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FEMALE CIRCUMCISION IN AFRICA: PROCEDURES, RATIONALES, SOLUTIONS, AND THE ROAD TO RECOVERY

Shayla McGee *

A Note to the Reader

Female circumcision and female genital mutilation represent the spectrum of surgical operations performed on the genitalia of young girls and women in more than twenty countries in east, west, and central Africa.¹ Female genital surgeries also occur in Indonesia and Malaysia and are practiced by Bohra Muslims in India, Pakistan, and South Yemen.² I chose to focus on the practices as they occur in Africa, not only due to the wealth of information I was able to find on the topic, but also because of my sincere interest and heartfelt connection to the continent.

As I examine female genital surgeries, I will utilize terminology associated with the practice. The three main terms used in describing the practice are as follows: 1) female circumcision (FC)—a term preferred by African coalitions³ that connotes the full spectrum of the practices; 2) female genital mutilation (FGM)—a "value-loaded" term purposely used to connote "horror and disgust;"⁴ and 3) female genital surgeries—the most neutral term of the three.⁵ The term female genital surgeries will be used broadly throughout this article to refer to the full range of surgical operations. The works of different African feminists reveal that some prefer the term female circumcision, while others use female genital mutilation terminology. I began writing this paper under the preconception (and misconception) that all female genital surgeries were female genital mutilation. However, my study of Western, African American, and African feminist theories have

* J.D. Candidate, May 2005, Washington and Lee University School of Law. I would like to thank Mantai and Motilisu for their open, honest, and engaging interviews. I am grateful to the guidance and helpful comments of Professor Quince Hopkins who served as my sponsoring professor for this project, and who first encouraged me to turn this class paper into an article. I would also like to thank F. Paul Pittman for his support and the valuable research assistance he provided me with when I was short on time. Finally, I would like to thank my parents, Anthony and Novena McGee, for the support and resources that they gave me that were so necessary in the completion of this article.

¹ EFUA DORKENOO & SCILLA ELWORTHY, *FEMALE GENITAL MUTILATION: PROPOSALS FOR CHANGE 11* (Judith Kendra ed., Minority Rights Group 1992) (1980).

² *Id.*

³ Leslye Amede Obiora, *Bridges and Barricades: Rethinking Polemics and Intransigence in the Campaign against Female Circumcision*, in *GLOBAL CRITICAL RACE FEMINISM: AN INTERNATIONAL READER* (Adrien Katherine Wing ed., 2000).

⁴ JO BRIDGEMAN & SUSAN MILLINS, *LAW AND BODY POLITICS FEMALE CIRCUMCISION: MUTILATION OR MODIFICATION?* 151 (Lois S. Bibbings ed., Dartmouth Publishing Company 1995).

⁵ Christine J. Walley, *Feminism, Anthropology, and Global Debate*, in *GENITAL CUTTING AND TRANSNATIONAL SISTERHOOD* (Stanlie James & Clair Robertson eds., 2002).

changed those views, and my intent is to reflect discrimination in my use of terminology.

Part I discusses the different types of circumcision and the procedures and consequences of the surgeries. Part II presents my thesis. Part III illustrates the religious, psychosexual, hygienic, and cultural justifications for female genital circumcision. Part IV states my conclusion and gives various solutions to female genital surgeries. Interspersed throughout the four parts is information obtained from two interviews. One interview was with Mantai,⁶ a senior manager for software development. Mantai lives in the United States; was a resident of Lesotho; and is from the village of Mofolaneng where her father and mother each had the opportunity to serve as chief of the village. Although both her father and mother adamantly prohibited female circumcisions in the village, Mantai stated that some people in the village would "sneak" and have the procedure. The next interview is from Motilisu, a "house-helper" who also resides within the United States. Motilisu is also from Lesotho, and, although she never outwardly says she received the surgery, she has a vast knowledge of the preparation and the actual procedures associated with genital surgeries.

I. INTRODUCTION

A. *Types of Circumcision: From Circumcision to Infibulation*

Female circumcision takes various forms, the least severe of which is ritual circumcision or the "pricking of the clitoral hood prepuce to release a drop of blood."⁷ The mildest and most medically non-threatening is Sunna, which means tradition and entails the excision of the clitoral prepuce⁸ or "hood of clitoris."⁹ Practiced predominately in Muslim countries, scholars deem Sunna true female circumcision,¹⁰ although some surgical procedures similarly named require greater excision of the genitalia.¹¹ Clitoridectomy or excision is a "more radical form"¹² of the surgeries and entails the complete removal of the clitoris.¹³ This includes the removal of the "clitoral glans and some of the nympha or labia minora, the narrow lip-like enclosures" of the

⁶ The last names of the interviewed parties have been omitted as to preserve the privacy of these parties.

⁷ BRIDGEMAN, *supra* note 4, at 151.

⁸ Hope Lewis, *Between Irua and "Female Genital Mutilation:": Feminist Human Rights Disclosures and the Cultural Divide*, 8 HARV. HUM. RTS. J. 1, 5 (1995).

⁹ BRIDGEMAN, *supra* note 4, at 151.

¹⁰ DORKENOO, *supra* note 1, at 7.

¹¹ BRIDGEMAN, *supra* note 4, at 151.

¹² Obiora, *supra* note 3, at 262.

