TALKING TABOO: REPRESENTATIONS OF FEMALE GENITAL MUTILATION (FGM) IN FEMINIST DEBATES, HUMAN RIGHTS DISCOURSE & THE MEDIA

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Abstract
Female Genital Mutilation (FGM) has been a tough topic to discuss in both the local and global spheres. In the past twenty years however, a space has been created for it in the public consciousness. The object of this study is to trace the shifts that have occurred in how FGM has been talked about and make the ongoing dialogue visible. This is achieved by examining feminist debates, human rights discourse and the media as not only primary definers of the issue but also as sites of discourse production.
In moving from the local to global agenda, more actors have become involved in the debates and as such have further complexified an already complex practice. Each site offers a unique perspective and representation on the FGM controversy and has contributed to how the West has made meaning of the practice.

Résumé
La mutilation génitale féminine est un sujet de discussion épineux tant à l'échelle locale que mondiale. Pourtant, dans les vingt dernières années, il s'est taillé une place dans la conscience publique. Identifier les opinions sur la mutilation génitale féminine et mettre le dialogue traitant de ce sujet sous les feux de l'actualité constituent les objectifs de cet étude. Il les réalise en analysant les débats féministes, les discours sur les droits de l'homme et les médias en tant que premiers définisseurs du sujet qu'endroits où le discours se produit. Modifiant l'ordre de priorité des débats, du local au mondial, plusieurs acteurs s'y sont impliqués en complexifiant davantage une pratique qui était déjà complexe. Chaque endroit offre une perspective et représentation uniques du sujet controversé de la mutilation génitale féminine et nous fait comprendre comment l'Occident donne un sens à cette pratique.

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TABLE OF CONTENTS

1. INTRODUCTION

Talking about female circumcision, or as it is now widely known as female genital mutilation, has not been easy. It is a taboo topic in part because it is linked with female sexuality and female genitalia. In spite of these difficulties, in the past twenty years, it has been talked about more and more, to the extent where many in the West are familiar with what the practice entails as well as the acronym FGM. What this thesis sets out to explore is *who* is talking about FGM, *when* they are talking about it and *how* it is being talked about. I seek to make the ongoing public dialogue around FGM visible in order to see the limits, possibilities and stakes in the talk about FGM. I do this because in order to address such a complex social practice, we must be able to talk about FGM with the complexity it requires.

The debates surrounding what is widely known and discussed as female genital mutilation (FGM)[1] have been taken up by a variety of actors -- feminists, human rights activists, media and local (indigenous) and international communities among others. The debates that have taken place include contestations over meaning, terminology and strategy among others. For example one of the questions raised on a terminological level is, should the practice be described as *female circumcision* or *female genital mutilation*? When the issue reached the human rights table, was it to be considered as a cultural practice or an abuse of human rights? How should the Western media represent the practice without exoticizing the other? The answers to these three questions and others posed would contribute to the light in which not only feminists and the human rights system would come to view the issue, but through the dialogue between the two, the discourse produced would frame how the rest of society would view it.

In the above-mentioned sites of public talk, the issue has been, and continues to be, a site of controversy. For purposes of this thesis, I have identified three sites through which the debates will be analyzed, three sites that I suggest are the primary definers of FGM as a public discourse. The three sites I have chosen are feminist debates, human rights discourse and the media. While these three are sites in which the FGM controversy is played out, they are also actors in that each site contributes to the discourse on FGM.

My central argument is that each site has approached the issue from different angles and thereby further complexified it. More significantly and on a discursive level, each site plays a role in the complex discursive shifts that have occurred, each site producing a different FGM. These various perspectives at times differ in degree and at others in kind. What I am interested in uncovering is what the result of all this dialogue has been as far as the debates on FGM are concerned. At times, the issue has burnt with what I call a "bright flame" – it has been hotly debated and received a great deal of attention from and on a number of fronts – media, human rights activists, policy makers, international organizations, to name a few. At other times, however, the flame has burnt quite low and the issues have received little attention, much to the chagrin of activists.

My interest lies in where these three sites converge or diverge on the issue and the question I pose in relation to this is what patterns, if any, emerge in the talk about this taboo subject? Who is speaking and what knowledge is being produced as a result of this dialogue? Are there coalitions between the sites and if so, where and what is their nature?

I must emphasize that the scope of my study is *not* the practice of FGM per se, but rather how it has been treated and constructed as public knowledge in and by the aforementioned sites. This work, in no way sets out to condemn, criticize or uphold the

practice; the focus is on how it has been talked about by various actors. Much work, of an activist nature, has been done on the practice and effects of female circumcision but not much literature exists asking what does FGM mean and how do we make meaning around it? From a communication perspective, the symbolic nature of meaning-making, an activity which takes place in all three sites, needs to be interrogated and not taken as a given. I suggest that if we better understand how we make meaning around FGM, we can develop more culturally complex mechanisms to address it as a practice.

To achieve this, I have narrowed the exploration of each site to specific topics that I think yield the most interesting information for the analysis. In exploring feminist debates, I begin with what is considered by many to be the turning point in bringing female genital mutilation into public consciousness -- *The Hosken Report*, which made its debut in 1980 and from there follow the debate to the present day. In the human rights domain, there is no real defining starting point, as with the feminist discourse, no landmarks like 1980 from which to begin. I have chosen to begin with the roots of the idea of human rights and subsequently, the dialogue that has ensued between human rights and specifically women's rights about FGM. With the media as a site, as with the human rights issue, there is no pre-determined time period on which I am focusing since FGM has not received daily coverage in the press. It has had hot, lukewarm and no coverage at different points over the past decade. I consider the ongoing press coverage, certain key popular texts and television programs as well as well-known personalities like Oprah Winfrey, Alice Walker, and Waris Dirie to see how FGM has been presented and represented. Overall, I am looking at meaning-making practices in the West. However, I draw on the practice from a cross-cultural perspective, suggesting that from such a

perspective, I can raise different issues and expand the scope of the talk about this taboo subject in the West.

Conceptual and Historical Framework

What is female genital mutilation? The practice has been defined in a number of ways. Some definitions (Dorkenoo, 1994, 5-8; McLean & Graham, 1985, 3) are more exhaustive than others (Babatunde, 1998, 13; Gruenbaum, 2001, 3) and the categorization of the practice seems largely dependent on the purposes of one's study -- be it an ethnographic description or medical analysis. Simply put, female genital mutilation or female circumcision is an "expression used to describe a variety of female genital "operations" performed in traditional societies, generally as part of an initiation ritual" (Brennan, 1989, 367). The procedures involve various parts of female genitalia, depending on the customs of that particular society.

The practice of FGM has been documented in Africa, the Middle East, Australia and South America (Denniston & Milos, 1997, 2) and due to widening migration patterns has spread to Europe and North America. Examples of documented countries where female circumcision has been practiced locally (excluding migration to Europe and North America and the approximately thirty countries in Africa where the practice is documented to have occurred) include Malaysia, Indonesia, southern parts of the Arab Peninsula, Pakistan[2] United Arab Emirates, Oman, Bahrain, Peru, Brazil and the Aboriginal tribes of Australia (Brennan, 1989, 373). The practice is not restricted to particular religions as is often thought; it has been documented among Muslims,

Christians, Jews and traditional African religions. This of course, further complexifies the issue since it spans diverse cultures and therefore cannot be easily or neatly explained within the context of a particular culture. For some cultures, it is considered a rite of passage, while for others it is a matter of cultural aesthetics or an issue related to sexuality or morality (Gruenbaum, 2001, 33).

There is evidence that there exists wide variations in how the female vulva is cut or mutilated in different countries but for purposes of clarity, I highlight three categories of the practice since they occur most frequently in the literature. [3]

I) **Circumcision**: This is the removal or pricking of the prepuce or hood of the clitoris and is considered to be the mildest yet rarest form. It can be described as equivalent to male circumcision, a contested claim with which I shall deal in more depth in the section on feminist debates.

II) **Excision**: This is the partial or total cutting of the clitoris and all or part of the labia minora and is the most widespread form of the practice (approximately 80% of those affected undergo this procedure).

III) **Infibulation**: This involves the cutting of the clitoris, labia minora and often the entire medial part of the labia majora. The two sides of the vulva are then sutured by silk, catgut or thorns, except for a small opening, preserved for the passage of urine and menstrual blood. This is the most severe but also rarest form of the practice.

Having highlighted the three main types of circumcision, the World Health Organization classifies a fourth type of female genital mutilation. This includes

"...pricking, piercing or incising of the clitoris and/or labia; stretching of the clitoris and/or labia, cauterization by burning of the clitoris and surrounding tissue; scraping of tissue around the vaginal orifice (angurya cuts) or cutting of the vagina (gishiri cuts); introduction of corrosive substances into the vagina to cause bleeding or for the purpose of tightening or narrowing it."[4]

The above comprehensive typologization of female genital mutilation is of significance on a discursive level. The World Health Organization, as the international agency concerned with health, has contributed to the discourse on FGM by classifying the practice into four categories. As the leading world health agency, the information provided by them is less likely to be questioned given their institutional and medical authority. In fact, on account of their established legitimacy, their definitions (not only of FGM but other practices) have been absorbed and utilized by other groups and individuals such as Amnesty International, Human Rights Watch, and feminists, among others.

The emotional, social and political stakes of FGM are high. The same reaction of repugnance is often true of those who do not and do belong to cultures that support the practice. However, many opponents from within countries supporting the practice are angered by how it is viewed by "outsiders" as savage, barbaric. The issue of sexuality alone is still very much a cultural taboo especially in non-Western nations and the emergence of FGM and its very explicit nature into public consciousness is one that does not sit comfortably with many.[5] The notion of taboo, Ellen Gruenbaum suggests, is due to the fact that the subject is not likely to be brought up by strangers since the practice is related to sexuality and anatomy, "none of which is a common conversation opener with

people from outside one's culture or social milieu" (Gruenbaum, 2001, 15). Furthermore and more in line with the creation of the "other" and post-colonial theory is the fear of outside criticism and/or condemnation of the practice. During the colonial era, colonial administrators were extremely negative in attitude towards the practice. This, among other cultural practices of cultures that were colonized, was described as being "savage", "uncivilized" and "barbaric." (Dorkenoo, 1993, 60).

It is estimated that each year, two million girls, too young to give their legal consent, undergo some form of female genital cutting (Gruenbaum, 2001, 1). The World Health Organization suggested in 2000 that, "the number of girls and women who have undergone female genital mutilation is estimated at between 100 and 140 million (WHO, 2000, 2). However, Dorkenoo (1994) argues that the practice should not be viewed as an isolated one but positions FGM as "part of a continuum of patriarchal repression of female sexuality" which has taken place in a variety of ways through the past right up to the present day. Examples of practices framed as parallel to FGM include widow burning (India), Chinese footbinding and the Arab veil and *purdah*. She further argues that methods in repressing female sexuality vary in degree and scope, but not in kind. She cites the example of female slaves in ancient Rome who had one or more rings put through their labia majora to prevent them from having intercourse (1994, 29).

But numbers alone do not explain the answer to the question: why circumcision? The justifications of the practice are as many as they are complex. Dorkenoo categorizes the reasons for female circumcision into four: namely psycho-sexual, religious, sociological and hygienic. On a psycho-sexual level, she elaborates, the Bambara and Dogon of Mali believe that the clitoris is a dangerous thing during childbirth and if in

contact with a baby's head during delivery, would cause the baby's death. In Ethiopia on the other hand, there is the fear that the clitoris will grow long and dangle between a woman's legs like a man's genitals, hence the need to do away with it (Dorkenoo, 1994, 34). Pertaining directly to sex and sexuality, circumcision is considered to be a way to curb a woman's oversexed nature and "save her from temptation" (Dorkenoo, 1994, 35). Here we can see the underlying assumption of the psycho-sexual justification that a woman is an oversexed creature and needs to have these urges controlled.

With respect to the role of religion, there is the belief, especially among Muslims that since males are to be circumcised the same should apply to females. The question of female circumcision has been hotly debated among Islamic clerics and theologians and its practice is a result of a difference in religious interpretation. The Qu' ran, considered by Muslims to be the direct word of God, makes no reference to female circumcision in any form. However, many Muslims who believe that Islam requires a female to be circumcised, do so on the basis of what is known as the *hadith*, which unlike the Qu'ran is not the direct word of God, but sayings *attributed* to the Prophet Mohammed (Gruenbaum, 2001, 64). Clearly, this is a case of interpretation and therefore a site of contestation.

Sociologically, the rite of circumcision is important to a number of cultures in that it is tied to identity and status. While men are circumcised to show that they have crossed into adulthood and are now full members of their community, the same is done to women for the same reasons, but also to mark the girl as a marriageable and moral person. The hygiene rationale for female circumcision is tied in with cultural standards of beauty and cleanliness/health. Among cultures that practice the most extreme form of circumcision,

infibulation, the smooth infibulated vulva is considered beautiful. Janice Boddy, in *Wombs and alien spirits*, explores the concepts of closure and smoothness (characteristic of infibulation) showing the interrelationship between aesthetics of the body, morality and social organization. In interviewing women who prefer infibulation to excision (*sunna*), Boddy recounts being told that comparing *sunna* to infibulation is comparing "an open and a closed mouth...which is better, an ugly opening or a dignified closure?" (Boddy, 1989, 52).[6] On a hygienic level, in countries like Egypt, Sudan, Somalia and Ethiopia, the external female genitals are considered dirty and as such should be disposed of. In Egypt, for example, an uncircumcised girl is referred to as *nigsa*, which means "unclean" (Dorkenoo, 1994, 40).

