

Female genital mutilation research paper examples

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The term “rite of passage” is often referred to stages in one’s life which brings him closer to maturity and development. In the case of children, the point wherein they would have to experience this feeling is when they are in puberty stages. Young boys would often be considered full-fledged men if they managed to brave circumcision as it would enable them to grow taller and leaner. Young girls tend to experience puberty and know they are now on the road to maturity when they experience their first period. However, it is not known to many that in some nations, circumcision to girls is their “rite of passage” to womanhood. While many regard this “female circumcision” as a rite that must be respected in many nations in Africa, the Western ideology know this rite as “female genital mutilation”, which actually causes deaths to many females who had undergone the procedure.

Female genital mutilation or female circumcision/female genital cutting, pertains to the partial or total removal of the person’s female genitalia and the injuries in the genital organs. In tribes and in several regions in Africa, the village midwife or health worker performs the female genital cutting. Usually, the procedure is prearranged for the child by their mothers and is considerably dangerous as the workers performing the act are not legitimate health practitioners. In aiding this, the child undergoes the procedure while she is between 4 to 10 years old as she would not be able to voice out her concerns over the issue. Razor blades or glass are used to cut the tissue of the genital organ and is done without providing anesthetic or disinfectants to prevent the pain of circumcision. Female genital mutilation/genital cutting is actually divided different categories, which would determine the type of operation used on the patient. The common procedure for genital cutting or

mutilation is done through the removal of the clitoral hood. However, in some instances, the midwife or health worker would remove the clitoris itself, which is known as the act of “clitoridectomy”. Tribes who perform female genital mutilation tend to see the clitoris to be a hazard for men or for the baby as it may influence how the woman would react to sexual intercourse or into pregnancy. The most extreme method of female genital mutilation is known as genital infibulation wherein the clitoris and the labia are cut off completely. Once these two parts are removed, the vulva would be then scrapped until it is raw, stitched up through thorns once the procedure is done. The girl is usually held in place by ropes or by fabric once the procedure is done, ensuring that the legs of the girl are closed in the ankles and thighs for a week. The tissue would then grow back together, enabling the retention of a small opening to allow urine and menstrual flow to pass.

Most of these tribes and communities believe that genital cutting is to ensure that the women would be proven untainted or a virgin before they are to wed their behalf. It is the common notion that young girls who have not undergone the procedure are unmarriageable. If they are not circumcised, the girl’s family and future would be at stake as the tradition clearly emphasizes the importance of the act on their life. Almost 60% of Egyptian women, even at present, believe that husbands prefer if their wives are circumcised to prove their virginity and sanctity. If there are women who fail to follow the tradition on circumcision would be subjected to social stigma which can ultimately affect even the family of the uncircumcised parent. In Sudan, men from uncircumcised mothers are called “son of an

uncircumcised mother”, considerably the most vile invective to be called by the public. The act is also performed to ensure that people could distinguish “ respectable women” as it would become a sign of the girl’s virginity. It is also seen as a procedure that would make the female’s genitals look “ clean” and “ beautiful”, removing parts that seemed “ masculine.” In the countries that practice female genital mutilation, they also see the day of circumcision as the most important day of their lives, often being celebrated with rituals to bless the woman. Since the circumcision makes the genital opening of the woman smaller, marriage often happens after menstruation. While many have reported that sexual intercourse is often difficult, especially for women who had undergone infibulation, women would often force or want their children to follow the same method. It is also practiced by many people in the affected nations as they see female genital mutilation as a sign of respecting culture and tradition of their nation or tribe . Aside from Egypt and Sudan, Somalia, Mali, Senegal, Central African Republic, Nigeria, Yemen, Saudi Arabia and the Kurdish communities have recorded instances of female genital mutilation, bringing the estimated total of victims of over 100 to 140 million women and girls subjected to genital mutilation, 8000 girls per day. There are also nations, according to the World Health Organization, who have reported cases of genital cutting such as in the Asian region and the Central and Southern Americas. The WHO had already stated that almost 2 million girls are at risk daily due to the tradition itself despite the prevalence decrease .