¹³ BRIDGEMAN, *supra* note 4, at 151.

vagina.¹⁴ Some villages in Lesotho practice a form of clitoridectomy. Mantai explained that young girls are required to pull at the foreskin surrounding their clitoris until it is stretched out; once stretched out, the leader of the circumcision session cuts off the foreskin. Mantai also related a story about a conversation she had with a house-helper when she was young. The house-helper questioned Mantai about her mother failing to show her how to stretch out her clitoris for the procedure. Mantai stated that the women call it "work" and say "You're not supposed to sleep that much, you're supposed to work" at nights while in bed. Motilisu elaborated and stated that if a girl fails to stretch her clitoris or if it is too small to cut, the leader will pour something akin to hot baked beans on the area because she "didn't do . . . [her] job as a woman."

Infibulation is the most severe of the surgeries, requiring the removal of the *mon veneris*—the removal or scraping of the labia majora which is the "two rounded folds of tissue that control the external boundaries of the vulva,"¹⁵—and removal of the labia minora.¹⁶ Infibulation is the surgery that has the most significant risks and hazards during and after surgery.¹⁷ Immediately following infibulation, the wounds are sewn together by the operator, leaving a small opening the size of a fingertip¹⁸ for urination and menstruation.¹⁹ Deinfibulation is the "cutting apart" of the "healed wound" from a female circumcision in order to enable childbirth, while reinfibulation is the "re-closing" of the deinfibulation wound.²⁰

B. Circumcision: Symbolism, Instruments, Operators, and Consequences

Female circumcisions signify an adolescent girl's "rite of passage into womanhood before she is married."²¹ Cultures vary as to the age for when female circumcision is appropriate. A common age range for circumcision is four to ten years old.²² However, the age at which tribes circumcise vary from as early as infancy until as late as womanhood, just prior to marriage.²³ For example, the Kikuyu of Kenya educate and prepare

¹⁴ Obiora, *supra* note 3, at 262.

¹⁵ *See id.*

¹⁶ BRIDGEMAN, *supra* note 4, at 151.

¹⁷ Obiora, *supra* note 3, at 262.

¹⁸ Jaimee K. Wellerstein, *In the Name of Tradition: Eradicating the Harmful Practice of Female Genital Mutilation*, 22 LOY. L.A. INT'L & COMP. L. REV. 99, 105 (1999).

¹⁹ BRIDGEMAN, *supra* note 4, at 151.

²⁰ *See id.*

²¹ Erin L. Han, *Legal and Non-Legal Responses to Concerns for Women's Rights in Countries Practicing Female Circumcision*, 22 B.C. THIRD WORLD L.J. 201, 204 (2002).

²² Amanda Cardenas, *Female Circumcision: The Road to Change*, 26 SYRACUSE J. INT'L L. & COM. 291, 295 (1999).

²³ *Id.*

young girls for circumcision when they are eight and nine years old and circumcise the girls at the Irua ceremony between the ages of ten and fifteen.²⁴ In some rural areas of Lesotho, the process begins when girls are between the ages of twelve and thirteen.²⁵

Typical instruments used to conduct the surgery include "special knives," like the saw-tooth knife used in Mali; razor blades; pieces of glass; scissors;²⁶ and kitchen knives.²⁷ Operators also vary among cultures. For example, in Somalia, the Midgan clan, a group of artisans, serve as the "excisors."²⁸ In Egypt and the Sudan, the Daya, or midwife, performs the operation.²⁹ Although it is a task usually performed by women, male barbers occasionally perform circumcisions in Nigeria and Egypt. Finally, "a woman of the blacksmith's caste . . . with knowledge of the occult" performs circumcisions in the Gambia, Mali, and Senegal.³⁰ In urban areas, operators such as doctors, nurses, and midwives perform the surgeries in hospitals.³¹ However, the unclean procedures, condition of instruments, and lack of expertise in performing the surgeries result in a myriad of physical long and short term problems for females who undergo the circumcision.

Typical consequences are shock, infection, urine retention, inhibition of bodily waste functions, prolonged labor, scarring which leads to uncomfortable intercourse,³² hemorrhaging, the spread of diseases like Hepatitis B,³³ and HIV and AIDS transmission.³⁴ Moreover, the healing process after these surgeries also lends a hand to medical problems as exemplified in parts of West Africa where "dirt, ashes, or pulverized animal feces are thrown into the wound to stop the bleeding," a practice which leads to infection, shock, and hemorrhaging.³⁵ Psychological effects are also abundant with women before and after surgery. They experience depression and "feelings of terror, anxiety, humiliation, and betrayal."³⁶

²⁴ Robyn Cerny Smith, *Female Circumcision: Bringing Women's Perspectives into the International Debate*, 65 S. Cal. L. Rev. 2449, 2461 (1992).

²⁵ Interview with Mantai M.

²⁶ EFUA DORKENOO, CUTTING THE ROSE, FEMALE GENITAL MUTILATION: THE PRACTICE AND ITS PREVENTION 8 (1994).

²⁷ Wellerstein, *supra* note 18, at 106.

²⁸ DORKENOO, *supra* note 26, at 8.

²⁹ *See id.*

³⁰ *See id.*

³¹ *See id.* at 9.

³² Lewis, *supra* note 8, at 10.

³³ ELIZABETH HEGER BOYLE, FEMALE GENITAL CUTTING 34 (John Hopkins University Press 2002).