Due to the range of cultural reasons behind female circumcision, it should not be surprising that there is no common age at which girls are circumcised. The ages range from early childhood to adolescence (Gruenbaum, 2001; Abdalla, 1982, Denniston & Milos, 1997, Shell-Duncan & Hernlund, 2000). At times the procedure is done when a girl is as young as five years old (Dirie, 1998), but among the Masaii of Kenya, a girl is circumcised only when a marriage has been arranged for her, which is usually in the teen years (Gruenbaum, 2001, 69).

Following the FGM trajectory, tracing the practice outside Africa leads to Europe and North America -- Sigmund Freud is known to have performed clitoridectomies on female patients on the basis that clitoral orgasms were a sign of immaturity (Morgan & Steinem, 1979). What is interesting about this, however, is that the discourse has tended to center on Africa and the Middle East, linked to the notion of the exotic and foreign "Other." Due to the influence of colonial assumptions as well as the contribution of the

media and travel industries to depicting these peoples as "exotic", this continues to be a frame in which Western audiences receive and perceive FGM.

As mentioned earlier, FGM as a practice has shifted from being a local issue to a global one. This is because the practice is cross-cultural and because of people fleeing their countries and seeking refuge in Europe and North America, carrying their cultural beliefs and practices with them (sometimes fleeing from these very beliefs and practices). It is often assumed that the efforts to combat FGM (especially in Africa) are recent -- that is from the 1980s onward. However, Dorkenoo (1994, 60) effectively argues that from a much earlier time, local health professionals had tried to raise awareness of the dangers associated with the practice, but with little success. She accounts for this failure as being due to scattered and not consolidated efforts, as well as the fact that these efforts were not recorded and therefore assessing their impact on local communities was extremely difficult. To support this argument she cites the example of the British colonial administration along with Sudanese professionals and religious bodies making attempts to ban FGM in Sudan in the 1940s. These efforts, however were translated by the local communities as an attempt to destroy a cherished culture, a view that is still common not only in Sudan today, but in other communities across Africa.

The early part of the post-colonial era saw little or no effort directed towards combating the practice of FGM; the relevant issues of the day were seen to be political and economical. It is on this basis that many feminists -- African and otherwise -- argue that the state has long been oppressive to women. Since women occupied, and in many cases continue to occupy, what is known as the private sphere, little or no attention was

paid to them (and issues that pertained to them). Important state matters tended to revolve around the public sphere, of which men, politics and economics are dominant.

In 1958, a few years after World War II and the popular notion that human rights should be extended to all people of all nations, the Economic and Social Council of the United Nations (ECOSOC) invited the World Health Organization (WHO) to: "undertake a study of the persistence of customs which subject girls to ritual operations, and of the measures adopted or planned for putting a stop to such practices"[7] and instructed that body to communicate its findings to the Commission on the Status of Women before the end of 1960. The Twelfth WHO Assembly, however, rejected this request claiming "the ritual operations in question are based on social and cultural backgrounds, the study of which is outside the competence of the World Health Organization."[8] Two such requests were made and both were rejected. It would be another twenty years before any substantial initiative was taken by the UN on the issue. The United Nations International Children's Emergency Fund (UNICEF) also refused to take action on the issue until the 1980s. UNICEF declined on the basis of exhibiting cultural sensitivity towards societies that engaged in the practice. This position adopted by the UN organ was considered to lack credibility since UNICEF and other international organizations "have not hesitated to insist on family planning, a move which conflicts with African tradition" (Brennan, 1989, 378).

Fran Hosken, with the publication of *The Hosken Report: Genital and Sexual Mutilation of Females* (1979), is largely credited with catapulting the practice of female genital mutilation into popular public consciousness (Lewis, 1995, 2). Also, at around this time, the UN Decade for Women was declared (1975-1985) and FGM was raised at

the mid-decade conference in Copenhagen in 1980 (hereafter referred to as Copenhagen 1980) making it onto the agenda under the sub-heading "Cultural practices affecting women's health." It is important to note that at this time the practice was referred to as "female circumcision" and not "female genital mutilation." A 1995 web report on FGM by the World Health Organization claims that the term "female genital mutilation" was first used by feminists, women's health advocates and human rights activists and was subsequently adopted by the Inter-African Committee on Traditional Practices Affecting the Health of Women and Children.[9]

Copenhagen 1980 brought to light a number of issues that would come to shape the debate around what would later come to be known as female genital mutilation. The media coverage was sensational in nature (Dorkenoo, 1994, 62), focusing on the procedure and symptoms rather than the reasons behind the practice. Not surprisingly, the sensationalism raised the hackles of decision-makers from African countries and therefore initial resistance to curbing the practice. In an effort to insert a positive note into what was more or less a showdown between African and Western delegates, it was pointed out that the fact that the topic had made it into an international public forum was a good sign since the subject would have been impossible to bring up in most countries a few years ago. In so doing this marked the beginning of a concerted effort between international delegates at dealing with this taboo-laden issue. So the issue was ready to be "talked about."

Feminist Discourse: Interrogating FGM, Power & the "Other"

"One of our tasks as feminist critics...is to untangle "the matrix of women's dominations of each other."[10]

The notion of the "other" is not new to feminism -- women are positioned as "other" to men. "Otherness" denotes a center-periphery relationship, a power struggle and the sharp men/women dichotomy is rather easy to comprehend in this light. What is more complex, however, is the center-periphery relationship that exists between the "West" and the "other" especially as it relates to Western feminists[11] and their non-Western counterparts. Janice Boddy, in *Violence Embodied? Circumcision, gender politics and cultural aesthetics,* suggests that Western women "occupy an ambivalent, mediatory posture: [t]hey are positioned as "other" to Western men, but are simultaneously united with them vis-à-vis exotic and unruly foreigners." She quotes George Kirby as arguing, "Africa is body to the West, a vacant barbaric place -- a mysterious dark continent which has invited penetration and colonization from those more "enlightened" and "reasonable" forces that would tame its dangerous anarchy" (Boddy, 1994, 92).

These theoretical and political stakes also ground Western interventions into the practice of FGM as a form of cultural imperialism or a "civilization project." The notion of enlightenment is of great interest to me because it seems to fit in with the contentious issue of "false consciousness" which finds its roots in Marxism. Enlightenment, in this case, refers to how one is corrected from the errors of one's way and led onto the "right path." False consciousness is also found in feminist actions to fight FGM -- the adherents to the practice are framed as not knowing what is good or harmful to them. The issue of

false consciousness poses a dilemma to feminism since it leaves no room to account for agency, yet this is more or less the very foundation of the feminist movement. In terms of FGM, radical feminism suggests that supporters of this "harmful cultural practice" do not perceive the danger and harm inherent in the practice and thus need to be enlightened (Brems, 1997, 140).

How do the various "feminisms" speak to FGM? Radical feminism holds that the patriarchal system oppresses women and is characterized by power, dominance, hierarchy and competition to name but a few. Radical feminism questions the "natural order" and infers that "what is oppressive is not the female biology per se but rather that men have controlled women as child bearers and child rearers" (Tong, 1988, 3). The focus within this school of thought is on how gender and sexuality have been used to subordinate women to men. Postmodern feminist theory, on the other hand, contrasts sharply with socialist feminist theory, which postulates that there is an interrelation of the myriad forms of women's oppression. In other words, there is no single cause for women's oppression; instead their oppression can be explained by several complex factors at play. In relation to the issue of FGM, the resulting oppression of women in the societies that practice it would be from the social, economic, religious and patrilineal forces at play (Dorkenoo, 1994, 43-53). Postmodern feminist theory, on the other hand suggests that women's experiences differ across class, racial and cultural lines and cannot therefore be neatly lumped under an all-encompassing umbrella of various causes. The view is that "feminism is many and not one" (Tong, 1988, 7) since women are many and not one. As with any postmodern argument, this stance is criticized because it over-emphasizes difference, which may lead to intellectual and political disintegration.

A thorny, baffling and utterly complex issue that all feminists (concerned with FGM) have to grapple with, regardless of where they lie on the feminist continuum, is accounting for the prevalence of women in an act by, for and against women. It would have been much easier to critique and explain this practice if men were its main actors/proponents, but research shows that FGM is a practice within the female/private sphere. It would also be simple to relegate it to false consciousness, however one would fall into the trap of essentializing or dismissing female agency. How is oppression by women on women dealt with, if at all? Dorkenoo argues, that women continue to perform FGM as a "result of their powerlessness in traditional male dominated societies" (1994, 52). What I find interesting about this argument is that it seems to essentialise women; it does not give them any agency. In addition, I critique it on the basis that it is not substantiated by evidence. Does she as the researcher see and know more than the people she is researching? The issue of the "other" crops up in this instance; even though she herself an African; her position as "knowing subject" (researcher) creates the dynamic of the "other" with the "known or soon-to-be-known object" (Lal, 1999, 101) or those being researched. Dorkenoo seems not to address or account for the power wielded by elderly circumcised women in their local communities, or is this type of power negligible?

The issue of power as it relates to feminism, FGM, and the racialized "other" presents a provocative topic that warrants analysis. While feminism on the whole, grapples with power as it relates to the patriarchal order, all is not harmonious within and between the "feminisms." I use "within" to refer to the issue of race as well as geographical location and the power associated with each. "Between" refers to the various types of "feminisms" and how close or not they are to one another on the

continuum. There is the "Western White Feminist", the "Western African-American" and the "Occidental African." To further muddy the waters, consider the "Occidental African" who lives in the "West" or the "Western African-American" who associates herself with Africa or a bi-racial woman who lives in either the "West" or Africa. Where does each individual locate herself in terms of FGM; does she need to? Jayati Lal, in *Situating Locations: The politics of self, identity and "other" in living and writing the text* (1999) analyzes the politics of location and the construction of identity (multiple locations result in multiple positionalities) and what the epistemological consequences of this are. She argues that while the feminist standpoint privileges the experiences of women as a vantage point for developing knowledge, essentialism still takes place. The question posed to researchers who occupy multiple locations/positionalities is how does this inform their analysis?

Borrowing from Michel Foucault's work on discourse, knowledge and power (1972), I argue that the production of discourse is a site of both power and struggle. In the body of knowledge that exists on FGM and the suggestion that Copenhagen 1980 and the *Hosken Report* are marked as the origins of the campaign to fight against FGM, who is being silenced by this argument? Foucault emphasizes that what is *not* said is of great importance -- it points to the silencing of one (perhaps perceived as weaker) by a stronger force. In exploring this issue, therefore, I will attempt to show the effects of using the above as landmarks in the FGM campaign by bringing to light the African reaction to the suggestion that they were not active about the issue until Western intervention.

Human Rights: FGM, Cultural Relativism & Universalism

Using Copenhagen 1980 as a starting point, it is clear that the debates surrounding FGM have often been sharply polarized not only among feminists but also human rights activists (which many feminists are), academicians, jurists and others. The issue has gone through a number of stages: from cultural practice to a women's health issue and finally a human rights issue. The underlying cause of this is that FGM has commonly been perceived as a women's rights issue, and therefore a "special interest" topic. As a result, with respect to international law, it has tended to occupy a marginal position to "international law's more 'serious' responsibility for human rights" (Peters, Wolper, 1995, 2). Julie Peters and Andrea Wolper further argue that traditional human rights is based on a normative male model and applied to women (Peters, Wolper, 1995, 2).

Considering the public/private sphere dichotomy, human rights is customarily confined to, or associated with, the public sphere, while women's issues, and therefore FGM, are confined to the private sphere. The complexity of FGM is that it requires or engages with the state (public sphere) on one hand and with women (private sphere) on the other. The FGM debate raises issues of what types of private acts are not protected by the state (Gunning, 1991, 415). In this section of the thesis, the questions I am interested in exploring are how have the two spheres been reconciled and what is the outcome when the two are engaged in dialogue with one another? To achieve this objective, I will consider the United Nations *Convention on the Elimination of All Forms of Discrimination Against Women* (hereafter referred to as CEDAW). This international standard, which has been ratified by FGM-affected countries, calls on their governments to either abolish or modify customs and practices which aggregate to discrimination

against women or are based on the perceived inferiority or stereotyped roles of both men and women (Toubia, 1995, 231-2). The very idea of human rights rests on two main premises: that each human being is sacred and as a result, there are certain things that can be done for this sacred being and certain things that ought not be done to this being (Perry, 1997, 461). These premises raise the issue of universalism/relativism in relation to the culturally specific practice of FGM that finds itself the subject of a universalist discourse.

