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A PERSONAL PERSPECTIVE ON THE ELIMINATION OF FEMALE CIRCUMCISION

Preston N. Williams[†]

As a male and an outsider, I feel a bit uncomfortable writing about female circumcision. However, a reading of Alice Walker's *Possessing the Secret of Joy*¹ shortly after its publication persuaded me that the custom of female circumcision could no longer be considered the possession of any one people or continent. Travel, migration, immigration, and a host of other interactions among peoples, cultures, and traditions have made female circumcision a matter of international concern. As a result, the bearers of these customs and traditions, as well as those affected by them, have become responsible to a world beyond their place of origin. Consequently, I and others have the right and the responsibility to examine this custom in both its larger and narrower contexts so as to evaluate its propriety for human moral behavior.

In this comment I speak primarily to my concern about the possible spread of this practice into new cultures and societies, and secondarily about its continuance in areas where it has been deeply rooted for centuries. I am concerned with the manner in which Americans and others react or will react to the intrusion of female circumcision. I am hopeful that my suggestions for a proper response transcend the narrow limits erected by particular cultures and orient us to a standard that will be most supportive of the dignity and worth of individuals.

I hope that my approach to this issue has relevance for all cultures, especially those of Africa, but I am not primarily con-

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1. ALICE WALKER, *POSSESSING THE SECRET OF JOY* (1992) (presenting a fictional account of a young girl and her experience with female genital mutilation).

cerned with either sanctioning or transforming those areas where female circumcision is widely practiced. Put a bit differently, I hope to provide moral guidance and policy directions for Americans, but my reflections are worthy of consideration by other peoples, as well. I do not desire to coerce others, however, into any particular practice or attitude toward circumcision. Alice Walker has taught me to take the practice of female circumcision seriously, but I have yet to engage the ritual with anything approaching the comprehensiveness, the sensitivity to African traditions, and the knowledge of sexuality that characterize the writing of Professor Obiora.² Her article is exemplary in its efforts at fairness and its willingness to accept new practices and norms while honoring the best of the old. I find nothing in its spirit that I desire to reject, although I do feel that at times she, like those whom she critiques, seeks too diligently to find a balance of good and evil in the West and the non-West. At this juncture in world history, the West is fated to have the greater power to injure and to do good. It is this dominant position, not elements of cultural and social belief and practices, that shall greatly influence the relationship of individuals and nation-states.

Mary Daly deserves the criticism that has been aimed at her arrogant, racist, and flawed position,³ but one must remember that she is not the whole of the West or of feminism. Her voice is part of the cacophony emitted from the West. It needs to be heard and held to accountability but it should never be mistaken for the feminist movement. It is but one school of interpretation. There are, in addition, scholars like Professor Obiora who are seeking truth by attempting to reconcile and to establish a human community where males and females of diverse cultures come to respect and honor each other. This is scholarship at its best because it seeks not only to enhance knowledge but also to form responsible citizens. Professor Obiora's ability to inform us so thoroughly about almost every aspect of the practice of circumcision while teaching us how to be civil about our differences makes this article worthy of repeated readings by those who pursue justice and equality for and among

2. See L. Amede Obiora, *Bridges and Barricades: Rethinking Policies and Intransigence in the Campaign Against Female Circumcision*, 47 CASE W. RES. L. REV. 275 (1997).

3. Mary Daly has argued that female circumcision is a manifestation of the patriarchal control characteristic of African society. See *id.* at 323-28.

women. It is this type of article that can introduce the issue of circumcision and provide the material and understanding needed to ensure a fair consideration of its rightness or wrongness.

Professor Obiora's great contribution is the provision of a model of scholarly discussion and debate about matters of cultural and moral difference. According to this model, presumably one can draw the conclusion, contrary to Professor Obiora's, that cultures and societies are unable to justify circumcision as a meaningful ritual for the promotion of womanhood, manhood, or sexuality. This is the conclusion that I draw. It is a mistake to try to establish either male or female circumcision as something of great significance. Even when the meanings are perceived to be beneficial, the evidence points to an arbitrary rather than a causal relationship between ritual and meaning.

As I think is the case for most men, my own involuntary circumcision carries no meaning of consequence and has no relevance to my understanding of proper manhood. I am aware of a multitude of meanings that have been attached to circumcision in the past and present and to meanings that are being invented daily.⁴ These individual and social constructions do not merit the creation of an explanation that suggests that the practices are in any respect necessary. Moreover, I find it odd that others, whether male or female, African or Western, are still acting as if these practices have anything to do with the essential nature of our femaleness or maleness. Our sexuality is certainly more than these rituals and their interpretations, and our human nature is in no manner determined by them.

It is useful to examine this purported link of ritual to meaning in light of Professor Obiora's example of cosmetic surgery.⁵ Like circumcision, most cosmetic surgery falls into the category of group-supported ritual: while cosmetic surgery is more of an individually chosen act than is circumcision, its meaningfulness similarly is not the result of an actual causal relationship between ritual and meaning, but the result of a personal or group mind-set. Moreover, Professor Obiora's comparison of female circumcision to cosmetic surgery should not be taken seriously since to relate these

4. See, e.g., Obiora, *supra* note 2, at 289-90 (discussing the debate over the nomenclature of female circumcision).

5. See *id.* at 318-22 (using cosmetic surgery to illustrate that Westerners often engage in unnecessary medical practices).

practices to cosmetic surgery would trivialize her concerns to those individuals, movements, and policy makers in the West who have undertaken to determine universal sexual practices and norms.