³⁴ *See id.*

³⁵ Wellerstein, *supra* note 18, at 106.

³⁶ *See id.* at 108.

II. THESIS

Islamic countries like Sudan, who practice female genital surgeries, find no basis for the practice in the Koran.³⁷ However, Muslims in countries that do practice these surgeries consider the circumcision a prerequisite to the practice of their religion.³⁸ A widely cited passage in the Koran used to justify this prerequisite reads, "Reduce but do not destroy. This is enjoyable to the woman and preferable to the man."³⁹ Quotes like the aforementioned, along with the numerous justifications for female circumcision in Africa, lead to varying critiques of this practice. One of the most prominent and disparaging critiques is the designation of the practice as female genital mutilation.⁴⁰ This stems from the pervasive theory espoused particularly by Western feminists that the African patriarchal society subjugates its women to female genital surgeries, thus, making them "devoid of agency."⁴¹ The definition of agency is the "capacity to direct one's own life through individual action and choice,"⁴² and therefore, a counter-argument exists that African women do in fact have agency because they elect to have the surgery.⁴³ However, given the shame and dishonor that surrounds a female and her family if she refuses to have the surgery, this professed agency is questionable, particularly when the motivation to elect to have the surgery is to avoid societal ostracism.⁴⁴ The motivating factor of acceptance and fear of rejection from tribal society demonstrate that the agency a young girl has in choosing to undergo practice is technical in theory but illusory in practice: technically, a young girl or woman can "choose" female circumcision, but in reality she acquiesces to the pressures of society, denoting that she honestly has no choice. For instance, a Kenyan teenager is more likely to "voluntarily request the procedure . . . rather than having to be outwardly coerced to follow tradition."⁴⁵

The examination of female circumcision will reveal that its justifications are subordinating practices working to control female sexuality and gender-normalize African societies in order to maintain the patriarchal structure. In the same vein, female genital surgeries also represent a mode of resistance maintained by African societies to counter westernization. This

³⁷ Cynthia Fernandez-Romano, *The Banning of Female Circumcision: Cultural Imperialism or a Triumph for Women's Rights?*, 13 TEMP. INT'L & COMP. L.J. 137, 143 (1999).

³⁸ *See id.*

³⁹ *See id.*

⁴⁰ BRIDGEMAN, *supra* note 4, at 151.

⁴¹ Obiora, *supra* note 3, at 263.

⁴² MARTHA CHAMALLAS, INTRODUCTION TO FEMINIST LEGAL THEORY 96 (Erwin Chemerinsky ed., Aspen Publishers 2003).

⁴³ Obiora, *supra* note 3, at 262-63.

⁴⁴ Cardenas, *supra* note 22, at 298.

⁴⁵ Han, *supra* note 21, at 208.

suggests the maintenance of the patriarchal structure is a means to maintain a form of original culture among indigenous people. Western feminists criticize the practice notwithstanding its cultural value. Western feminists, using an essentialist approach, argue the practice silences the African female voice and objectifies African women's bodies and, therefore, advocate for a Western-based set of rights. African-American feminists, torn by their connections to Western and African culture, assume both an essentialist and intersectional approach to female surgeries and take a human rights approach to the practice. African feminists, who do not deny the harms of the practice, favor a culture-based rights system and self-determination in eliminating the practice.

III. JUSTIFICATIONS OVERVIEW

There are religious, psychosexual, sociological, and hygienic justifications for female circumcision. However, among the myriad of reasons, there lies an undercurrent of African female subordination. African feminists, like Leslye Obiora, dislike the sole patriarchal approach that claims female circumcision is a way in which African male society "constrains agency and determines behavior" of African women.⁴⁶ The idea is that this theory fails to account for human motivation and the "dynamism and feedback between norms and performance that characterize symbolic ritual."⁴⁷ Obiora's point is well taken, especially when discussing the idea that female circumcision is a valued right of passage, of ritual, and of tradition and is used as a means of cultural preservation. However, female circumcision, the practice, and its rationale, perpetuate the subordination of female sexuality, gender-normalizing, the devaluation of women, and gender inequality in east, west, and central Africa.

A. Religious & Psycho-Sexual Rationales: Controlling Women's Sexuality

Female circumcision and its supporting religious and psychosexual rationales are a means of subordination in that it controls the sexuality of African females. Religious justifications are based on virginity and modesty, and work to control African women's sexuality. The Islamic and Christian faiths, as proponents of the preservation of virginity and purity, believe that by removing the clitoris they remove the organ, which generates "female sexuality and promiscuity."⁴⁸ Christianity and Islam in Africa label

⁴⁶ Obiora, *supra* note 3, at 264.

⁴⁷ *See id.* at 266.

⁴⁸ Cardenas, *supra* note 22, at 300.

uncircumcised women "impure," despite their sexual status, assuming promiscuity.⁴⁹ Mantai clarifies that circumcisions in Lesotho are not common among "born-again" Christians, although some Catholics and those recently introduced to Christianity, still practice female circumcision. The religious justification aims to control women's sexual desire through a clitoridectomy or other form of FC and FGM.⁵⁰ The assumption is that leaving female genitalia intact creates the risk that a woman will manifest her desire through intercourse, which society prohibits her to do until marriage. A double standard arises in African society because the same constraints on sexuality do not exist for men.