Cultural relativism suggests that different cultures have different beliefs about their place in the world, the very nature of the world and therefore social reality. What is central to this argument is that since each culture adheres to its own set of "truths", there are many "truths" none of which is more truthful than the other (MacIntyre, 1989, 189). As such, it is impossible to judge one set of truths as superior to another. Universalists, on the other hand suggest that in spite of the differences that exist between and across cultures, there is a way of working out certain moral criteria that can be applied across the board to deal with unjust individuals or practices. Instead of following the argument that "truths" exist, universalists hold that there is one definite and knowable truth. The defining document central to the above debate is the *United Nations Declaration of Human Rights*, which claims to be applicable to each person, irrespective of his or her culture. Feminists and universalists, in their efforts to fight for women's rights and human rights are in full agreement that women's rights *are* indeed human rights. However, from the onset of the United Nations human rights system, cultural relativists expressed a great deal of concern with the fact that this system was an imposition of Western values on non-Western peoples, a form of cultural imperialism, not to mention ethnocentrism

(Lewis, 1995, 17). To advance this argument, Philip Alston and Henry J. Steiner, in *International Human Rights in Context: Law, politics, morals* inquire whether it makes sense "to ask about conditions of universality when the very question about conditions of universality is far from universal" (2000, 383).

Universalists and feminists, on the other hand rebut the relativist stance on a number of levels, arguing for example that, "torture is not culture."[12] Another argument raised is that culture is a "patriarchal construction vulnerable to challenge" (Lewis, 1995, 20). In interrogating the patriarchal order and its hold on women in FGM-practicing cultures, the feminist movement once again, as it intersects with the human rights system, is in jeopardy of being accused of cultural imperialism since it would be replacing one order with another, namely theirs.

Media Issues: The Lens on FGM

The media play an integral role in social life. Numerous studies have illustrated how the opinions we hold are significantly influenced by the media (Altheide, 1996). With respect to FGM, the media have been a crucial instrument in making the female body a site of discourse, yet they have been often criticized for their techniques in bringing the issue to the public consciousness especially at the initial stages of the debate. The female body, especially genitalia, is a topic that has and continues to be a source of discomfort to the general public- much to the irritation of feminists. It is also a source of titillation. Media coverage of Copenhagen 1980 was criticized for being sensational, focusing on visceral images of the practice and not on the reasons behind it (Dorkenoo, 1994).

The issue of sensationalism is interesting, especially when one considers what is at stake with female genital mutilation. Grabe, Zhou and Barnett (2001, 263) identify three concerns with sensational journalism (1) it violates notions of social decency, (2) displaces socially significant stories and (3) is seen as a new-sprung drift into excessiveness. Before delving into how the above concerns speak to FGM, it is necessary to provide a definition of sensationalism as well as consider the role it plays in a particular society. Sensationalism is the "coverage of unexpected events [which] have some inherent entertainment value" (Orlik 2001, 263). Orlik suggests that the role of sensationalizing is to maintain "a society's commonly shared notions of decency and morality by publicly showcasing what is unacceptable..." (Orlik, Ibid). The issue of unacceptability is of interest to me and I interrogate what is considered unacceptable and

by whom. For example, I consider the role of anesthesia in female genital mutilation -- would the shock and horror exhibited by many still be valid if anesthesia was administered? In addition, I look at the media focus on infibulation, the most extreme form of mutilation yet the least practiced.

In light of the above definitions, it is not very surprising that the initial media coverage focused on the most graphic (and therefore more interesting) aspects of the practice. It is not hard to imagine how viewing a circumcision of a young female without the use of anesthesia would violate a society's notions of social decency especially if the practice is alien to that society. One can also see how such an issue would displace whatever socially significant story had been occupying that prime position in the public. What I explore with relation to the media coverage of FGM is what next, after eliciting a visceral response from the public? How can it be, and is it talked about as it becomes less sensational and more common as a subject of debate?

We usually define "public" by contrasting it to the private. But what is public? John Dewey (1954) suggests that there is no single public and he defines a public as any group of individuals who are affected by a particular action or idea. In so doing, he further suggests that no single public exists. Putting FGM into context, it can be seen as an idea or issue that existed in one public (women concerned with the practice, for example) that needed to be communicated to another public. In exploring how this message was disseminated, I look at celebrities like Oprah Winfrey, Alice Walker and Waris Dirie and the nature of their mediated messages. In addition, I also explore some well-known publications and how they approached the subject. In many ways the media functions as the public venue for the airing of the debates between and among feminists

and human rights activists. But as we shall see, the media is also a limited site for the construction of a robust public debate on FGM.

Methodology

Arthur Berger (1995) describes culture as "one of the most dominant and elusive concepts used in contemporary discourse about society and the arts" (1995, 135). This description lends itself very well to the issue of female genital mutilation, one of the most complex cultural practices that has been raised in the public consciousness. There are activists who purport that the practice has nothing to do with culture and has more to do with suppressing women in those societies. Based on the rich literature that exists on the topic, I employ what David L. Altheide calls "tracking discourse" (1996) to investigate the talk about FGM by feminist thinkers, human rights activists and the media. I analyze documents from the perspective of a variety of disciplines -- anthropology, law, communications and post-colonial studies and explore how discourse is produced and with what effects.

Sara Mills (1997) explores how literature is discourse stating it "has been variously designated by different theorists as a privileged site of critique or an arbitrary set of conventions which we learn to read as literary" (1997, 22-3). The advantage to studying discourse is that no distinction is drawn between literary and non-literary texts. With the knowledge disseminated by the various sites on FGM, there is a tendency to treat this knowledge as absolute, as a given. As such the underlying assumptions presented by those sites as well as the players involved are unquestioned.

Discourse analysis, however, seeks to question what has gone unquestioned; it seeks to upset the established order or balance of things. Foucault, in describing discourse suggests that the objects and ideas we hold are products of humans and institutions (Mills, 1997, 54) and this lends itself particularly well to the discourse on FGM. The human factor is seen via the feminists and activists involved in the campaign against the practice, while the human rights system and the various organizations involved represent the institutions. In the debates between the above players, which are often of a heated nature, the struggle is to essentially define the FGM reality for society. The feminist perspective suggests a particular reality while the international human rights system also suggests a reality which is compatible with their already existing principles. What ensues is a battle of perspectives with the end result being negotiation, compromise or outright negation. These debates are then made public through various documents such as conventions, resolutions or declarations.

These terms in and of themselves are often taken at face-value but there is a need to uncover their nature and determine, for example, what the difference between a convention and a declaration is. The latter seems to suggest a monumental nature that the former lacks, as if what is being declared is something that cannot be denied. A convention on the other hand, implies a conciliatory tone and lacks the force of a declaration.

In light of the subject at hand, the disciplines mentioned above do not always exist in isolation as far as documentation is concerned; as I read through various documents, I realized that the topic of FGM had anthropological, medical and legal aspects to it, thus showing it was an interdisciplinary topic. I categorized the arguments

or perspectives into broad themes, which facilitated my analysis. I arrived at the three sites in this project by starting with the feminist movement and discovering that the literature, more often than not, was closely tied to the domain of human rights and the media.

Under the broad umbrella of feminism, for example, I isolated issues such as "Western", "African", "African-American" and built on the various perspectives on FGM offered by these themes. In order to get a good sense of the human rights perspective on FGM, I referred to the law journals mentioned in the feminist debates and on locating them, found further sources on the subject. The idea of including the media was based on documentaries I had watched on the subject and on the realization that a number of personalities mentioned in the feminist debates appeared time and time again in the media, such as Alice Walker and Waris Dirie. The choice to include Oprah Winfrey was an easy one -- she has been hailed as one of the most successful talk show hosts (Orlick 2001, 264) and her coverage of the FGM issue was viewed widely. The question I asked of the media was in terms of central theoretical binaries and in what manner were they being represented to the Western audience? To establish a historical background to FGM, I consulted literature from the Eighties such as the *Hosken Report* as well as various reports published by the Minority Rights Groups. I juxtaposed this with current web documents, relying a great deal on reports from Amnesty International (AI), the UN, WHO and various human rights law journals.

I must add that the literature on FGM is in a number of languages; I focused on the English language literature but was aware of the fact that indigenous activism (especially in Africa) has contributed a great deal to the efforts in combating the practice

of FGM and that these women are part of a substantial knowledge community. While I do not refer to this body of knowledge, I acknowledge its existence by mentioning it in footnotes for readers who may want to access those particular sources. In reading the various texts, I focused on terminology, gender, construction of the "other", feminism and human rights. I searched for patterns in the texts such as time and common sources and made an effort to locate sources that appeared frequently. More pertinent to the discourse produced by the three sites chosen, I track the discourse through analyzing the shifts that have occurred in each site, the power politics, the main actors, those who are "silenced" in the debates and the implications.

In order to avoid engaging in a battle of whether FGM is wrong or right, I deliberately focused on how the practice has been constructed in the discourse, and not on the practice itself. In so doing, one will not find a précis of any sort on the effects of FGM on women although I took them into account in the literature that I read. A small percentage of the literature I came across had visual depictions of women who had been circumcised or had undergone infibulation but no document on the web yielded such results. My primary focus therefore, is on textual analysis.

While I situate each site within its appropriate institutional background, my intention is to let each site rise above this foundation to converse with the other and uncover the nature of the overall communication. In all sites, I essentially address three main questions: (1) who are the actors, (2) how are they communicating (or not) and (3) how does each site operate as a site of discourse production?

The broader theoretical questions I pose throughout the discourse analysis focus on the theoretical binaries that appear on a number of levels. Examples of these binaries

include centre-periphery, self-other, Western-Third World, right-wrong among others, and I analyze the debates that occur along these binaries. I argue that these binaries structure the debates in a manner that allows one to draw out the main arguments and patterns and juxtapose them with one another. In addition the tensions inherent in these binaries fit in with Foucault's notion of power and resistance and furthermore, knowledge, power and the production of discourse. In terms of knowledge production, Foucault suggests that what is excluded as a result of being weaker is not counted as knowledge. It is important, however, to take into account the discourse and knowledge that has been excluded since it is not only the dominant discourse that contributes to meaning-making. Through this analysis we can gain a complex understanding of how we are talking (and not) about FGM.

Perhaps it is worth mentioning why I have chosen to align this study with Michel Foucault's ideas on discourse and not on other existing views like ideology, for example. Foucault's analysis of discourse and how it relates to power is of a more complex nature say, in comparison to how Marxist theorists look at ideology. The latter regard ideology within the framework of economics (Mills, 1997, 28ff), a stance many cultural and critical theorists shy away from especially after the collapse of the Soviet Union. Foucault suggests that discourse pervades social interactions, thereby producing certain behavior or in the same way, restricting behavior. More suited to my analysis, Foucault's approach makes room to not only analyze the current debates on FGM, but to also explore the unlimited range of discourse produced on the topic, where they have similarities and where they diverge in viewpoint. What is crucial to this study is the realization that a great many changes have occurred as far as FGM is concerned (a shift

in language from one of cultural practice to human rights abuse) and more changes will continue to occur.

Chapter Summary

Having offered a brief theoretical and historical background to each site, the next three chapters track the specific discourse within each site. Chapter Two begins with an exploration of what I call "tug-of-words" which is essentially the various terminologies that are in use in feminist circles as well as the justifications of their use. Continuing along this trajectory, I illustrate the various arguments that differentiate female circumcision from male circumcision and why some activists emphasize this distinction. The final section deals with the power dynamics within feminism addressing issues such as who has been speaking and how "loud" are the voices?

Chapter Three, which deals with human rights, begins with the implications of human rights foundations being in the West. This serves as a launching pad into the universalism/relativist debate. Following this is a discussion on what is argued to be a false distinction between human rights and women's rights in relation to the public/private sphere dichotomy.

Chapter Four deals with celebrities as well as well known media texts like *New York Times* and *Newsweek* and how the issue has been presented, represented and misrepresented. In so doing, I uncover some of the binary oppositions that are produced as a result of these analyses and show how seeking to present an issue can easily end up in totally misrepresenting it. Where there is an absence of visuals, I consider visceral text and the role it plays in contributing to how FGM is perceived in the West.

In the concluding chapter, I revisit each site and attempt to identify where the Western world is in terms of its political approach to FGM. In addition, I look at how the movement to change or eradicate the practice is influenced by how the issue has been

talked about. The main theme is talking about the issue; the nature of the talk to a significant extent, determines the range of possible actions.

2. FEMINIST DEBATES & DISCOURSE

This chapter deals with feminist debates and feminist discourse on female genital mutilation. It is organized into three main parts. The first section, "Tug-of-Words", explores the various terms that have been used to describe female circumcision, the rationale behind the usage and the actors involved. It shows that there has been a shift in thought around female circumcision and that this shift has had implications on contemporary discourse on female genital mutilation.

The second section, "Knowledge Production: Foucault, Feminism and FGM" is a textual analysis, showing that the "tug-of-words" has had far reaching consequences. Not only is this an analysis of terms but it serves to uncover larger issues that emerge out of this debate, for example what strategies have been adopted to combat the practice as well as the power-play between "Western activists" and "Other" activists.

