

FEMALE GENITAL MUTILATION or FEMALE CIRCUMCISION



By Cynthia Lief Ruberg,
MS Ed, LPCC, FAACS

A few years ago, I had the opportunity to present a talk on Female Genital Mutilation (FGM for short) at the national conference for Sex Educators, Counselors and Therapists (AASECT). I have decided to share some of my talk with my internet readers because FGM, although clearly a woman's issue, is also an issue for all people to be aware of-- it represents the repression of female sexuality to the utmost extreme! Furthermore, although it mostly exists in other parts of the world, it raises issues for Americans. Judge for yourselves...

BACKGROUND FACTS

Female Genital Mutilation is euphemistically also called "female circumcision," but it is not what we (in western society) usually think of as circumcision (i.e., the removal of the penile foreskin). In most cases, a more accurate analogy to the term "female circumcision" (FGM) would be amputation of the penis! It is commonplace to women in at least 25 African Nations and in parts of the Middle East and has been practiced since the

time of the Pharaohs. It is estimated that 85-100 million women have been subjected to it and approximately 2 million girls still endure FGM sometime between infancy and adolescence.

The details of the procedure vary slightly, depending on the region in which it is practiced, but the basics are the same: Some time between infancy and adulthood, all or part of a girl's external genitals are cut away with a knife or a blade of some sort (usually a crude blade) and with no anesthetic! Specifically, Female Genital Mutilation takes 3 forms:

SUNA CIRCUMCISION--(the mildest) involves the removal of part or all of the clitoris.

EXCISION--involves the cutting away of the clitoris and all or part of the inner labia.

INFIBULATION--(the harshest) involves removal of the clitoris, inner labia, and part of the external labia, followed by the sewing together of the two sides of the vulva, leaving only a pea sized opening for urine and menstrual blood. Usually, the external lips are also scraped with a blade prior to being stitched together with thread or long thorns. Without anesthetic, the opening must then be painfully widened on the wedding night!

THE CONSEQUENCES

The physical, emotional and spiritual consequences of FGM are often grave, and the pain is long lasting! Commonly, infections occur because of unhygienic practices. The worst current scenario is the occurrence and spread of HIV. However, blood poisoning, tetanus and other secondary infections also are common complications. Often, these women have persistent medical problems with urination and menstruation as well as painful intercourse, infertility and reduced or lost sexual sensations. Women who are infibulated have to be cut open in order to give birth, thus also increasing the dangers of childbirth.

WHY DOES FGM PERSIST?

The answers to this question are complex and are rooted in the cultural and practices and beliefs of the people who undergo FGM. Religious beliefs and the economic needs of the society perpetuate it.

FGM is often a secret component of elaborate "rites of passage" which prepare young girls to become woman and wives. Sometimes, it is done without ceremony. In Nigeria, for example, it is commonly carried out in the street with little or no ceremony.

In all the societies where FGM is practiced, it is governed by deeply held cultural mythology. According to

Michael Scott, MD, who writes on this subject, "Both male and female circumcision are supported by the wide spread belief that the human body is androgynous at birth. To enter adulthood, girls must be relieved of their male part (the clitoris) while boys must lose their female part (the foreskin). Girls who have not undergone this procedure are shunned as unclean, oversexed, and unmarriageable." In Nigeria, some women believe that if a new baby's head touches its mother's clitoris, the child will go insane. Thus, they insist on FGM.

Interestingly, it is the women in these societies who actually perpetuate this practice. Since the clitoris is believed to be a male part (a miniature phallus), they want it removed to signify the embodiment of womanhood.

Mothers enforce mutilations to insure "good marriages" for their daughters. (It brings a high bride price.) To a select group of older women (who are the practitioners of FGM), this practice provides a sense of self esteem not afforded to most other women in these (male-dominated) societies.

Men actually take a "back stage" role during the ritual ceremonies. However, male psychology and economics are central to this practice. FGM allows men to control female sexuality, which is considered dangerous! Grooms want their brides to have undergone FGM because it means

that the wife will be "faithful and modest." (i.e., not sexually demanding). The extreme form of FGM, infibulation, actually demonstrates virginity! As mentioned, a high bride price is paid for a woman who has been properly circumcised.

Anthropologists surmise that FGM was instituted to act like a chastity belt. Since sexual sensation is lessened, the chance that the bride will stray is less. This also helps to insure that a man's son is really his own. Also, FGM is especially important where polygamy is practiced, since clitoridectomy might help protect women from sexual starvation when her husband has many wives to satisfy. Finally, most societies that practice are patrilineal (i.e., property and social rank are passed down from father to son). That means that women in these societies have no rank or power. FGM is just a piece of this picture.

Religion is also often used to justify FGM. Even though FGM is practiced in Non-Islamic as well as Islamic cultures, many African Muslims say it is a religious duty. In fact, according to my sources, the Koran offers no encouragement for FGM. The issue here seems to be more of an extremist-fundamentalist issue and religion is used as an excuse.

WHY WRITE ABOUT FGM HERE?

As I mentioned, FGM is now encroaching on our society and thus is something to recognize. FGM is being observed among some African immigrants who are entering this country. As a result, two democratic congresswomen have introduced legislation that forbids FGM in girls younger than eighteen and mandates education of immigrants on the dangers and illegality of this practice.

To bring this situation to light, the Dateline TV News Show (March 1994) depicted the story of an illegal immigrant, a Nigerian woman named Lydia Oluloro, who was in danger of being deported back to Nigeria. However, because she feared that her family would mutilate her daughters (as she had been at age four) if they left the asylum of this country, she pled to the court to suspend her deportation and to be allowed to stay in the USA. Her plea was later granted and her daughters have thus far been spared genital mutilation.

QUESTIONS WE MIGHT ASK OURSELVES ABOUT FGM?

1) Should we regard FGM "across the board" as blatant abuse of women or should we try to understand it and respect it as another people's cultural tradition?

2) Do we have a right, as Westerners, to interfere with the cultural practices and rituals that "work" for other societies and have for thousands of years?

If you have any other questions, thoughts or feelings on this subject that you wish to share, email me at:
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