Psychosexual justifications based on chastity work to desexualize African women and label their sexual desire as negative. In cultures and tribes throughout east, west, and central Africa, female circumcision represents the means of preserving a woman's chastity by protecting her from her own "oversexed nature," "thus saving her from temptation, suspicion, and disgrace."⁵¹ This justification suggests that 1) the female sex drive must be neutralized; 2) women must be saved from their own sex drive via circumcision imposed on them physically by other women but enforced through greater male society; and 3) any manifestations of the sex drive will automatically mark the woman a promiscuous "disgrace." This ideology is exemplified by the fact that female sexual expression is an impropriety in Northern Sudan, Egypt, and the Horn of Africa: the "most dishonorable experience for a man is the sexual impropriety of a female family member."⁵² As Mantai explains, the justification is that young women who start having sexual feelings about men should "take [the clitoris] off so [they] don't have these desires, and homosexuality, if you have a lesbian relationship, how can you enjoy it if you don't have [the clitoris.]" The general thrust justifying female circumcision is to inhibit female sexual desire, the consequences of promiscuity or homosexuality, and the shame that follows.

Psychosexual justifications also diminish women's sexuality in favor of men's sexuality. Mantai asserts that the idea behind the circumcision is that "As a woman you are supposed to be submissive, and . . . not even [receive] pleasure when your husband wants some, [but] you give him some and then you have babies and that's it." Female circumcision is designed to meet the man's sexual needs while subordinating the woman's sexual needs. Motilisu emphasizes a similar concept; she explains that circumcision serves the purpose of teaching women "How to be good wives . . . so your husband doesn't mess around because you're giving him good treatment in bed,"

⁴⁹ DORKENOO, *supra* note 1, at 13.

⁵⁰ Cardenas, *supra* note 22, at 297.

⁵¹ *See id.*

⁵² Cardenas, *supra* note 22, at 299.

which exemplifies the idea of male sexual freedom and female sexual subordination. Female circumcision also guards a man against his "over-sexed" wife's "uncontrollable sexual demands . . . which, if not fulfilled . . . lead the woman to seek extra-marital affairs,"⁵³ suggesting women should not be "sexually-demanding" upon their husbands. It inversely implies that men who want sex from their wives are not "demanding" but merely asserting their sexual right. Furthermore, the notion that a woman's sexual demands are "uncontrollable" is representative of female subordination. Sexually assertive women, or perhaps women who want sex, are "uncontrollable" and are not under the sexual submission of their husband or the greater male society. Controllability connotes a woman waiting to please but not wanting to be pleased. Another example of psychosexual justifications takes place within polygamous communities in Africa where female circumcision works to relieve the man from the pressure of having to "satisfy all of his wives sexually."⁵⁴ This is demonstrative of a man's sexual freedom, and inversely the female's sexual subordination, because it allows him to have as many wives as he likes and not be held accountable for failing to sexually satisfy his wives. As Mantai explains, a man can "Run around with four other women [but] he knows that you won't have desire to run around with other men because sex is not fun for you [and you] don't know it any other way."

As previously stated, the psychosexual justification is used to control women's individual sexual pleasure and autonomy.⁵⁵ Consequently, female circumcision has the inverse effect of diminishing a woman's sexual activity. Female circumcisions, like a clitoridectomy or infibulation, can "hinder[s] coitus and diminish[es] sexual excitability,"⁵⁶ which makes a woman unable to have orgasms or "be satisfied sexually, [which] might actually lead her to seek other partners."⁵⁷ Hence, female circumcisions deny women their own sexuality, making their sexuality a "product of domination and not an authentic expression of women's sexual desire."⁵⁸ By removing the source from which women derive their sexual pleasure, African societies dominate women because they "do not control circumstances under which they have sex."⁵⁹

⁵³ See *id.* at 300.

⁵⁴ Han, *supra* note 21, at 204.

⁵⁵ Cardenas *supra* note 22, at 301.

⁵⁶ Fernandez-Romano, *supra* note 37, at 141.

⁵⁷ Han, *supra* note 21, at 204.

⁵⁸ CHAMALLAS, *supra* 42, at 46.

⁵⁹ See *id.* at 48.

B. Psychosexual Justifications: Gender-Normalizing in African Societies

The psychosexual basis for female genital surgeries such as clitoridectomies and infibulations demonstrate the need for African societies to gender-normalize. For example, psychosexual justifications aid in the distinction of biological sex in African societies. A strong thrust behind female genital surgeries is to create a clearer "distinction between male and female genitalia."⁶⁰ In Ethiopia, indigenous people encourage excision of female genitalia, fearing that failure to do so will result in a woman's clitoris "dangl[ing] between the legs like a man's."⁶¹ This is a binary structure of sex, which requires the "clear" demarcation of sex⁶² among its societal members and rejects "biological exceptions."⁶³ The Dogon and the Bamabara in Mali practice female circumcision based on the mythology that "both female and male sex exist within each person at birth."⁶⁴ The result is a fear within tribes concerning "hermaphroditic human nature and women's sexuality." The tribes therefore "curtail" this sexuality and nature through genital mutilation. There is also the belief that "intersexuality, in terms of presence of the clitoris, undermines the stability of the category 'woman',"⁶⁵ which proportionally alters the intransigence of the category "man."