The final section, "Center, Middle & Periphery: The African-American Question" takes the question of the "other" and combines it with a "tug-of-words" rooted in identity, race and location, showing how the "African-American Question" constructs the feminist debate around female genital mutilation in a particular way that perhaps no other topic would have.

Tug-of-Words

"Just as there is no single, all-encompassing 'solution' to the feminist controversy over FGS (female genital surgeries), there is no one term that is appropriate in all contexts"[13]

The above quote sets the tone for this section, showing that the debate on female genital mutilation has been far from static. Since the issue moved from the local/private sphere to the global/public one, there have been significant shifts on a terminological, attitudinal and therefore discursive level. All these shifts have influenced how the practice is looked at contemporarily and have also shaped the current strategies undertaken by the major stakeholders in the goals they have set as far as abolition and/or modification of the practice is concerned.

The term "female genital mutilation", though widely used, is not the only term that describes the practice; I suggest that the shift from "female circumcision" to "female genital mutilation" clearly illustrates a shift in thought--from describing a cultural practice to adopting a rather graphic language of human rights abuse. In fact, Lewis (1995) suggests that the controversy around the terminology arises largely from linguistic difference; that is, the need to come up with an appropriate English term for a practice that has traditional names. This semantic and linguistic development could not have at all been smooth and has not been accepted by all as evidenced by the other terms that are in use. In addition, the transition from "female circumcision" to "female genital mutilation" is not a simple one; on a discursive level, a significant shift has occurred -- one that warrants exploration.

This symbolism, I argue, has gone largely unnoticed or unanalyzed in the extensive research on FGM. This is because most of the work on FGM is from an activist and/or abolitionist perspective and understandably does not deal with the complexities of interrogating the meaning-making processes or symbolism entailed in naming.

The discursive perspective is significant because it is through this process that meaning-making occurs. It is from these processes that we understand how people have come to know and understand FGM. Through such interrogations we are allowed a glimpse into the power struggles that are centered on word choice and possible solutions. Through this process, the proponents of the language popularly known as FGM want the practice to be thought of in terms of torture and mutilation, not merely as cultural practice. In other words, they wanted to "dislocate" the practice it from its cultural parameters and make it cross the boundary into the domain of human rights and consequently human rights abuse.

Michel Foucault (1981, 52-53) states "as history constantly teaches us, discourse is not simply that which translates struggles or systems of domination, but is the thing for which and by which there is struggle." The contestations over meaning and terminology in FGM clearly attest to this. The semantic shift from "female circumcision" to "female genital mutilation" offers a glimpse into how defining a problem, to a significant extent, determines the range of solutions available. In framing female circumcision within the language and parameters of human rights discourse, the efforts to eradicate the practice are launched on this very platform; that is an abuse of human/women's rights. The current activism around FGM is now mobilized less around the pain and trauma experienced and more around human rights, bodily integrity and consent.

Female Circumcision

Following from the above argument that how the practice is defined influences how it will be framed for discussion or highlight the strategies taken with respect to it, the producers of the documentary *"Female Circumcision: Human Rites"* (1998), echo the view commonly held by feminists that women's liberation is entwined with the physical integrity of women. Note the term "human rites" – it serves as an example of a ritual practice and also through simile, subtly tackles this same ritual within a "human rights" framework. This is one example of the "tug-of-words" around the practice of female circumcision, straightforward in some aspects yet complex in others.

"Female circumcision", Diana T. Meyers[14] suggests, is a term preferred by some scholars on the grounds that it provides a respectful tone to both women and their cultures that uphold this practice. To call it by any other name, she further suggests, is tantamount to cultural imperialism. The cultural imperialism charge is one that feminists as well as other Western actors researching on, or involved in, activism around issues pertaining to the "Third World" want to avoid and understandably so. It has strong connotations of the colonial era thus tainting efforts with attributes such as ethnocentrism as well as the somewhat notorious "civilizing mission" first associated with Western missionaries and later extended to Westerners in general in the post-colonial era.

As far as who was using the term "female circumcision", Hope Lewis (1995) suggests that English-speaking Westerners and Africans used the term as a way of dealing with their unease of publicly discussing sex and genitalia. An example of an

indigenous African group that prefers the term "female circumcision" is the Premier Group des Femmes d'Afrique[15], which finds the term "female genital mutilation" offensive since this is perceived as an attack on a facet of African culture. Leslye Amede Obiora (2000) argues that the term FGM is as much a misnomer as female circumcision; not all forms of the practice are impairing and at the same time, while circumcision in a literal sense means, "to cut around", this is not the only form of the practice. What does "female circumcision" entail, apart from a note of respect to the women and the cultures from which they come? For methodological purposes, Katherine Brennan (1989) prefers to use the term "female circumcision" rather than "female genital operations" "because it is less cumbersome" (Brennan, 1989, 367).

On a discursive level, I argue, referring to the practice as "female circumcision" shows that this angle to the debate around the issue is still in its early stages. It is still primarily located in the local/private and cultural spheres and has yet to traverse to the public (global) legal spheres. The identities of the actors/players involved in shifting the topic from one domain to another are essential to an overall comprehension of the issue and are duly noted in the various sections that deal with the various terms in use.

Female Genital Surgery (Operations)

Female genital surgery or operation is a testament to the interdisciplinary nature of the practice. In this case it permeates the medical field and therefore medical

discourse. The notion of surgery suggests a sterile environment and more often than not, the use of anesthetics. One wonders how "loud" the outcry against FGM would be if the practice occurred in sanitary conditions and under the administration of anesthesia. Clearly much of the outrage is centered on the unsanitary conditions the practice takes place in.

Although there are documented cases of female genital surgery actually occurring[16] (performed in hospitals by skilled medical personnel)[17], these cases are practically negligible when juxtaposed with the number of women and girls who undergo the procedure in unsanitary conditions with the most basic of tools. Using the relativist/ethnocentric continuum, the term "female genital surgery" suggests cultural neutrality. Although this may be the case, one cannot say it is value-neutral since it seeks, through the use of medical terminology, to distance one from the physical trauma the women and young girls experience. It seems to create a false ambience of comfort and safety. Lewis (1995) further suggests that the term implies a correction of a disfigurement or the curing of a disease.

Interestingly, while the term has strong medical connotations, it is credited to Isabelle Gunning, a professor of law. Her rationale for using this term is that it allows one to draw comparisons between the traditional and "modern" forms of "surgical modification of women's bodies that are not generally subject to human rights scrutiny" (Lewis, 1995, 7). In this case, Gunning has appropriated a medical term to serve the interests of a human rights perspective. Mojubaolu Okome[18], a Nigerian scholar, prefers the term "female genital surgeries" in full knowledge that she is rejecting what she calls the "dominant terminology." FGM, she argues, carries with it the assumption that African

societies that engage in the practice do so in a deliberate effort to disfigure their women. She further argues that there is no conclusive evidence that this is indeed the case.

Female Genital Cutting

Female genital cutting is yet another term in use and favored by Diana Meyers (2000) who rationalizes her choice by deconstructing the terms "female genital surgeries" and "female genital mutilation." My use of the word "deconstruction" entails a removal of what I call "semantic layers", a going beneath the surface to uncover something. She considers both terms as euphemistic, a characteristic already explored, though not quite in this manner. Lewis (1995) refers to euphemistic use of "circumcision" as a tactic of avoiding public discussion on sex and genitalia. Meyers, on the other hand, refers to the euphemistic nature of the medical terminology in light of the fact that it creates the overall assumption that the practice largely occurs in sanitary conditions, when this is not the case. What is more provocative, however is the argument that the term suggests an analogy with male circumcision, which she argues suggests a relatively "risk-free procedure that does not interfere with sexual pleasure" (Meyers, 2000, 470). The provocation arises in two forms: 1) Equating the practice to male circumcision and 2) the assumption that male circumcision does not interfere with sexual pleasure. The Reproductive Health Organization[19] also uses "female genital cutting" on the basis that "female circumcision" may jeopardize the efforts to end the practice by causing parents and communities to feel alienated. Furthermore, they suggest that the term female circumcision creates a false parallel with male circumcision.

Some activists have taken umbrage to the assumption that female and male circumcision is alike. The most glaring example of where the two are seen to differ, at

least on a discursive level is that one has succeeded in making it into the public consciousness as a brutal act of torture (female), while the other has yet to make such progress, on an international level at least. It must be noted that there is a strong movement afoot to equate male circumcision to an abuse of human rights and stir the public in much the same way as the practice on females has done. An example of a collaborative effort to eliminate the mutilation of both female and male genitalia is seen in the Fourth International Symposium on Sexual Mutilations[20]. Here, *The Ashley Montagu Resolution to End the Genital Mutilation of Children Worldwide* was unanimously ratified and was forwarded to the Secretary General of the United Nations as well as the President of Amnesty International for their support (Denniston & Milos, 1997, vii, 217).

Female Genital Mutilation

The most commonly used term and the one which presently grounds the international debates is female genital mutilation. As earlier mentioned, it is the term widely used by feminists, activists and international organizations and has almost achieved the state of being a given. The rationale offered for the use of this term is to highlight how the practice is an abuse of human rights as well as emphasize the physical and psychological trauma caused and furthermore "stress what some construe as the intentional infliction of harm" (Lewis, 1995, 7). Dissenters and critics of this term raise objections on the grounds that "it prejudices the question of women's autonomy vis-à-vis this practice (Meyers, 2000, 470).

The use of "female genital mutilation" raises a thorny issue for feminists, especially those concerned with eradicating the practice. The overall aim of the feminist movement is to give women agency yet using this term seems to strip women of it. From an academic standpoint, it is necessary to peel away the layers that imbue this (and other) terms. Janice Boddy, in *Violence Embodied? Circumcision, gender politics and cultural aesthetics* argues that the terms we assign things or events later become givens, yet "...we need to remind ourselves of their preconstructedness and examine them for what they embrace and what they exclude" (Boddy, 1994, 80). For the case of FGM, Boddy suggests that while the term seems descriptive (leaving nothing to the imagination) it "forges a single decontextualized fact out of diverse practices and meanings and imbues it with specific moral and ideological significance" (Ibid). The notion of agency is not circumscribed to the women actors involved in the practice but for the general audience as well. FGM leaves little room to negotiate the term; what choice does one have but to greet it with horror and repulsion?

Efua Dorkenoo adamantly states that the practice is mutilation and not the euphemistic "circumcision" quoting Gerard Zwang's definition that "any definitive and irremediable removal of a healthy organ is a mutilation" (Dorkenoo, 1994, 4). This strong position taken by Dorkenoo, however, does not address the view that African women who have their daughters circumcised do so, not out of malice but in the full knowledge of the consequences that await an uncircumcised girl, especially in the rural areas.

Local terminology

While the central focus of the "tug-of-words" has been around English language terminology, it is important to briefly discuss local terminology since this offers a

glimpse into the world views of a particular group of people or society. In the case of "female genital mutilation", understanding the local terms for the practice also offers a societal rationale to the practice. What this shows is that there is no single factor that explains circumcision but rather that it rests upon varied belief systems and values. In Egypt, for example, the practice is referred to as *tahara*[21] (*tahur* in Sudan), a term which is synonymous with purification or cleansing. As such, this practice is seen as a way of purifying women and those who do not engage in the practice are considered unclean and ostracized from society.

Among the Kikuyu of Kenya, the term used to describe the practice is *irua,* which is actually a rite of passage which celebrates a "change in social position" for the initiates.[22] In this case, the practice is seen as a key event into integrating with the rest of Kikuyu society. The emphasis is not on the circumcision act; it is merely a means to an end and is surrounded by other rituals such as socialization rites. The discussion on the Kikuyu presents an opening into the next section, which deals with the female/male circumcision controversy.

Female Circumcision vs. Male Circumcision

There is a great deal of contestation between female and male circumcision and the provocative suggestion that the two are parallel practices. When one looks at the main actors in this particular "tug-of-words", one is not overly surprised at their composition. In one camp are the FGM activists: people who decline to use the term "female circumcision" for the very reason that it erroneously equates the practice to that performed on males. Their efforts are solely directed at women and young girls subject to

the practice. In the other camp are activists (men and women) who see the practice as mutilation to both males and females and are engaged in efforts to eradicate both male and female circumcision on the grounds that "no ethical justification can be made for removing any amount of flesh from the body of another person...the violation of human rights implicit in sexual mutilation is identical for any gender" (Denniston & Milos, 1997, v).

How are the two distinct, if at all? One of the frontrunners in the efforts to eradicate female genital mutilation, Fran Hosken (1979) states that the parallel drawn between the two is wrong on two fronts, from a health perspective as well as a sexual point of view. From a health perspective Hosken argues that circumcision performed on males poses no life-long damage to health (Hosken, 1979: Part III, 1) while the same cannot be said of the practice on women. The health consequences of circumcision on women are of both physical and psychological nature and furthermore there are immediate complications as well as long-term ones.[23] So the debate frames it as one of health, the amount of cutting and sexual pleasure.