It also seems to me that whatever the similarity between male and female circumcision, the two procedures cannot be easily compared. Due to the placement and function of the sex organs the two procedures are incommensurable, and what is permitted in relation to the cutting of one genitalia should not serve as a norm for the other. Female circumcision is unique and should be evaluated in the light of its own peculiarity. Unlike male circumcision, it affects both the pleasure of sexual intercourse and the act of childbirth. Thus, I am prepared to assume an attitude of indifference to male circumcision because it is no longer considered by most to be a symbol of any great importance and possesses no compelling issue in respect to human rights.

What we should investigate is whether or not the ritual of female circumcision, as now practiced among many people and increasingly introduced in the West, is a ritual that is free from coercion, is not physically harmful, and in fact accurately represents what it alleges to contribute to a woman's sense of worth and dignity. A definitive answer cannot perhaps be given to each of these queries, yet they can be answered as Professor Obiora has demonstrated in a bridge-building manner.⁶

The varieties of female circumcision and the conditions under which they are practiced as described by Professor Obiora⁷ lead me to conclude that female circumcision should never be selected by a parent or parents for their child. First, if circumcision is preferred at all, it will be an involuntary act to some extent: an act performed on the basis of a parent's or guardian's decision on behalf of one who is not yet considered to be fully mature. It is a very grave decision since it is irreversible and the outcome of the surgery is neither predictable nor controllable. Failure of the procedure carries the risk of injury to one's health and the impairment of one's sexual functioning and childbirth capabilities.⁸

Granting that we are sexual and social beings, I am not persuaded that the locus of our sexuality or solidarity with others is

6. *See id.* at 361-63 (discussing how education can help bring about a change in public opinion).

7. *See id.* at 287-89.

8. *Id.* at 290-92 (discussing the risks inherent in female circumcision).

found in our sex organs or enhanced by imprinting them in some symbolic fashion. Such a practice does not seem to have any relationship to reality and should not be sanctioned. It does not enhance the sexual functioning of the individual, and it entails psychological and health risks that cannot be justified. The case is strong that its reason for existence is both male and female society's desire to control women's sexuality and maintain a dual sexual ethic.⁹ The positive conceptions of self-worth and female solidarity alleged to be the purpose of the ritual can be acquired and supported in ways that involve less risk and a greater correlation between ritual and meaning. I am indifferent to the supposedly risk-free pin prick, but I see no reason why it should be imposed by custom and tradition upon any child or why individuals would argue that there is some causal relation between the pin prick and conceptions of personhood.¹⁰ Free from some arbitrarily invented ideology or symbolization, nothing seems to be added to the well-being of the individual or society by any of these four methods of circumcision: nicking or pricking of the clitoris, removing the clitoral prepuce, clitoridectomy, or infibulation.

I am not surprised that these rituals have survived or that some people believe them to be helpful. They are, perhaps, as old as the most ancient indigenous cultures and religions of the people who practice them. They have survived many changes and will continue to be resistant to change. This ability to survive should not, however, determine our evaluation of them and our policies toward them. If their social and human benefit do not promote human flourishing, parents and guardians should no longer be encouraged to impose these rituals upon their children. Instead, parents should be encouraged to restrict or eliminate female circumcision. Other acts of female empowerment deserve higher priority, and all policies related to female circumcision should be actively aimed at its elimination. These policies should stress education, especially the education of women. They also should include an explanation of what was believed to be the function of the ritual and what we know now to be a better way to acquire digni-

9. *But cf.* Obiora, *supra* note 2, at 299-306 (criticizing the "patriarchy" explanation for the maintenance of dual sexual ethics).

10. *See, e.g., id.* at 295-98 (discussing how "[o]ne becomes a respected person and an integrated female only after implementing the socially designated course to dignity and status").

ty, a proper understanding of womanhood, solidarity or whatever else we once assumed to be accomplished by the ritual. Seclusion, instruction in cultural secrets of successful motherhood, courage, and endurance can be taught without a single nick or prick of the female genitalia.

State regulation of the practice, like the regulation of other medical practices, should be restricted to the enumeration and implementation of those procedures deemed necessary for good health and medical practices. The cultural meaning of circumcision and the decision to circumcise should be left to the parents and guardians; but education in respect to circumcision should underline the problematic nature of the ritual and stress the obligation not to harm or mutilate the child. Those judged by society to be mature should be free to determine for themselves whether or not to undergo circumcision. The decision is individual, but if chosen the decision to circumcise should only be honored if the procedure is implemented by the codes of good health and medical procedure.

Some difficulties may be created by the tendency of the World Health Organization and other similar organizations to define health so broadly that it encompasses all of life.¹¹ I believe though that these issues can be determined and decided best in light of what is feasible and not harmful in the specific circumstances accompanying a possible act of circumcision. Health should be determined by rules that seek to ensure individual well-being and not simply cultural patterns or group uniformity.