Another example of gender-normalizing in African societies is the circumcision of both males and females. The circumcision is necessary to remove the "male aspect"⁶⁶ or "masculine element"⁶⁷ of a woman (the clitoris), and the "female aspect"⁶⁸ or "femininity"⁶⁹ of the man (the foreskin). Female genital surgeries eliminate the clitoris, the "phallic equivalent creating a hermaphroditic condition in women," in order to preserve the binary system of gender, and apportion social roles accordingly. An un-excised female represents not only the threat of promiscuity or female assertion of sexuality, but also a threat to the patriarchal system itself: a woman with her "masculine element" intact may assert herself in a fashion that places her on equal footing with men. In east, west, and central African societies, excision is a way of ensuring the dichotomies remain by preventing gender variation and subsequent variations in social status.

Justification for female genital surgeries comes from the belief that

⁶⁰ Fernandez-Romano, *supra* note 37, at 143.

⁶¹ DORKENOO, *supra* note 1, at 13.

⁶² *See id.*

⁶³ Cheryl Chase, *The Intersex Movement and Medical Double Standards*, in *GENITAL CUTTING AND TRANSNATIONAL SISTERHOOD* (Stanlie James & Clair Robertson eds., 2002).

⁶⁴ DORKENOO, *supra* note 1, at 13.

⁶⁵ *See id.* at 145.

⁶⁶ *See id.*

⁶⁷ Lewis, *supra* note 8, at 21.

⁶⁸ DORKENOO, *supra* note 1, at 13.

⁶⁹ Lewis, *supra* note 8, at 21.

the clitoris is an "aggressive organ threatening the male organ."⁷⁰ The idea that a clitoris can "threaten" a penis bespeaks of the ideology that the penis equals power, and women should be subjects of that power. The presence of a clitoris in African societies represents, for African men, an impasse between African men and women: it is a fight as to whether the woman is a receptacle of the penis or the man is a receptacle of the clitoris. To exert its power, African male society mandates circumcision with the risk of "shame" if the woman does not submit to the surgery.

African societies also suggest that the presence of the clitoris can endanger a woman's "baby during delivery,"⁷¹ striking a cord with African women concerned about the health of their newborns. This approach operates under two views: 1) African women, like other women, "are materially connected . . . through critical experiences, notably pregnancy,"⁷² which means female circumcision is as fundamental to the female experience as pregnancy and "heterosexual penetration . . . and breast-feeding";⁷³ and 2) the "core image or archetype of women" as mothers.⁷⁴ Thus, African women are willing to sacrifice self and sexuality for what society says is necessary for the health of their newborns.

C. Sociological Rationales: The Devaluation of Female Bodily Integrity & Status

Sociological reasons supporting female circumcision perpetuate the devaluation of female bodies and status within society. Sociological rationales that focus on the "rewards" of circumcision place a price on women's bodily integrity, well-being, and sexuality. One of the main rewards for African women who undergo this rite of passage is the value of being "worthy of marriage."⁷⁵ Marriageability of an African woman is the determining factor of her status in society. There is a presumption of virginity that African societies link to circumcision, which relates to the prerequisite of virginity for marriage.⁷⁶ A circumcised woman is, therefore, virtuous, virginal, and marriageable. An uncircumcised woman, on the other hand, receives a presumption of promiscuity since her virginity is "uncertain,"⁷⁷ which means she is unmarriageable, and ostracized from the community. The award system based on marriageability perpetuates

⁷⁰ DORKENOO, *supra* note 1, at 13.

⁷¹ *Id.*

⁷² CHAMALLAS, *supra* note 42, at 59.

⁷³ *See id.*

⁷⁴ *See id.* at 57.

⁷⁵ Cardenas, *supra* note 22, at 298.

⁷⁶ BRIDGEMAN, *supra* note 4, at 456.

⁷⁷ *See id.*

women's belief that "circumcision is imperative."⁷⁸ Furthermore, sociological justifications for female circumcision contribute to the valuation of young and teenage girls' bodily integrity based on material objects. Normally, a circumcised girl or young woman receives special clothes⁷⁹—such as bridal clothes,⁸⁰ food,⁸¹ henna, money, gold, and jewelry⁸² after undergoing the circumcision. The gifts are a motivating factor to undergo a female genital surgery. The gifts also implicate that society can buy a female's sexuality and integrity: the girl risks her health in exchange for traditional gifts that come after the ritual.

Sociological justifications for female circumcision in Africa work to perpetuate the idea that until circumcision, women are social outsiders to the male patriarchy. African women are knowledgeable of the many health risks associated with female circumcision but still choose to undergo the surgeries so their communities will accept them.⁸³ This suggests that until a female undergoes this procedure, she is not considered an entity within the community. Furthermore, circumcision connotes normality in African societies:⁸⁴ the failure of a girl or woman to undergo circumcision leads to African societies labeling her a pariah or outside the norm of societal dictates. Moreover, a young uncircumcised girl experiences ostracism from her own peer group. Motilisu explained that in Lesotho, a "Term for an uncircumcised girl is 'lethisa' meaning that . . . they are no good, they are not whole women. So even when they [circumcised girls] are talking, one of them will say, don't say that [because] lethisa [is] in here, so they make you feel inferior."

