

# Female cicumcision



Female circumcision is a repugnant issue to Americans and Europeans, but in Sudan the practice is normal and accepted for the majority of women. The practice of female circumcision (FC) crosses religious boundaries; Jewish, Christian, and Muslim women undergo the procedure in the Sudan. It is more of a cultural practice than religious. The cultural aspect for and against FC must be taken into consideration when consulting with Nawal. Then within this framework, medical issues should be raised with her to help Nawal make a decision for her daughter.

There are three main types of FC practiced in the Sudanese region; “Clitoridectomy, Intermediate and Pharaonic Circumcision.” (Magied, Sulima, and Kawther, 2002). The most common kind is a Clitoridectomy, which means the hood of the clitoris is removed (Magied, Sulima, and Kawther, 2002). Intermediate is when the clitoris and part of the labia minor is removed (Magied, Sulima, and Kawther, 2002). A Pharaonic Circumcision occurs when the whole outer female genitals are removed then sewed up save a small hole for urination and menstruation (Magied, Sulima, and Kawther, 2002). The type of FC Nawal underwent would depend on the region she was from.

There are three main reasons for FC being practiced in the Sudan. The first is the popular belief that if a woman cannot feel sexual pleasure, then she will remain a virgin until marriage (Davidson, 2007). The second reason is the Sudanese belief that the female genital areas are unclean. It is believed that FC makes a female genital area cleaner and smoother. Lastly, many men want their future brides to undergo the most radical form of FC, the Pharaonic Circumcision, for their personal sexual pleasure (Davidson, 2007). This type of FC leaves only a small hole, which tightens the vagina, which

enhances a man's sexual pleasure. This type of circumcision is preferred by 76% of women. Right or wrong, these are the cultural beliefs in the Sudan, since 99% of women are circumcised (Davidson, 2007).

The major cultural argument against circumcision is the medical complications (Davidson, 2007). Immediate medical complications were pain and burning during urination (Davidson, 2007). This was due to the urine passing over the wound. This could also lead to infection, fever, and hemorrhaging (Davidson, 2007). Long term effects were sexual dysfunction, lack of sexual pleasure, infertility, and scarring. The infertility is caused by difficulty in urination and menstruation, which causes "urinary tract and chronic pelvic infections" (Davidson, 2007). Scarring occurs during the circumcision and re-circumcision after births. During births, doctors and midwives must make incisions for the babies to pass through, and then re-stitch the genital area. Since these issues are coming out more today, the cultural views are changing slowly.

If I would be a medical professional advising Nawal, I would ask her thoughts and feelings. If she is resistant, I would encourage her to follow her feelings. However, if she wanted to give in to family and friends, I would suggest the less intrusive Clitoridectomy. I would also suggest, since the practice is illegal in the US, to return to the Sudan. Once in the Sudan, I would suggest she get the procedure done by a doctor and not a midwife. I would advise against getting the procedure done illegally in the US, since this could mean no anesthesia and further medical complications. Finally, I would inform her of all medical complications that could occur. Nawal probably has experienced some or all of the medical complications, so this would just be brief. In the end, the decision for her daughter's FC would be hers.

FC is a cultural process most Westerners do not understand. Once Western doctors start learning the reasons for the process, the better they can inform their patients. In America women control their bodies. It is hypocritical to inform a Sudanese woman she cannot have a FC, if that is what she wants.

#### References

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