 interviewees from Montreal and 4 from Ottawa Age range 16 - 58 years	8 Somali women
49.	Straus, L., McEwen, A., & Hussein, F. M. (2009) <sup>49</sup>	UK	To examine cultural and social aspects of childbirth, and to determine how they intersect with the needs and experiences of Somali women in the UK. To explore the experiences and needs of Somali women in the UK during pregnancy and childbirth.	London  In the community	Ethnographic approach narrative approach	In-depth narrative interviews  Recruitment from two community Somali women's groups and snowballing	Thematic analysis	8 Somali women Age range 23-57 years	8 Somali women

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50.	Thierfelder, C. (2003) <sup>50</sup>	Switzerland	To analyse the specific situation of genitally mutilated African immigrant women, and the health care providers who encounter them in the Swiss health care system.	Cantons of Geneva, Vaud and Zurich.  Setting not stated	Qualitative research.	Semi-structured, in-depth interviews and focus group discussions.  Utilised purposive sampling and snowball sampling drawing on contacts with migrant-support and community organisations.	Thematic content analysis	Women (n=29) and men (n=3) (n=37) with Swiss health care providers (20 physicians and 17 midwives) Age range 17-64 years	29 women from Somalia and Eritrea
51.	Thierfelder, C., Tanner, M., & Bodiang, C. M. K. (2005) <sup>51</sup>	Switzerland	To analyse how immigrant women with FGM experience gynaecological/obstetrical care in the Swiss health care system, and to investigate if physicians and midwives treat and counsel FGM related complications adequately.	Zurich, Lausanne and Geneva, Switzerland. Setting not stated.	Qualitative methods.	Four focus group discussions and interviews.  Purposive sampling via migrant-support and community organisations.	Unclear	29 women 37 health care professionals	29 women from Somalia and Eritrea
52.	Upvall, M. J., Mohammed, K., & Dodge, P. D. (2009) <sup>52</sup>	USA	To explore the healthcare perspectives of Somali Bantu refugees in relation to their status as women who have been circumcised and recently resettled in the US.	South-western Pennsylvania, at a local refugee centre	Qualitative study	Focus groups purposive sample identified by a local non-profit organization	Thematic analysis	23 resettled Somali women, a local female physician Age range 19-43 years	23 resettled Somali women
53.	Vangen, S., Johansen, R. E. B., Sundby, J., Traeen, B., & Stray- Pedersen, B. (2004) <sup>53</sup>	Norway	To explore how perinatal care practice may influence labour outcomes among circumcised women	At women's homes or public cafes, or hospital	Qualitative method drawing on theories of empowerment	In-depth interviews. Recruited from Somali's association and in health facilities and through snowball sampling	Thematic analysis	23 Somali immigrants and 36 Norwegian health care professionals; Age range 18-55 years	23 Somali women

No.	Authors and date	Country	Study aims, focus and/or research question	Region and Setting (where specified)	Methodology and/or theoretical perspective	Methods and recruitment (where stated)	Data analysis	Whole study sample	Eligible participants and country of origin
54.	Vaughan, C., White, N., Keogh, L., Tobin, J., Ha, B., Ibrahim, M., & Bayly, C. (2014) <sup>54</sup>	Australia	To improve understanding of the impacts of FGC and to make suggestions for service development - by engaging with local women, communities and health providers	North Yarra Carlton, Collingwood and Fitzroy  Research conducted in community centre meeting rooms.	Community based qualitative approach	8 focus group discussions, 4 small group discussions, 10 individual interviews with community members. Recruitment from community consultations, community organisations and networks  11 interviews with service providers	Thematic analysis	123 individuals  112 migrant men and women and 11 health providers	87 migrant women from Eritrea, Ethiopia, Somali and Sudan
55.	Vaughan, C., White, N., Keogh, L., Tobin, J., Murdolo, A., Quiazon, R., & Bayly, C. (2014) <sup>55</sup>	Australia	To identify the FGC-related service needs prioritised by affected communities living in Victorian regional centres, and to build evidence as to the training, education and professional development required for service providers working in regional Victoria to be able to meet these needs.	Australia Regional Victoria Ballarat, Geelong, Latrobe Valley and Shepparton,  Research conducted in community meeting rooms	Community based qualitative approach	Focus group discussions.  Recruitment from migrant support agencies and then using snowball sampling	Thematic analysis	51 migrant community members 950 women, 1 man) 15 health service providers	50 women from Togo Sudan and Kenya
56.	Vloeberghs, E., van der Kwaak, A., Knipscheer, J., & van den Muijsenberg h, M. (2012) <sup>56</sup>	Netherlands	Explored psychosocial and relational problems of African immigrant women in the Netherlands who underwent female genital mutilation/cutting (FGM/C), the causes they attribute to these problems and the way they cope with these health complaints.	In participants' homes	Mixed-methods study used standardised questionnaires as well as in-depth interviews, and qualitative participatory methods Grounded Theory	In-depth interviews using peer researchers. Snowball sampling used	Thematic framework analysis	66 women; Age range 18~69	66 women from Somalia, Sudan, Eritrea, Ethiopia or Sierra Leone

No.	Authors and date	Country	Study aims, focus and/or research question	Region and Setting (where specified)	Methodology and/or theoretical perspective	Methods and recruitment (where stated)	Data analysis	Whole study sample	Eligible participants and country of origin
57.	Wiklund, H.,		To study the childbirth	Umea and	Grounded theory	Interviews were	Grounded	9 women and 4	9 Somali
	Aden, A. S.,	Sweden	experiences of Somali	nearby		semi-structured.	theory analysis	husbands of the	women
	Högberg, U.,		women and men in Sweden.	municipalities;		Recruited from the		women studied	
	Wikman, M.,			in women's		Swedish Medical		and additional 3	
	& Dahlgren,			homes		Birth Register and		men; 21-55	
	L. (2000) <sup>57</sup>					`patient' records		years	

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