The pariah label is debilitating to African women because ostracism can result in the separation from the close, communal lifestyle they enjoy in their respective societies. Fear of severing this societal tie, coupled with women's emphasis on relationships,⁸⁵ demonstrate that sociological justifications compel women into circumcision by threatening to further diminish their societal value by isolating them from society. African women already inhabit a lower status in society. This is evident by the fact that women are considered a receptacle for the male penis, and removal of her clitoris is necessary in order to preserve superior male power. In context with the pariah label, failure to undergo circumcision would decrease this already lower social status of African women.

⁷⁸ Cardenas, *supra* note 22, at 299.

⁷⁹ DORKENOO, *supra* note 1, at 14.

⁸⁰ Fernandez-Romano, *supra* note 37, at 142.

⁸¹ DORKENOO, *supra* note 1, at 14.

⁸² Fernandez-Romano, *supra* note 37, at 142.

⁸³ *See id.* at 298.

⁸⁴ Cardenas, *supra* note 22, at 298.

⁸⁵ *Id.* at 299.

Undergoing female circumcision also "satisfies a need 'to belong' for many women and girls, and assures them that they are equal to their peers regardless of background or social status."⁸⁶ Young girls wish to procure special status within their own peer group. Motilisu analogized the group of circumcised girls to a sorority. Motilisu detailed the process. She stated the girls start out in the home of the woman who agrees to host the circumcision session. While the girls are at the leader's house, they rub a lotion similar in its thickness to calamine lotion on their legs, "get [] into water," and draw designs on their legs, which serve as their decoration. They build a temporary hut far enough from the village so that people will not hear the "noises" that emanate from the hut during the genital surgeries. Once the circumcision is over, they return to the leader's home where they heal, they wear loose fitting skirts, and "no one puts on shoes, including the leader." After the circumcision occurs, the girls do not speak about the process.⁸⁷ However, the rewards of being a part of this intimate group bespeaks of the greater problem that sociological justifications devalue women. The risk of bodily integrity in order to "belong" to this group evidences women's continued outsider status in their own societies. Their outsider status, first, creates the need for acceptance and, second, rewards acceptance after a female undergoes circumcision.

Finally, sociological reasons for circumcision work to devalue African women's status based on societal norms. Female genital surgeries as a rite of passage automatically "bestow the status of womanhood upon girls,"⁸⁸ as opposed to biological dictates like age or menstruation. Mantai says that circumcision is "Very important to them because to them it's rites of passage, womanhood, I am now ready to be a woman and have a household." She continues and says that the circumcisions are a training ground for the young girls: they will experience pain when they lose their virginity and when they give birth. Mantai rhetorically asks, "Why would you subject yourself [to] no anesthesia . . . as a woman you are supposed to tolerate pain." Motilisu stated that when the young girls return after the circumcision occurs, "marriage is on the top of their list . . . they have been transformed from no longer being girlfriend but being my girlfriend who wants to get married."

While completion of this rite of passage bestows the status of womanhood and praise on to young girls and women, failure to follow through with this particular rite of passage has extreme social consequences for the African female. Besides ostracism, an uncircumcised fully-grown

⁸⁶ CHAMALLAS, *supra* note 42, at 55.

⁸⁷ Interview with Mantai; Interview with Motilisu.

⁸⁸ Fernandez-Romano, *supra* note 37, at 144.

woman may also "be condemned to remain a little girl for the rest of her life,"⁸⁹ in society's eyes. On the other hand, the circumcised female is "considered a full woman and ready to bear the responsibilities of marriage and motherhood."⁹⁰ This demonstrates that a procedure, which creates physical and psychological harm for women, dictates womanhood according to societal norms.

D. Hygienic Rationales: Gender Inferiority & Self-Hatred

Hygienic justifications for female genital surgeries indoctrinate into women self-hatred of their physical selves and lead to the internalization of gender inferiority. African societies in Egypt, Sudan, Somalia, and Ethiopia consider female genitalia dirty and advocate excision in order to "attain a smooth and therefore clean body."⁹¹ Likewise, Egypt labels uncircumcised females "Nigsa,"⁹² or dirty. The Katiola in Mali believe that the clitoris and other female genitalia are ugly and disfiguring "in [its] natural state."⁹³ The notion of female genital being dirty or an unsightly mutation is linked to the idea that female genitalia, as the embodiment of the female, is unnatural and abnormal and requires altering by *man*-made instruments in order to be beautiful and normal. In other words, the woman, in her natural state, requires alteration in order to be acceptable in the eyes of society.

Additionally, the idea of the clitoris as a mutation implies that the clitoris mutated from another entity: the penis. As evidenced by psychosexual theories that the clitoris looks like the penis, the idea that the clitoris is ugly or disfiguring bespeaks to the idea that the clitoris is also the phallic equivalent of the penis. Therefore, the dirty and ugly label attached to the clitoris represents a multi-faceted hygienic attack on the clitoris with psychological consequences. African male society uses the labeling to disempower the clitoris, a legitimate threat to physical male power, effecting women's hatred of themselves: if women believe their vagina is dirty and disfiguring, they will amputate themselves in order to achieve cleanliness and beauty. This amputation, while justified for hygiene's sake, is used to enforce a male-centered status quo. Women hate the dirty part of themselves, which non-coincidentally happens to be the most "male" part of them. While the female clitoris is subject to such denigrating labeling for its obvious phallic or "ugly" nature, vast research failed to reveal an equivalent disgust of male genitalia. This suggests that female circumcision ensures

⁸⁹ *See id.*

⁹⁰ *See id.*

⁹¹ DORKENOO, *supra* note 1, at 14.