While the tradition is crucial for these communities practicing female genital mutilation, the dangers of such procedure can be very fatal to the women

undergoing these procedures. It is reported that most practitioners who enact the circumcision are far untrained to understand the dangers of such procedure, opening the patient to risks not easily cured by traditional medicine. Experts stated that the most serious complications would be inflicted to the patient, especially if they had undergone genital infibulation. Gynecological and obstetric complications such as internal bleeding and pain, which may cause prolonged hemorrhage and lead to anemia and infection. Prolonged bleeding would also cause infections such as delayed healing, development of tetanus and gangrene. It is also capable of promoting further complications such as urinary obstruction, blockage of menstrual flow, and reproductive tract infections. There are also reports that genital mutilation also causes infertility, especially for those who had their labia removed. Studies have also proven that women who had undergone mutilation have showed signs of extensive vaginal scarring, making it difficult for them to bear a child. Almost 50% women who had undergone genital cutting are recorded to have died after child delivery due to complications. Even their children have also met with complications due to their mothers succumbing to complications from genital cutting. In some cases, there are also psychological impacts with patients who had been under female genital mutilation such as post-traumatic stress disorder and panic attacks. Some may even become stressed given the violation on their very person .

With the studies and evidences that show that female genital mutilation influences a woman's health and their capacity to feel loved, the West, especially the United States, had pushed for the suspension of their own

nonintervention policies on cultural practices to stop the growth of females being subjected to female genital mutilation. Many nations had instantly turned their heads to the issue due to the legality and ethical implications of the act to the women forced to undergo such act. Canada was the first nation that recognized the dangers of female genital mutilation, making it a credible reason for granting refugee or asylum status for victims. In the US, they had ordered in 1996 to grant a West African teenager asylum who did not want to partake on the tradition. However, asylum is not often granted given the nature of the problem. Regardless, the US is also aiding the international action against female genital mutilation by criminalizing the practice in the US.

Aside from the two aforementioned countries, there are also organizations aiding in the fight against female genital mutilation. The WHO is working with the United Nations Population Fund and the United Nations Children's Fund to call for the end of the practice as it violates the women's human rights. After the UN and the WHO, 16 other organizations and charities around the globe are aiding the fight against female genital mutilation, concentrating their efforts to end the problem in the region directly or from their home territories: 28 Too Many (Africa), African Women's Organization (Austria), Ban FGM – campaign for UN Resolution (United Nations), Campaign Against Female Genital Mutilation (Nigeria, Egypt, the UK and the US), Daughters of Eve (UK), END FGM (European Union), FGM- HILFE (Austria), FGM National Clinical Group (UK), FORWARD (African Diaspora), GAMS (France), Integrate Bristol (UK), RISK (Sweden), Stop FGM Now (Germany), Desert Flower Foundation (Worldwide), the Orchid Project (UK) and the With

(he)art against FGM. These groups often serve as advisers to policymakers with regards to international action against female genital mutilation, assisting in aid projects and recovery for victims and also gain funds for programs to aid communities stop female genital mutilation .

In a medical aspect, while there are some complications reported, doctors discovered that some women would still experience orgasm if they would undergo treatment and surgeries to reconstruct their genital organs and features. Sometimes, women who had been forced or requested to undergo female circumcision, they would undergo specialized reconstructive surgery to gain their ability to feel pleasure and ability to achieve orgasm. It is also discovered that some parts of the clitoris is buried beneath the scar of the cutting, enabling stimulation to happen. Doctors have also stated that orgasm and sexual stimulation is still possible for women who had undergone genital cutting due to the fact that most of the clitoris is still present in the body, which is why it could be reconstructed through bringing the internal parts of the clitoris on the exterior part of the vulva, suturing them in the area where the clitoris is usually located. This would allow surgery to reconstruct the narrowed vaginal opening due to genital infibulation, correcting it to enable sexual pleasure and the reduction of the risks involving genital mutilation. The surgery would allow the doctors to open the vulva into its normal size, enabling painless intercourse. As a means to aid the women of Africa placed under the risk of genital infibulation, surgeries are provided in African communities to provide free clitoral reconstruction and defibulation .

Today, female circumcision or female genital mutilation is still a trend that

serves as a tradition for many African tribes and in some communities around the globe for women to prove their virginity and as a “rite of passage” for girls to be considered adult women. However, while the very concept of such act to be a means to “distinguish respectable and untouched” women prior to their marriages and virtue is commendable in the current age, it undeniably removes the rights of the girl to argue against a dangerous and risky procedure that could scar her for life and even live a life without worrying about complications the procedure might incur on her body. While the tribes would consider it a tradition that must be upheld, it is crucial to educate these tribes that there are painless and alternative practices to ensure the virginity of their women without influencing tradition. Everyone must take quick action over the issue of female genital mutilation for in each minute of delay in the action to end or ban the act, a girl is placed at risk and sees a very dark future.

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