While Anika Rahman and Nahid Toubia (2000) agree that female and male circumcision is a practice that violates a child's right to physical integrity, they are adamant that there are differences between the two. They describe male circumcision as the cutting off of the foreskin from the penis, without damage to the organ yet in females, they argue, the cutting is more extensive. The male equivalent of clitoridectomy (whole or partial removal of the clitoris) would be amputating most of the penis. In the same way, the male equivalent of infibulation (clitoridectomy as well the removal or closing

off of the sensitive tissue around the vagina) would be total removal of the penis as well as its roots and the scrotal skin (Ibid, 4).

Male circumcision is becoming a site of contested practice and terminology and while this does not directly pertain to the scope of my study, I must mention that there has been a shift in attitude towards male circumcision and the supposed benefits and/or harmful effects. For example, Fran Hosken, in the *Hosken Report* (1979) suggests that there is no evidence that male circumcision damages sexual performance (a characteristic that was used to distinguish it from female circumcision); in fact it was seen to enhance sexual pleasure (1979, Part III,1). More recent studies on the subject[24] suggest otherwise. Tim Hammond (1997) in *Long-term consequences of neonatal circumcision: A preliminary poll of circumcised males* suggests that the earlier the age at which the "mutilation" occurs, the less likely it is for the male "victims" to recognize the damage in later years and that in some circumstances, the trauma and pain associated with the procedure is of such magnitude that the "conscious mind suppresses memories of the event" (Hammond, 1997, 125). The choice of terms like "mutilation" and "victim" clearly show where the author lies on the topic and seem to encourage similar action from the reader.

Looking for distinctions between the two practices at a strictly material level is more difficult than the similarities, which do exist. First and foremost is that both practices are culturally determined. Although there are some who take umbrage to the practice being classified as a "cultural practice" if one takes culture to be a way of life of a particular people, then one can see how circumcision can be described as a cultural practice. To explore the similarities between female and male circumcision requires a

certain level of neutrality as well as complexity that is not present when dealing with the distinctions.

As a cultural practice, circumcision is a means to an end. Among the Kikuyu of Kenya as earlier mentioned, it signified the entry into adulthood of both males and females. Circumcision therefore symbolised the transition from childhood into adulthood and serves as a distinguishing mark from the rest of the youth who had yet to make the transition. In Sudan, Egypt and Somalia, circumcision is a way of curtailing premarital sex (hence the extreme form infibulation) as well as preserving virginity (Rahman, Toubia, 2000, 5). This however, is put into effect for females and not for males, who are circumcised in accordance with Islamic religious teachings and face no real consequences for engaging in premarital sex. From a gender perspective, this raises feminist hackles in that it does not equate women's sexuality with men's. The practice may be the same yet it is applied differentially. The relationship between religion and circumcision is a rather murky one; several authors[25] document that the practice preceded the arrival of Christianity and Islam (in Africa) yet as far as Islam and the practice are concerned, the two are seen to identify with one another. The majority of African nations composed of Muslims perform circumcision on females as well as males.

On a discursive level, it is interesting to note that while the Qu' ran (primary source of Islamic law) does not distinctly advocate for the practice and neither does the *hadith* (collections of the sayings of the Prophet Muhammad), the practice is done in the name of Islam. What this suggests is that there are authorities who have interpreted these holy writings on behalf of the adherents, clearly illustrating a hierarchical relationship and possibly power struggle over interpretation.

Knowledge Production: Foucault, Feminism and FGM

Just as there is a tug-of-words over what should be the appropriate terminology, there also exists a tug-of-war amongst the various actors in how exactly to tackle the issue of female genital mutilation. This power play is largely based on the center-periphery relationship that exists between activists from the "West" and activists who are "other." Often, this center-periphery relationship molds the perspectives of the various activists. In the "West" for example, the practice is more often than not received with a great deal of horror and disbelief and it is these emotions that galvanise women from this part of the world to seek ways of abolishing the practice. For some women who are identified as "other", their approach is less reactionary and this shapes the solutions they seek to effect; for example clinicalization of the practice and not total abolition.[26] Having said this however, it must be pointed out that there are "other" women who have allied themselves with their western counterparts in not only approach, but solution.[27]

Is intervention from the "West" a case of cultural imperialism? Are we to assume that there is a universal female body that all these players are rallying around? The second question may seem easier to answer in comparison to the first one since FGM is considered a violation of women's rights by feminists in the areas concerned as well as in the West and it is on this common platform that the activism is founded. Yet if one prods and pokes at this apparently tight shell, there are a few cracks that emerge.

It is worthwhile to explore the role of identity in this debate because it offers a glimpse into the rather complex power relations that exist among the activists. As mentioned in the opening chapter, while feminism on the whole grapples with power as it

relates to the patriarchal order, all is not harmonious within and between "feminisms;" there are issues of race, location and power to deal with.

Fran Hosken (1979), in the preamble to her report on FGM, discusses at great length why and how she came to be involved in the efforts to eradicate FGM. Apparently, she learned about the procedure by chance and became involved due to the fact that she felt "[her] own personal sense of dignity and worth as a woman and a human being [was] under attack by these mutilations" (Hosken, 1979, 1). Furthermore, she perceived this practice to be an attack on human freedom as well as on women everywhere. This is what galvanised her into putting together a report that was to bring the issue to Western public consciousness and stir activism all over the world. Her rationale for intervention is interesting in that it seems to suggest that despite racial and class differences, there seems to be among all women, a tie that binds them all -- freedom. She also seems to imply, that yes, indeed there is a universal female body. This is seen in the contemporary efforts by women world-wide in combating the practice of female circumcision. The coming together of women to fight a practice that is foreign to some of their cultures is in the name of liberating women from what many perceive is a patriarchal stranglehold. One woman's struggle for physical and bodily integrity through the abolition of circumcision is taken on by other women in recognition that they are all fighting for their rights, some of which differ in kind or degree but are shared rights nonetheless.

This intervention (Western) has not always been received in a welcoming manner by a number of African scholars and activists. For example, Mojubaolu Okome (1999), in a scathing attack, refers to it as "Western feminist evangelism[28]," comparing this intervention to the manner in which early European "invaders" dealt with Africans when

they first arrived to explore the "mysterious continent." She argues that this contact was a way for the Africans to "evolve from their frozen state to the dynamism of Western civilization." Shifting the focus back to FGM, Okome suggests that "the crucial question in the debate on circumcision is conceptualized by mainstream feminist theorists as involving right versus wrong, and civilization versus barbarity, continuing the colonialist effort to interpret indigenous African culture and thereby dominate it" (Okome, 1999, 4). This sharp dichotomy of binary oppositions such right/wrong and civilized/barbaric lacks the middle ground or nuances that other scholars agitate for, not only in terms of FGM but research in general.

Okome raises the question of legitimacy: who has the knowledge and capacity to speak about the issue? She seems to imply that since this is an issue for the "other" and thus deserves an "other" solution. I find that she contradicts herself with this assumption by lacking the exact nuanced approach for which she advocates. Based on the fact that FGM has come to the West via immigration, does this not warrant or justify the entry of the "West" into the debate?

In exploring the production of discourse on FGM, Fran Hosken and her report are often credited with placing the FGM debate in western consciousness (Lewis, 1995, 2). A second actor also often mentioned is the 1980 Copenhagen Conference during which the UN Decade for Women (1975-1985) fell. From these two, one could infer that prior to 1980, nothing had been done about FGM. Is this perhaps what Janice Boddy refers to as "arrogant perception - the individualistic situatedness (sic) of Western observers however feminist and humanitarian their motives might be?" (Boddy, 1994, 89). What this does is

sweep into oblivion any efforts made towards eradicating or addressing the practice prior to 1980.

Interestingly, the bulk of efforts prior to these two landmark events were indigenous. Dorkenoo (1994, 60) argues that from a much earlier time, local health professionals in Sudan had tried to raise awareness of the dangers associated with the practice but with little success. She accounts for the failure as being due to scattered and not consolidated efforts as well as the fact that these efforts were not recorded and therefore assessing their impact on local communities was extremely difficult. To support this argument she cites the example of the British colonial administration along with Sudanese professionals and religious bodies making attempts to ban FGM in Sudan in the 1940s.

Katherine Brennan (1989) agrees that the campaign in Sudan was the most institutionalized campaign in the early twentieth century but that the British colonial government legislation in 1946, which outlawed the practice, did not stop it; instead it forced families to have the procedure done in secret. While Dorkenoo suggests that a possible reason why the campaign was unsuccessful was due to unconsolidated efforts, Brennan, on the other hand, suggests that the failure was largely due to the fact that it was imposed by a colonial regime and "there was no attempt to educate the Sudanese as to why they should abandon a longstanding cultural tradition at the behest of a foreign power" (Brennan, 1989, 376).

The proposition by Sara Mills (1997, 22-3) that discourse "has been variously designated by different theorists as a privileged site of critique or an arbitrary set of conventions which we learn to read as literary" lends itself well to the analysis of The

Hosken Report and Copenhagen 1980 as starting points in the FGM debate. As a published document, the Hosken Report became a template of sorts for future discussion as well as discourse on FGM. Many of the definitions and/or descriptions in use by other authors are derived in whole or in part from the Report regardless of the fact that it is a dated document. By being the "first" publication, it established for itself as well as the author longevity as an authority on the topic. To follow on Foucault's ideas on discourse and power, he posits that discourse "can be both an instrument and an effect of power, but also a hindrance, a stumbling block, a point of resistance and a starting point for an opposing strategy...it [discourse] transmits and produces power, it reinforces it but also undermines it and exposes it, renders it fragile and makes it possible to thwart it" (Foucault, 1978, 100-1).

This accurately describes how discourse around FGM has been produced and how it has developed over time. In shifting from a language describing cultural practice to one highlighting human rights abuse, the discourse on FGM was instrumental in gaining the attention of international organizations concerned with human rights. It is worth mentioning that while the practice was still referred to in terms of culture (female circumcision), the same international organizations that have now issued strong statements against the practice, were reluctant to do so back then, citing that the "ritual operations in question are based on social and cultural backgrounds, the study of which is outside the competence of the World Health Organization[29]."

Discourse entails power, which in turn entails resistance. There are many points of resistance in discourse production. One that I found particularly interesting was the academic tug-of-words between two female lawyers of color, Leslye Amede Obiora and

Isabelle Gunning (Wing, 2000). Obiora, in much the same tone as Okome (1999), and also coming from an African perspective, challenges the very foundation on which the campaign against FGM supposedly rests such as "outsider", Western, ethnocentric, essentialist "armchair" focus on eradicating the practice altogether. While Obiora does not explicitly define "armchair", I suggest that she is referring to the notion that Western intervention has been from a perspective where they are comfortably "seated" in their cultural framework, judging a practice foreign to them but not taking the energy to rise from the armchair and get involved in the issue.

Obiora argues that Western-biased themes such as bodily integrity and individuality have served to distort the issue. Instead, she suggests, "reform will be coherent and successful if it is based on identifiable principles and concepts that command general acceptance, particularly as legal sanctions compete and conflict with social sanctions and self-interest" (Obiora, 2000, 271). Her argument is that the Western bias in research on FGM has excluded "indigenous hermeneutics" and "nuanced contextualism" (Ibid, 272) and has largely ignored the cultural meanings and motivations behind the practice. So what solution does she offer? In her Introduction, she asserts that the course she has chosen to take on the matter is a middle course, one which emphasizes "how an acute sensitivity to cultural context and indigenous hermeneutics balances efforts to protect the interests of women" (Ibid, 261). This perspective serves as a backdrop within which her suggested solution to the practice of female circumcision is framed.

In a rebuttal to Obiora, Gunning (2000), discusses the points on which the two are in agreement and naturally, where their perspectives diverge. Where the two are in

agreement is the fact that the anti-female circumcision campaign has been rife with "racist and hypocritical manipulation of the imagery and lives of African women" (Gunning, 2000, 275). However, where the two lawyers of colour diverge is on the manner in which Gunning feels that Obiora has juxtaposed the lives of Western and African women. She describes Obiora's juxtaposition as "static" and "monolithically oppositional" (Ibid). The monolithism Gunning is referring to is how Obiora's approach deals with the experiences and views of Western feminists as being entirely opposed to those of African women. This tug-of-words is quite significant because these two women are not speaking for themselves alone, but also on behalf of other people, women in particular, who share the same views they do but do not have the viable means of airing them.

By examining their choice of terminology towards the practice, it does not take long to figure out what side of the debate they represent. Obiora opts for "female circumcision" and then not surprisingly, a solution that is actually a modification of the practice, namely clinicalization of the procedure. As mentioned earlier, how one chooses to approach the topic largely determines the nature of the solution. Obiora has approached the topic from one African perspective (there are African dissenters to this particular "solution"), which understands the significant role the practice plays within African culture. In suggesting clinicalization of the practice as a possible solution, she suggests that this will acknowledge both the symbolic role circumcision plays in societies that engage in the practice as well as address the physical (health) risks associated with it. In the earlier section, "Tug-of-words", I mentioned that a number of women who opt for the term "female circumcision" do so, not only in an effort to respectfully address

adherents of the practice, but also to avoid charges of cultural imperialism. So for whom is Obiora speaking; to whom is she giving voice? She speaks for the "silenced" women in the campaign against female circumcision who stand behind the practice. This role or task Obiora has acquired as "unofficial spokesperson" is significant in two ways.