⁹² *See id.*

⁹³ *See id.*

physical and symbolic male power, while simultaneously rejecting biological femaleness and causing females to reject themselves. The result is the implanting in African women a desire to go through with excision, not because of their own election, but to "make them cleaner."⁹⁴

Clearly, religious, psychosexual, sociological, and hygienic justifications for female circumcision relate to status in the society: failure to undergo circumcision means a woman receives a degenerated status within the society, while circumcision labels a woman marriageable and raises her status. In sum, this granting or denying of status shows the behind-the-scenes male authority in excision.⁹⁵

E. Cultural Justifications: The West, Cultural Preservation, & Harmful Perceptions

Although the subjugation of women is a driving factor behind female circumcision in Africa, denying the cultural implications behind the continuation of the practice is to give only half the story. Cultural rationales for maintaining female circumcision demonstrate that bold assertions about controlling women's sexuality define African women solely "in terms of sexuality for reasons which are not" in their own interest⁹⁶ and ignore the nuances of various African cultures. Western activists substitute their values for African values notwithstanding the African women and people. Furthermore, the dismissal of female circumcision as solely sexist and savage fails to account for racism, imperialism, and neocolonialism, essentially discounting male supremacy in its greater context throughout the world.⁹⁷ It allows Western feminists to demonize African cultures without considering the major role that Western civilization plays in perpetuating the practice. Moreover, it permits Western countries to maintain their selective perception and biased causal attribution: the sex-subordinating practice of female circumcision is attributable to the entire "savage" African culture, while the same⁹⁸ or similar incidents in the west are attributable to individual deviance,⁹⁹ solidifying the idea that the "West is the best"¹⁰⁰ and that African society is uncivilized.

⁹⁴ See *id.*

⁹⁵ See *id.*

⁹⁶ Micere Githae Mugo, *Elitist Anti-Circumcision Discourse as Mutilating and Anti-Feminist*, 47 CASE W. RES. L. REV 461, 469 (1997).

⁹⁷ *Id.* at 469, 470.

⁹⁸ "As recently as the 1940s [genital surgeries] were performed by U.S. and British doctors to treat female 'problems' such as masturbation and lesbianism." Chase, *supra* note 63, at 143. Genital surgeries also persisted in the United States through the 1950s. Obiora, *supra* note 3, at 263.

⁹⁹ CHAMALLAS, *supra* note 42, at 86.

¹⁰⁰ See *id.*

Cultural justifications for female circumcision establish that the major force behind continuation of the practices is to preserve the culture, as well as to present resistance to further westernization. African people see "Western efforts to eliminate the practice" as the "colonial destruction of traditional customs [that] weakens their societies and exposes them to the ill-effects of Western influence."¹⁰¹ African men and women continue the rites of passage of female circumcision as a means of avoiding further colonization by the West. Moreover, there is the explicit reference that "Western influence" destroys the heritage of the African societies with which it comes in contact. African tribal groups' motivation behind female circumcision is to "preserve remaining tradition rituals in order to maintain distinct village and tribal identities."¹⁰² For example, the Gikuyu of Kenya perform female genital surgeries as an "act of defiance against the attempted Anglicization of their culture."¹⁰³ The cultural resistance is in response to the nation-state organization in east, west, and central Africa established by European governments during colonization and still maintained by them today.¹⁰⁴

Finally, cultural rationales for female circumcision are a necessary counter to harmful Western perceptions of female circumcision and African life. Leslye Obiora says that a misconceived notion is that African women are "only victims" that are "devoid of agency," and passively submit to male patriarchy and tradition.¹⁰⁵ However, cultural justifications for cultural preservation show the need for an intersectional approach. Intersectionality shows the "distinctive harm sometimes experienced by women of color and acknowledges the interlocking nature of the two systems of oppression"¹⁰⁶ and the misconceived notions about African woman and society. The need for cultural preservation in African societies brings to light the reorganization of African society based on Western racism and politics, which consequently resulted in the demise of African tradition and heritage.

Female circumcision as a cultural mode of resistance also works to combat the distorted perception of the essentialist feminist. The essentialist feminist believes that there is a commonality among women that surpasses differences in race, class, sexual orientation, or individual situation.¹⁰⁷ However, cultural justifications emphasize that the experience of the circumcised woman as a woman of a particular tribe, from a particular country, and of a particular race are important; and essentialism disregards

¹⁰¹ DORKENOO, *supra* note 1, at 15.

¹⁰² Smith, *supra* note 24, at 2453.

¹⁰³ Fernandez-Romano, *supra* note 37, at 144.

¹⁰⁴ *See id.* at 2452.

¹⁰⁵ Obiora, *supra* note 3, at 265.

¹⁰⁶ CHAMALLAS, *supra* note 42, at 82.

¹⁰⁷ *See id.* at 78.

all these factors in favor of a more Eurocentric focus. This Eurocentric commonality is arrogant in its perception. White feminists consciously or unconsciously adopt their view as "center of the universe, thus distancing [themselves] from the 'other'."¹⁰⁸ For circumcised African women, who are the "other," the arrogant perception manifests itself in a relationship between white woman and circumcised African woman as one of the "perceiver and the object being perceived."¹⁰⁹ Western feminists effectively objectify African circumcised women in their plight for justice and use "African women's bodies as objects of Western display without regard for the privacy or human dignity of the women involved."¹¹⁰ This happens vis-à-vis Western newspapers, news stories, books, and other media, which pictorially display African women, usually during their circumcision.