The rules should even more rigorously proscribe choices that seek to increase the power of sexual pleasure of the male over that of the female. Although it is almost impossible to eliminate the use of coercion by parents or guardians in respect to the nurturing of their children, it is not inappropriate to tell parents that it is wrong to seek to control the future behavior of their children by means of altering them physically or psychologically through circumcision or other ritual practices. We know enough to understand that the development patterns guiding a child's movement from youth to adulthood cannot be determined properly by physical cutting. People and cultures therefore need to be urged to seek other ways to

11. See WORLD HEALTH ORGANIZATION, BASIC DOCUMENTS (36th ed., 1986) ("Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.").

ensure the transmission of what they consider to be essential for social and personal life.

I am not prepared to specify what standards need to be established in order to ensure good health. That task is better left to the medical profession. In general, however, instruments and procedures whose use magnifies the possibility of injury should be banned. Abuse and mutilation should not be permitted even as an unintended side effect. Professor Obiora's article contains other practices that need to be curtailed,¹² and there are no doubt many others as well. Choice or restriction should be situation-specific. Western-style hospital care will not always be necessary, and as the frequency of the ritual of female circumcision is lessened there will be less concern for these types of facilities. Since few individuals and cultures would advocate suffering and injury as a mark of adulthood, an aggressive program of education can lead in time to a significant reduction of female circumcision. The end, however, is elimination not reduction, even though that time may be in the distant future. Alternative measures of economic, cultural, and political empowerment, especially for women, must be recognized. Positive connotations for womanhood must not be seen as necessarily or centrally linked to female circumcision but rather to a set of social practices and community norms that improve the physical, mental, and spiritual condition of women and affirm their rights as persons and as equal members of a community.

Outsiders who insist upon using ritual for this type of transformation should be seen as friends and not enemies, for they share the desire to reinforce women's quest for self worth, empowerment, and solidarity. Even those who impose female circumcision upon others as a result of their mistaken belief that it improves the possibility for the good life ought to be persuaded that the guidelines to which I have alluded are necessary to ensure healthy and safe outcomes. Even if it is felt necessary and desirable that persons assign meanings to these life phases or bodily functions, I am confident that more positive rituals and symbols can be established.

Professor Obiora and I differ mainly in emphasis but perhaps also in policy. The continued persistence of female circumcision is not a valid argument for its worth or value. It only attests to the tenacity with which female circumcision has become embedded in

12. See Obiora, *supra* note 2, at 287-92 (describing all forms of female circumcision and their potential health consequences).

habit and related to the institutions of status and power in those societies that practice the ritual. I favor the elimination of female circumcision through education and will always act to bring about its demise, employing the law as both a method of education and restraint. I do not believe female circumcision can be justified on either moral or health grounds. Therefore, it should not be allowed to spread unopposed in the West or any other new area.

Existing contradictions in Western morals and behavior are to be deplored and corrected, but their existence is not sufficient ground for justifying female circumcision.¹³ Moreover, these contradictions do not implicate issues of justice and human welfare as strongly as does the practice of female circumcision. The recognition of such contradictions should prepare one to see also the contradictions present among those who practice female circumcision, and to undertake measures that will correct the mistaken beliefs and ameliorate the unacknowledged harm associated with that practice. The West is undoubtedly in error in respect to many issues related to human sexuality, but the important thing to underscore is that female circumcision is not a good thing to be cherished and supported anywhere. It is instead an evil that needs to be eliminated. One hopes that the practitioners of the ritual will discover the violence and wrongness of their practice as they are made more fully aware of its effects upon those who undergo the procedure. All women should possess the right to choose and should not be made prisoners of ancient traditions.

If African culture is truly flexible, it should be willing to correct practices that are proven harmful to women. With respect to non-American cultures and people, I have a responsibility to seek to inform and persuade. The responsibility for decision-making and implementation is that of the people themselves.

While I understand the dedication and commitment of an Alice Walker or a Mary Daly, I agree with Professor Obiora. They have overstepped their bounds and should in their opposition exercise greater civility, compassion, and understanding. Nonetheless, on the central issue, Walker and Daly are correct. The act of female circumcision is wrong because it is a violation of the limits

13. *But see* Obiora, *supra* note 2, at 319 ("The inherent paradox and double-standard of acquiescing to the legality of male procedures while being scandalized and morally outraged by female circumcision raises an interesting question regarding why the West has failed to abide by its own criticism.").

to guardianship of the parent over the child. It perpetuates an error that frequently results in harm. What is at stake is not simply the bodily integrity of the child but the parents' obligation to protect the child against harm and injury and to nurture her in a manner that leads to the greatest development of her physical, mental, and spiritual capabilities.

Female circumcision, in an effort to forestall certain feared social and personal behaviors in girls, restricts their development and on occasion causes death. Female circumcision is an evil that needs to be eliminated because it persuades parents to breach their responsibility to care for their child's well-being and often causes harm to the child. We do indeed need to build bridges in order to join together as a world community of men and women in opposition to the practice of female circumcision.