First and foremost, in terms of locating women in favor of the practice, research has dealt with them on a rather anonymous basis: we do not know them by name. Instead they are simply documented as nameless, faceless women being in favor of the practice. Obiora, however, has given them a name and face. Where Obiora stands out in this debate on circumcision is by the fact that she constitutes a very small segment of women who are educated and in a position to loudly voice her opinions, provocative as they are, through law. She is privileged to have a channel through which she can not only voice her opinions but do so with the knowledge that this channel functions in such a manner that her views will be disseminated on a more substantial basis.

Secondly and perhaps more significantly, we need to interrogate the assumptions associated with taking on such a role. Are Obiora's views all embraced in their entirety by the voiceless, faceless women she represents? Common sense would suggest "no" and rightly so since there are surely other opinions held within this "camp" but then this raises another problematic. Much as the views held in this perspective may not differ in kind but in degree, how and *who* will bring those "minor" views to light?

Much as one may go about representing others and do so with the noblest of intentions, this is problematic to some extent because this effort may often end up in misrepresentation. Looking at the issue of representation and "spokespersonship" from a democratic perspective, Obiara, due to her academic status, finds herself catapulted to

the forefront as a spokesperson for this view towards female circumcision whether she intended to pursue this position or not.

Keya Ganguly states "it is important to communicate our differences and disagreements and regard dissent as an index of the vitality of the feminist project" (1992, 64). So, there is no need to be concerned about the Obiora-Gunning debate; far from it. Instead it should be embraced in the spirit of vitality that Ganguly describes. Clearly from a limited activist perspective, these diverging viewpoints ideas may be considered a "stumbling block" to implementing practical strategies but from an academic and political point of view, it adds richness to the debate, providing a wider playing field for further interrogations, more "food for thought" as we frame more complex responses to the practice.

Center, Middle & Periphery: The African-American Question

The final section of this chapter deals with what I am calling the African-American question with relation to locating the identity vis-à-vis "White" and "African." On a methodological level, this labeling in and of itself is problematic. How does one define "White" or "African" without excluding certain people? The two terms scream of exclusivity, lacking the nuanced approach that has been advocated for several times (Obiora, 2000; Gunning, 2000; Okome, 1999) within this text in a variety of ways. Having acknowledged this however, I take the bold step of arriving at a working definition of the above identities so as to make my point clear. The definitions are based on ethnicity. "White", to define it in simplistic terms includes women of a Caucasian background. "African" refers to women who are from the continent of Africa (excluding

White South Africans and Asians) currently. In other words, it excludes people who are descendants of African slaves. "African-American" refers to people who can trace their heritage back to Africa as a result of the slave trade of the 1800s and who presently live in the United States.

The notion of African-American women as a marginalized group is not new to the disciplines of communication, anthropology, sociology and law, among others. Their status as being peripheral is widely and well documented (White, 1984; Baldwin, 1980; Giddings, 1984). The position they occupy with regard to the FGM debate is very interesting; it is somewhat a liminal position. It is not entirely rooted in the West; even if that is where the majority may live and work and neither is it entirely rooted in Africa, a continent to which they are tied due to the practice of slavery. Janice Boddy, in *Violence Embodied? Circumcision, gender politics and cultural aesthetics,* suggests that Western women "occupy an ambivalent, mediatory posture: [t]hey are positioned as "other" to Western men, but are simultaneously united with them vis-à-vis exotic and unruly foreigners," (Boddy, 1994, 92). While I used this quotation in Chapter 1, I want to utilize it in light of the position held by African-American women. It would read like this: "African-American women occupy an ambivalent, mediatory posture in the debate on Female Genital Mutilation. They are positioned as "other" to White and Black women but are simultaneously united with them…"

Patricia Collins (1999) suggests that African-American women occupy both an "insider" and "outsider" status. In this article, Collins highlights how contemporary Black feminist thought has been influenced by the Black woman's insider and outsider status. An instance where the Black woman is "insider" is seen in the "sense of self-affirmation

they [Black domestic workers] experienced at seeing white power demystified..." (p.155). In the same breath, the "outsider" status was experienced in that irrespective of the deep involvement with the White families, at the end of the day they were "outsiders" (Ibid.).

Framing this within the boundaries of the FGM debate, it is clear that it is not only African-Americans who experience this insider-outsider status. I argue that at some point, all the stakeholders experience this liminality. For the White women, it could be the charge "cultural imperialist" that awards them an outsider status. The White woman is an outsider by virtue of the fact that she is not African. The African woman who speaks in opposition to the popularly held view on the topic (be it for or against the practice) is also made to feel as an outsider to involvement in the debate for allying with the "enemy." In the same way, African-Americans may be outsiders in the sense that when it comes down to race/identity/location, the liminal position they occupy becomes synonymous with being an outsider.

Are there benefits to being an outsider? George Simmel (1921) suggests that indeed, there are benefits to occupying an "outsider within" status. Collins (1999) borrows from Simmel to illustrate how Black feminist thought stands to gain from its marginal status. In the same way, these advantages, I argue are of benefit to the debate on FGM especially in terms of methodology. The first advantage is that the "outsider-within" connotes a certain level of objectivity "a peculiar composition of nearness and remoteness, concern and indifference" (Collins, 1999, 156). Speaking from a methodological standpoint, these are ideal qualities for a researcher to possess. A second advantage is that due to the above qualities, the chances of being confided in due to

occupying an "outsider-within" status are quite high.[30] Naturally, this entails a high yield in data. The final benefit is that the "stranger" is likely to see more patterns than those immersed in the situation would be able to.

As mentioned earlier, the shifts within the debate have not come to an end; and continuing on that trajectory, the next chapter maps out how FGM made the shift from cultural practice to a human rights violation. This next debate attests to the volatility, mobility and dynamic nature of talk about FGM.

3. THE GRAND NARRATIVE OF HUMAN RIGHTS: QUESTIONS OF "MAN", "WOMAN" AND "HUMAN"

The previous chapter analyzed some of the debates that have taken place among feminists ranging from differences in terminology to differences in solution. My analysis suggests that term "female genital mutilation" is a conscious effort to dislocate the practice from its cultural parameters and catapult it into the domain of human rights as a case of human rights abuse. This chapter sets out to trace the rather arduous journey the issue has taken to its current home within the human rights system in a number of ways. First I provide a brief background to the history of human rights and consider what implications this has had on women in general and FGM in particular. With this as a foundation, I delve into the main arguments that continue within the human rights system and then apply them to the case of FGM. Finally, I consider the *United Nations Convention on the Elimination of All Forms of Discrimination Against Women* (hereafter referred to as CEDAW), a key document referred to as the "international bill of women's rights"[31] calling for governments to take effective measures to eliminate the practice of FGM.

What this chapter aims at illustrating is the process of how FGM has been mapped into human rights discourse. While there were already contestations within the human rights system, the introduction of the practice of FGM to the human rights table posed a real dilemma to the system in that the practice encapsulated all the critiques of the human rights system, challenging many of the principles of the system that had never, until now, been interrogated in such depth. In so doing, FGM came to be represented in a new manner, one that would align itself with the human rights system and one that will be illustrated in the following discussion. This chapter is an exploration into how FGM

shifted from being a cultural practice into an example of human rights abuse. In agitating for this shift in status, the issue of FGM was seen to challenge the human rights system on the neutrality of their standards. This neutrality is in terms of the system articulating standards to *human beings,* intentionally eliminating variables such as sex, gender, ethnicity, religion, political affiliation (Nagengast, 1997, 350). The aim of FGM activists was to traverse past the neutral and ambiguous *human being* in favor of the woman as human. In short, the variable *gender* was to be included in the existing standards.

Human Rights: A Troubling History for Women

Hilary Charlesworth, in *Human rights as men's rights*, opens with, "although there is no doubt that the apartheid of gender is considerably more pervasive than the apartheid of race, it has never provoked the same degree of international concern or opprobrium" (1995, 103). What is this "apartheid" to which Charlesworth is referring? Her central argument is that the current human rights system is an impediment to the advancement of women; she attributes this to the fact that international law-making institutions "have always been, and continue to be dominated by men" and that "international human rights law has developed to reflect the experiences of men and largely to exclude those of women..." (1995, 103). While she does not go into detail about how the concept of human rights as we know them emerged, a brief history is necessary and presented below.

The idea of a common set of human rights principles emerges from the failure of the League of Nations and the subsequent emergence of the United Nations Organisation

in June 1945 (hereafter referred to as UN). The Universal Declaration of Human Rights (hereafter referred to as UDHR), in 1948, was adopted by the United Nations and is the foundational text for the human rights system. This document has often been referred to as the "spiritual parent" of most of the existing human rights documents (Mutua, 2001). Alston and Steiner, echoing the above sentiment, describe the UDHR as "in some sense the constitution of the entire [human rights] movement...the single most invoked human rights instrument" (Alston & Steiner, 1996, 120). From a discursive point of view, the above views are significant, especially the use of terms such as "Universal", "parent", "constitution" and "foundational" in that they signal the birth of a way of thinking and a language that in a short time achieves a finality, legitimacy and universal applicability that received little dissent.

It would not be long before the legitimacy and applicability of this foundational text would be questioned. The emergence of dissenting voices is an indication of the "other" engaging with a dominant discourse. The UN's adoption of the UDHR is significant in that it indicates that the entire human rights system operates under the auspices of the UN and therefore actions taken by the UN inevitably affect the human rights system. In fact the UDHR has become an extension of the UN Charter of Rights and is often referred to in meetings of the General Assembly (Alston, Steiner, 2000). Putting FGM into perspective, the relationship between the UN and the human rights system outlined above means that when the issue is said to have been presented to the human rights system, in other words, it was being presented before the UN.

The foundations of the UDHR and the UN are said to lie in the West, an idea that needs exploration so as to provide a framework from which to view the dilemma

presented by a non-Western cultural practice, namely female circumcision. Makau Mutua, in *Savages, victims and saviours: The metaphor of human rights* describes the human rights corpus as Eurocentric and links its emergence with the atrocities of Adolf Hitler and the demise of his regime. Nuremeburg, the German town now infamous for being the location of the trial of Nazi war criminals, is the birthplace of the human rights movement with the London Agreement as its "birth certificate" (Mutua, 2001, 7). It was the proceedings of the Nuremberg trials that galvanised the Western democracies into reaffirming concepts related to the natural rights of man as individual and man as citizen (Messer, 1997, 295). The human rights movement therefore is seen to have initially emerged out of horrors that had occurred in the West and was later broadly applied to the rest of the world. How these principles came to emerge as a system, thus entailing an organizational structure, was through the drafting of a document and in order for the document to have any power, it required participating countries to ratify it. The process of ratification is key since it allows collaboration as well as resistance, should a nation-state not perceive any benefits to signing such a treaty. In the case of the UDHR, forty-eight states voted for and none against.[32] A second way in which the human rights concepts emerge as a system is that they are based on a series of documents that already had certain principles laid out.

The concept of the human rights system is drawn from various European ideals such as the Magna Carta of 1215, the French Declaration of the Rights of Man and the Citizen, which in turn are drawn from Roman Law, the Judaeo-Christian tradition as well as Reformation humanism (Messer, 1997, 295). It is important to note that the feminist critique of the human rights system is not so much about the masculine language (as seen

in the "rights of man") as about that the lack, and some argue the continued lack, of a gender perspective. In other words, the above mentioned laws were promulgated with every intention of being applied to all citizens regardless of their gender, but in so doing excluded certain aspects of women's lives.

In fact, laws such as the Declaration of the Rights of Man were not intended to include women. These laws were promulgated to deal with man and his activities in the public sphere. Women traditionally have occupied the private sphere and so, it is evident how such laws were not directly intended for women. The United Nations *Universal Declaration of Human Rights* states "All human beings are born free and equal in dignity and rights" but feminists argue that "women's freedom, dignity and equality are persistently compromised by law and by custom in ways that men's are not" (Peters & Wolper, 1995, 2). The UDHR mentions "human beings", an assumption that has come to be questioned by not only feminists but scholars as well (Perry, 1997; Mutua, 2001). The document operates on the assumption that there is an agreed upon understanding of what a "human being" is but this assumption is troubling, especially to women in a number of ways.

Michael Perry suggests that the concept of human rights is composed of two ideas; the first is the claim that every human being is sacred and that as such there are things which should not be done to any human being as well as things which should be done for every human being (Perry, 1997, 462). Perry however, points out that the "human being" claim is not a given; that in fact at certain points in time, certain people have been deemed not fully human such as people of African ancestry, women, Jews or Bosnian Muslims (Perry, 1997, 463). In other words, before determining the sacredness

of human beings, there is a need to ask what the UN definition of a human being is. While numerous UN documents proclaim that the sacredness of a human being is not dependent on variables such as colour, race, creed, language , political opinion, property, birth etc, for purposes of FGM, it is interesting that the "charge" of pseudo-humanity is a double blow to African women.