As mentioned above, Western feminists attribute their views of domination and sexual subordination to African women, which effectively silences the voices of African women. Anti-colonialist reasons for maintaining female circumcision show that the women choose to assert their African womanhood through the genital surgeries: they assert their womanhood by allowing the surgery on their genitalia and simultaneously assert their African personhood by having genital surgery in the face of Western outrage. African woman arguably have agency because they elect to have the female genital surgeries, notwithstanding societal pressures, in order to avoid separating the "racial and gender aspects of their identity."¹¹¹

Cultural rationales for continuation of female genital surgeries bring to light the "external messiah syndrome"¹¹² that exists within discussion of the topic. The external messiah syndrome manifests itself when Western feminists who "reject elitism and vanguardism . . . end up practicing the very silencing and stigmatization of women that feminism challenges."¹¹³ Cultural justifications for tribal solidarity show that not only does Western interference cause a skewed global picture of African culture, but it also silences the voices of the very African women it claims it wants to protect. This idea demonstrates that the disregard of African heritage by Western activists allows them to demonize the operator, excisors, and greater (male) society who "inflict" these "mutilations" upon women, while victimizing and blaming the circumcised women for their situation.

¹⁰⁸ Stanlie M. James, *Reflections Around Female Genital Cutting*, in GENITAL CUTTING AND TRANSNATIONAL SISTERHOOD (Stanlie James & Clair Robertson eds., 2002).

¹⁰⁹ Fernandez-Romano, *supra* note 37, at 147.

¹¹⁰ Lewis, *supra* note 8, at 29.

¹¹¹ CHAMALLAS, *supra* note 42, at 81.

¹¹² Mugo, *supra* note 96, at 462.

¹¹³ *See id.*

IV. CONCLUSION AND SOLUTIONS

The varying approaches of Western, African-American, and African Feminists prove characteristic of their own cultural experiences and situations. For example, many Western feminists advocate a universal human rights system or universalism, which transcends "cultural and national boundaries."¹¹⁴ However, this form of cultural relativism is insufficient because it presents "false neutrality" for "no one can transcend culture and bias must be acknowledged and compensated for."¹¹⁵ Moreover, this universalism or relativism carries with it the propensity to establish human rights that "transcend boundaries," as long as the basis is a *Western* view of human rights. African-American women, on the other hand, experience a separate sexist, racist, and classist culture of their own as a result of the African Diaspora.¹¹⁶ Because African American women have ties to both cultures, there is a commiseration with African Feminists who continue the practice in the name of tradition and who are "suspicious" of Western "outsiders" attempting to eradicate the practice.¹¹⁷ Thus, African American feminists support both indigenous African approaches and an individual human rights approach.

African feminists advocate the rejection of Western approaches, and instead pursue their own self-determination for the eradication of female circumcision. This self-determination takes the form of personal resistance through African women disallowing the circumcision of their daughters as well as public resistance.¹¹⁸ By creating resistance to female genital surgeries in a manner consistent with the views of many African females, African feminist theory avoids what is viewed as the re-colonization of Western society through its anti-female genital mutilation campaign.¹¹⁹ Furthermore, African feminists advocate the education of African women concerning female genital surgeries, and they reluctantly support the clinicalization of the surgeries in order to prevent major medical complications of circumcised females.¹²⁰ Although self-determination remains on the forefront of African feminists' eradication of female circumcision in their countries, they are also accepting of cross-cultural coalitions, which will help in the education of and resistance to the practice. However, African feminists' acceptance of the coalitions is conditioned upon

¹¹⁴ Lewis, *supra* note 8, at 19.

¹¹⁵ Claire C. Robertson, *Rethinking Approaches to African Genital Cutting*, in *GENITAL CUTTING AND TRANSNATIONAL SISTERHOOD* (Stanlie James & Clair Robertson eds., 2002).

¹¹⁶ Lewis, *supra* note 8, at 38.

¹¹⁷ *See id.* at 38.

¹¹⁸ *See id.* at 26.

¹¹⁹ Lewis, *supra* note 8, at 20.

¹²⁰ Obiora, *supra* note 3, at 269-70.

the requirement that the coalitions be true cross-cultural and multi-directional working relationships for the human rights of women as opposed to a "one-way transfer of information from West" to African societies.¹²¹

Clearly, Western and African-American feminists must respect the African feminism approach for eradicating female circumcision in order for change to occur. Only African feminists can understand the cultural and tribal implications of the practice and therefore, tailor solutions for change according to an African woman's view. Moreover, education of the physiological and psychological health hazards is effective, for even though many African women experience these complications, they may not understand the depth of their problems or the problems of the circumcised African woman community. An integrationist approach to eradication campaigns may prove most effective.¹²² By integrating the value system of African women with Western and African American feminists' and activists' approach for human rights, an Afrocentric individual rights system can arise, whether it ultimately is a right to health, bodily integrity, and/or sexuality.

¹²¹ Lewis, *supra* note 8, at 20.

¹²² *See id.* at 45.