Having discussed the assumptions on which the UDHR and the UN Charter of Rights operates in so far as "human beings" is concerned, there is a need to explore the public/private dichotomy, which was present in not only the 1793 French Declaration of the Rights of Man but as other scholars suggest (Brems, 1997; Binion, 1995; Engle, 1992; Peters & Wolper, 1995) is also present in the contemporary human rights system. This dichotomy is the crux of how and why women have been excluded from the human rights system. Brems suggests that in order for the human rights catalogue to undergo successful revision, the public/private dichotomy must be breached. This distinction impedes the inclusion of women in the international human rights system by the fact that a lot of the oppression experienced by women is in the private sphere, not the public one. It is from this argument that the slogan "the personal is political"[33] springs from.

The human rights system is a manifestation of the public/private dichotomy when considering not only its Lockean origins but who the system was actually founded to liaise with. Binion suggests that the public/private dichotomy is, to a large extent, a product of classic western liberal thought through which John Locke wanted to deny the legitimacy of the divine rights of the king without posing a challenge to the patriarchal family structure (Binion, 1995, 516).The creation of this dichotomy had a profound effect on women. The introduction of a dichotomy consigned women to the home and away

from the policy-making sphere and in terms of participation, women were denied the opportunity to play a substantial role, if any in the public sphere. As a result, domestic issues were relegated to the private sphere and therefore beyond the range of governmental intervention. More pertinent to FGM, since it has strong sexual connotations, the issue has resided in the private sphere (before the talk made it more public).

A second reason why women's issues were initially not included on the human rights agenda lies in the fact that the human rights system at its inception was intended to deal with nation-states (Sullivan, 1995, 126), yet FGM is not an abuse of women's rights perpetrated by the nation-state per se but a practice carried outside the locale of traditional government. As such, since the majority of abuses against women are by private individuals and not the state, these acts, including female circumcision were initially not considered human rights violations. Female circumcision was considered a cultural practice and as demonstrated in the opening chapter, when the issue was presented to international organizations, they shied away from dealing with the issue on the grounds that as a cultural practice it was therefore beyond the scope of their mandates. Having highlighted how and why women have been excluded from international human rights discourse, the next section explores the revisions that the different "feminisms" want to see.

Numerous feminists advocate for the inclusion of women into mainstream international human rights discourse in various ways: Liberal feminists, who are considered to be the most at ease within the current human rights system are concerned about the equal treatment of men and women. Brems classifies this group into two sub-

groups, the doctrinalists and the institutionalists. While the former looks at women's rights as being violated under specific human rights provisions, the latter look at improving the present institutional structures in order for the enforcement of the human rights of women to be carried out (Brems, 1997, 137-138).

Cultural feminists stress women's difference from men, unlike liberal feminists who stress equality of the sexes. Women then are seen to be more vulnerable to acts of violence than their male counterparts. In recognition of this, cultural feminists advocate for revision of the human rights catalogue to include specifications such as reproductive rights and sexual autonomy. In an effort to bring gender-specific violations under the broad umbrella of human rights and not have them designated as special interest topics comes the slogan, "*women's rights are human rights.*"

Radical feminists, like the cultural feminists are not satisfied with what Brems refers to as the liberal "add women and stir approach" (1995, 138). Unlike the liberal feminists, whose strategy is to work within the existing system, radical and cultural feminists call for a transformation of the entire system. Where the radicals diverge from cultural feminists is that they reject any theories of difference and/or equality as suggested by the cultural feminists and liberal feminists respectively. Their rejection is on the grounds that these theories of equality and/or difference are a product of the patriarchy, a system, which needs to be taken apart. To the radical feminists, the public/private dichotomy serves as a smokescreen for male dominance in spheres that have strategically been kept out of human rights' sight.

Noting the concerns the different strands of feminism have with the international human rights discourse, each strand naturally approaches the body from a different

perspective when offering solutions. This apparent lack of unity among the "feminisms" I argue, does not belie the fact that they are all share the same opinion as far as human rights discourse is concerned, the system while essential, still needs to address women's issues not as "special interest" issues but consider women's rights as human rights. In relegating women's issues to the periphery, the human rights system is seen to create an "other" as far as women are concerned. As peripheral to dominant human rights discourse, a hierarchy of rights and priorities is set by the human rights system. While the liberal feminists call for a re-interpretation of human rights, the cultural and radical feminists call for the creation of "new" women's rights.

On a discursive level, this is of great importance because by calling for re-interpretation and/or creation of new laws, contemporary human rights discourse is developing and becoming rich in content. And in so doing, such power-play in an already established body of knowledge is bound to meet with both resistance and acceptance. Continuing in this spirit of consolidation among the "feminisms", the following section briefly introduces main arguments within human rights discourse and frames these perspectives alongside a consolidated feminist viewpoint and FGM.

Strategic Alliances: The case of Universalism and Positivism

The following section describes the main perspectives within human rights discourse and in so doing show how these perspectives fit in (or not) with the organizational structure of the human rights system. The use of the word "system" alludes to not only a sense of order but the availability of resources as well. It is the first part that I am most concerned about in that having outlined the history of the human

rights system, it is evident that the system is of a bureaucratic nature, which is not necessarily a disadvantage. However as a bureaucratic entity, there are certain limitations to what can and cannot be done in terms of changes. Feminists, on the other hand lack a systematic character to their project and as such follow different procedures in getting their business done. In bringing FGM to the human rights table, we see a meeting of a systematic, bureaucratic entity with a loosely banded but determined group of feminist activists. As a bureaucratic body, the human rights system is bound to refer to principles that drive their day-to-day operations and consider issues presented to them against this template.

From an administrative perspective, it is clear that issues they perceive as falling beyond the scope of their guiding principles are bound to be met with resistance on their part, not only because of the potential administrative nightmare they pose but from an implementation (resource) perspective as well.

The universalist and positivist approaches are perspectives that do not challenge the current guiding principles of the human rights system. In fact, they are neatly aligned with the founding principles of the human rights system. From a discursive perspective, the adherence to the founding guiding principles shows the existence of a dominant discourse, one that is highly resistant to change and one which the cultural relativist stance challenges at its very core.

The principle of universalism in the application of contemporary human rights is drawn from the natural law tradition in Western jurisprudence and maintains that there are a set of standards that all cultures hold to be true. Furthermore and more pertinent to the cultural practice of female circumcision, these standards transcend cultural

differences and serve as "the authority for adopting international human rights" (Brennan, 1989, 371). For example, proponents of this view hold that a document such as the United Nations *Declaration of Human Rights* is applicable to each individual regardless of their culture.

Michael Perry suggests that the concept of human rights is composed of two ideas; the first is the claim that every human being is sacred and that as such there are things which should not be done to any human being as well as things which should be done for every human being (Perry, 1997, 462). He however, points out that the "human being" claim is not a given; that in fact at certain points in time, certain people have been deemed not fully human such as people of African ancestry, women, Jews or Bosnian Muslims (Perry, 1997, 463). While numerous UN documents proclaim that the sacredness of a human being is not dependent on variables such as colour, race, creed, language , political opinion, property, birth etc, for purposes of FGM, it is interesting that the "charge" of pseudo-humanity is a double blow to African women.

The focus of the universalist perspective is on the individual and not on the community to which one belongs. This emphasis is of great significance to the efforts to put a stop to the practice of female circumcision in that it sweeps under the rug one of the rationales offered for the practice -- social cohesion. This rationale is offered by Jomo Kenyatta (1979), among others, in a defense of the practice among his tribe, the Kikuyu of Kenya. The positivist approach to cultural relativism is that despite the fact that various ideologies and values abound, the UN norms that currently exist are evidence of agreement by participating nations in an effort to work towards a common goal. Once a nation has ratified these individual rights, they are obligated to protect these rights

(Brennan, 1989, 372). What is key to the positivist approach is consent by states to uphold these agreements. Nations that have ratified these human rights treaties cannot exempt themselves from the very standards to which they voluntarily subjected themselves. How voluntary is "voluntary", I ask in light of the fact that many nations ratify treaties not because they wholly believe in the principles they are agreeing to uphold but more out of fear of international isolation? If nations ratify treaties on the basis of fearing international isolation, my opinion is that these laws will not be effectively legislated and the abuses will continue to take place while the government blindly looks on.

"Rocking the boat": Cultural Relativism

I have described the cultural relativist perspective in this way to signify how the critiques it aims at the human rights system rock the solid foundation of the system. The cultural relativist perspective challenges the assumption the human rights system, along with the universalist and positivist approaches have embraced and made dominant, that is the notion of universality. With respect to feminists with FGM as their main project, the views held by cultural relativists create a chasm between the two. Alison D. Rewteln, in *International human rights: Universalism vs. relativism* states that the theory of cultural relativism has been greatly misunderstood and "unfairly dismissed not only by its critics but also by its proponents" (Rewteln, 1990, 2870. In presenting a brief history of cultural relativism, it becomes evident that the idea is not a new one; it can be traced back to ancient Greece and Herdotus. The crux of the cultural relativist stance lies in the manner in which evaluations and/or judgments are made.

The individuals largely responsible for the current views on the theory of cultural relativism are Franz Boas, Ruth Benedict and Melville Herskovits. Their views emerged in reaction to nineteenth century cultural evolution which held that human societies progressed from "primitive" to "modern." This view also had a racial component to it; "it goes without saying that people who were thought to be the least cultured were also thought to be the least intelligent and the darkest in pigmentation" (Rewteln, 1990, 288). Cultural relativism therefore holds as its center point the fact that as a result of the diversity in cultures, there are a variety of beliefs and conceptions about the world and how it works. One of the disciplines well-known for its rejection of the universalist claims is anthropology. Ellen Messer (1997) says that this rejection is on two grounds: On an empirical note, individual rights are not considered "self-evident universals." What she means is that cultural relativists argue that the principles arrived at are exemplary of values that are relative; what one culture upholds may not be what another culture upholds. Messer mentions as an example that African and Asian anthropologists reject the notion of individuality suggesting it is as an example of Western ethnocentrism. These cultures are traditionally collectivist, hence Kenyatta's defense of circumcision as a ritual that enhances social cohesion among his people. Instead, anthropologists advocate for a human rights system that is cognizant and respectful of cultural differences especially with regard to indigenous peoples. In addition, anthropologists are wary of a human rights system that "entrusts protections to the very states that are principal abusers" (Messer, 1997, 293). Clearly, unlike the perspectives outlined in the section dealing with the various "feminisms", this leaves no room for negotiation or compromise. It seems to discard the entire human rights system altogether. While this is considered to

be the most radical claim put forward by cultural relativists, Eva Brems (1997, 143) suggests that it is the one least frequently encountered, perhaps because it is so radical in approach that it once again leaves no room for negotiation. Furthermore, what this strong position does is exclude non-Western nations from the international human rights system. As a result of this exclusionary process, an "other" is created in two senses; the first one is clearly seen in the exclusion of non-Western states from the human rights system but also and in a subtle fashion, proponents of this radical view exclude themselves from the on-going dialogue.

As a means of entering into the dialogue on human rights, the strategy adopted by cultural relativists is to either reject a specific right or an interpretation of a particular right. From a discursive point of view, this strategy warrants some exploration because it is tied in with knowledge, power and discourse. While the production of discourse is linked with acceptance and therefore resistance, for the cultural relativists to stick to their most radical perspective would exclude them from the on-going debate on human rights and cultural practices. Exclusion entails a voice forever silenced, a theoretical battle lost.

In the debate on FGM, the cultural practice is a site of contestation for feminists, universalists and cultural relativists. While cultural relativists do agree that human rights abuses exist, they disagree with the classification of FGM as an instance of human rights abuse (Brems, 1997, 148). Furthermore and where the rift widens is around the term "harmful cultural practices", a term used by feminists and international organizations. Cultural relativists disagree with this term, claiming that it is ethnocentric and lacks a nuanced approach to understanding that particular culture's rationale to the practice, framing it within a wider cultural context. Examples of sites around which this battle has

been waged in addition to female circumcision include widow burning in India (*suttee*), arranged marriages, food taboos for women, seclusion and veiling. The cultural relativist suggestion to the revisions of the catalogue of human rights is to make adequate room for variations in cultural practice but as Brems points out, such a suggestion leads to a "reduction in the list of universal human rights to those not contested anywhere, leaving the rest optional so that the human rights lists vary according to culture"(Brems, 1997, 148) not to mention a diffiucult methodological and administrative challenge.

As a result, it is not surprising that on the international human rights front, the feminist movement with FGM as its main project is more welcome than cultural relativists to the human rights table. This is in part due to the fact that the suggestions put forward by the feminist movement regarding human rights and FGM are such that the on-going dialogue is of a constructive, conciliatory and plausible nature. The same cannot be said for the view held by cultural relativists. The ideas put forward by proponents of this perspective require an overhaul of the current international human rights system. While no apparent similarities exist between cultural relativists and feminists due to their divergent view points, a few can still be drawn out. The first similarity is that both views are critical of the human rights system but for different reasons. The feminists come to the table with a gender perspective, while cultural relativists come to it through a cultural lens. Where the two are in agreement is to put back the "human" in "human rights", and eliminate the neutral language that has dominated the discourse of human rights. On a more negative note, they are essentialist in their approach to human rights (gender and culture) agitating for addition into the dominant discourse. Strategically, one can see why an essentialist approach is necessary; this may be the only way to break through and let a

voice be heard but as Brems points out, essentialism serves to isolate one from one's opposite and perceive them as the enemy (Brems, 143). This is true not only in the feminist-cultural relativist debate, but also among the "feminisms."

Having ended with the conclusion that FGM and women's rights have successfully entered the domain of human rights, a brief discussion on how human rights discourse has marked the practice as a violation of human rights is warranted.

FGM: Finally a human rights violation

The terminological shift from "female circumcision" to "female genital mutilation" has been illustrated in the chapter on feminist debates but this shift is not a shift in name only, but a shift in attitude. As proof of the shift in attitude, various UN and human rights documents will be used to show how what was once a cultural practice is now a violation of human rights. Examples of such documents include the *Convention of the Rights of the Child*, the *Convention on the Elimination of All Forms of Discrimination Against Women* (CEDAW), and the UDHR. The extent to which international law has explicitly dealt with FGM fluctuates. Earlier human rights treaties such as *Civil and Political Rights Covenant* as well as the *Economic, Social and Cultural Rights Covenant* do not make explicit reference to FGM (Rahman, Toubia, 2000, 19). CEDAW and the "*Convention of the Rights of the Child*" do make explicit reference to FGM, addressing it as a harmful and discriminatory traditional practice.

In her article, *Female circumcision: Challenges to the practice as a human rights violation* (1985), Kay Boulware-Miller highlights three instances where the practice is an example of a human rights abuse. The practice violates the rights of the child, the right to

sexual and bodily integrity and a right to health. In addition, Boulware-Miller interrogates the problematic of "consent" among women who agree to undergo the procedure stating "while many women do agree to undergo the [procedure] overt or subtle pressures may cause them to feel that they have no effective choice" (1985, 157). Such pressures include economic as well as social concerns such as marriageability, access to natural resources and fear of being ostracized by the community.

Violation of the rights of the child: The 1959 Declaration of the Rights of the Child states that a child must be guaranteed the opportunity to develop physically in a healthy and normal way. Article 19 states: "Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence." Female circumcision violates this principle since quite often, the circumcision process entails tying down the girl, forcing her to display her sexual organs as well as subjecting her to an intensely painful procedure. Boulware-Miller argues that attacking female circumcision on the basis that it violates the right of a child "has more inherent appeal than arguments made on behalf of adult women for children have no well-informed independent judgment" (Boulware-Miller, 1985, 166). Yet to do so suggests that women who allow the procedure to occur are incompetent, abusive mothers who do not love their children. In addition, this approach conflicts with the parents' desire to rear their children in what they consider to be in their interests. There are social, cultural and economic ramifications especially in the rural areas to not being circumcised such as restriction of access to natural resources, becoming a pariah and lack of marriage prospects (Abdalla, 1982).

Violation of the right to sexual and bodily integrity: This argument rests on the idea that female circumcision violates a woman's right to control her own body and is intended to derive her of her sexuality. The CEDAW in Article 1 states: The term "violence against women" means any act of gender-based violence that results in, or is likely to result in physical, sexual or psychological harm or suffering of women...*whether occurring in public or private life.*" [my emphasis] This statement is significant for two reasons; it discards the public/private dichotomy with respect to gender-based violence and more importantly it recognizes the potential harm of some of these practices. In other words, while not all female circumcisions have resulted in physical harm, due to the nature of the practice, there is great potential for harm and the Convention duly takes note of this.

Article 2 (a) clearly defines violence against women as "to encompass but not be limited to ...female genital mutilation and other traditional practices harmful to women." The practice of circumcising women has been rationalized as a way of promoting marital fidelity or preserving virginity (Gruenbaum, 2001, 33,76-101). From a human rights perspective, African and non-African activists consider the practice as a restriction and disfigurement of female anatomy (Boulware-Miller, 1985, 169-170) but this is rebutted by the argument that circumcision is a ritual that awards the recipient with beauty on a visual and tactile level. Clearly, this rebuttal is based on the cultural relativist principle that all cultures are equally valid and should not be judged using the (beauty) standards of another culture. Discursively, the female body is being constructed as being culturally

neutral; no standards of beauty and other culturally specific values are to be attributed to her.

Violation of the right to health: Boulware-Miller considers this the best platform on which to launch the campaign against FGM because it cannot easily be rebutted, which was the case for the preceding two platforms. Article 12 of the *Economic, Social, and Cultural Rights Covenant* states, "The States and Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health." Article 25 of the UDHR states, "Everyone has the right to a standard of living adequate to the health and well-being of himself and of his family." Additional reasons for the potential success of launching this particular platform are seen in that "it can be integrated into preexisting values and social and economic priorities and does not require a reformulation of rights and policies" (Boulware-Miller, 1985, 172). The right to health is embraced on the grounds that sexuality is not openly discussed, which is often perceived as a taboo in the cultures that practice circumcision. On an administrative level, the health approach is more attractive to governments from a policy-making perspective as opposed to "the arguably more elitist rights associated with Western countries such as political rights and fundamental freedoms" (Ibid, 173). But this approach is not as infallible as it seems to be. Technological advances in the field of medicine are bound to be in a position to address many of the potentially harmful conditions.[34] From a discursive perspective, the medicalization of FGM emerges, complexifying the practice even more since it is now placing power into the hands of

male doctors. In medicalizing FGM, the focus on female sexuality shifts to become a medical and health issue.

While the various documents that have been mentioned have been dealt with in brevity, I have chosen to focus on CEDAW since it is one of the documents that explicitly addresses FGM and also tears down the public/private dichotomy that was seen as in impediment to including women's issues as human rights issues.

CEDAW: A double-edged sword

While CEDAW is the document that feminist activists wanted to see emerge to officially classify female circumcision as a human rights violation, as a founding document it was bound to be far from flawless. The following discussion sets out to explore what Oloka-Onyango and Tamale describe as the "promise and the pain" (1995). CEDAW has been referred to as the "international bill of women's rights" by the UN Division for the Advancement of Women. What is significant about this Convention, which came into existence in 1979 and was enforced on September 3, 1981 is that it led to the creation of the United Nations Committee on the Elimination of Discrimination Against Women, which explicitly called states that had signed CEDAW to "undertake more effective measures to eliminate FGM, including educational and health care measures" (Gruenbaum, 2001, 211). CEDAW did what no other convention or resolution had done; it covered topics such as equal employment, educational opportunities, suppression of trafficking in women, rights to health care and also set a minimum age and consent requirement for marriage and more importantly, stated equality of all before the law and women's equal rights to their children. According to the UN Division for the Advancement of Women, as of May, 2001, 168 countries - more than two- thirds of the

members of the United Nations - are party to the Convention and an additional 4 have signed the treaty, binding themselves to do nothing in contravention of its terms. The latest additions in 2001 were Mauritania and the Democratic People's Republic of Korea. Saudi Arabia became a party to the Convention in 2000.[35]

The "pain" that Oloka-Onyango and Tamale allude to includes not only the implementation but operation of CEDAW. While it is the document that catapulted women's rights directly onto the international agenda, its wording was seen to be of such broad nature that it ends up being a series of general principles instead of being a template for social change. This characteristic has prevented some nations from ratifying it since it may clash with domestic law. A case in point is that of Saudi Arabia which lodged a reservation on the grounds that the document clashed with the state's religious and cultural values (Oloka-Onyango, Tamale, 1995). This weakness to the document ironically was the reason that galvanised feminists into approaching the human rights system on the basis that the human rights principles promulgated by the various bodies were too broad and of a neutral nature such that it excluded the particularities of women's issues.

A second "pain" was that unintentionally brought about was a bureaucratization of the international women's rights movements. Oloka-Onyango and Tamale describe this as a "ghettoizing" of women's rights issues within only the international and political arena. As a result, other treaty bodies are limited in the actions they can take and has also led to a "somewhat parallel evolution of women's rights in the United Nations specialized agencies, donor agencies and private actors such as transnational corporations" (Oloka-Onyango, Tamale, 1995, 717). As a result there is a serious lack of

concerted action among the concerned parties; each is tied down to their distinct bureaucratic process.

From the discussion on CEDAW and its impact, it is clear that as a founding document, it had both its strengths and weaknesses. While its promulgation heralded a new era for the status of women's rights, it brought to light unforeseen disadvantages which will serve as a "lessons learned" in the coming revisions. From a discursive point of view, the dynamic nature of discourse is evident in the shifts that have taken place in creating a human rights convention that deals with issues that had previously been excluded. In an effort to bring women's issues to the forefront, a ghettoization among feminists has occurred, a rift that promises to be hard to bridge.

In closing, the overall effect of FGM as a discourse of human rights has added to and refined the human rights discourse to address the particularity of women. In moving from "cultural practice" to "human rights violation", however, the sexual nature of the issue which had dominated feminist debates was overshadowed by the neutrality and reluctance of the human rights system to address the issue as explicitly as some feminists had hoped. In terms of the various approaches to human rights such as universalism/positivism and cultural relativism, an alliance was evident between feminists and universalists, while cultural relativity undermined the founding principles of the human rights system. Through the numerous debates that took place, a new dimension was added to the issue of FGM and in shifting from a loosely bound movement to bureaucratization, the feminist movement was to experience the very impediments they had sought to overcome. The next chapter deals with how all these issues were presented by the media, and how the media functioned as not only a site

through which the debates were played out but also created a distinctive discourse on FGM.

4. THE LENS ON FGM: REFLECTION, REPRESENTATION & RE-PRESENTATION

The relationship between the media and FGM warrants exploration, especially due to the fact that outside of specific knowledge communities, the media is one of the main avenues through which the general public informs itself on issues. The role of the media however, is not to simply reflect reality; it contributes to the body of knowledge it is reflecting and as such becomes a site of discourse. This chapter sets out to map out how FGM has been represented in Western media, seeking to discover in what ways the media has molded and informed current attitudes towards FGM. The audience is by no means passive in its reception; as it makes sense of what is being conveyed as far as FGM is concerned. Audience members are not only interpreting the world, but their place in it (Dahlgren, 1992, 12). This interpretation of the world is significant in that it is what shapes attitudes towards women and FGM in the West and elsewhere in the world.

Media coverage of FGM has been uneven as I mentioned in the opening chapter. There have been times when the issue has received wide coverage while at other times it has not been at the forefront of media coverage. Certain incidents, as well as the agency of key personalities, are what have revived the cooling ashes and rejuvenated the debates. This cycle of rejuvenation is waning and is a testament to the dynamic nature of discourse. While the media may be considered as the site through which feminist debates and human rights debates have been publicly played out, they serve a much more significant role than mere channel or medium. In reflecting the various perspectives on FGM in the two other sites of discourse, the media too becomes a specific site of discourse. In other words, the FGM issue is constructed by the media and this

construction is what this chapter sets out to explore and analyze. Key players who have contributed to the re-construction of FGM will be explored and their influence assessed.

This chapter is set up in two main sections. The first section deals with the troubling issue of representation dealing with the question how does one portray or make present an issue such as FGM? This theoretical background on representation is derived from Gayatri Spivak's work on representation and re-presentation. The second section is based on a series of texts that I examined and from which I drew four broad patterns of how the taboo topic of FGM is talked about. These "texts" include written material such as journalistic pieces from the *New York Times*, academic research and novels on the topic that received popular acclaim as well as media personas such as Oprah Winfrey, Waris Dirie and Alice Walker. The above "texts" have served as primary definers of the FGM issue in not only how they have represented FGM but also in how they have reflected it. As has been illustrated by the above examples, I have extended the term "media" to not only include traditional media such as print, electronic and broadcast but to embrace media personalities as well. As primary definers of the issue, the above texts have in one way or another contributed to the creation of the "other." The driving force of this chapter are the four patters I identified and how each contributes to an "other." They are false consciousness, visceral text, the authority of experience and discourse on the body.

The politics of representation: Making present and Speaking for

The act of representing others is not a neutral one; much goes into choosing who will represent and the manner in which the representation will take place. The fact that there is a decision-making process involved implies that politics and therefore power struggles are at play. With relation to the media and how FGM has been represented to a Western audience, there is a need to question not only who is representing the issue but also factors such as why the issue is being represented and the timing of the representation. Also, the target audience must be identified and accounted for as well as the style and the tone of the representation.

Gayatri Spivak in her work on the subaltern has dealt with the troubling issue of representation in a manner that lends itself well to how the media has reflected/represented FGM to its audience. Using Marxist theory, Spivak identifies two levels of representation: "making present" and "speaking for" (Ganguly, 1992, 62). The latter alludes to an intervention for the good of the "other" while the former alludes to a classification and predication of a subject, both of which are complex. What is central to this chapter in terms of representation is that in an effort to make present the issue of FGM, the celebrities and journalists have ended up speaking on behalf of the victims of the issue; they are speaking on behalf of the silenced circumcised women. In addition, in speaking about the practice of FGM they create a spectacle of the circumcised woman.

Keya Ganguly cautions us that "the very attempt to represent something (or someone) can end up, paradoxically, in a totalization or *mis*representation of that subject" (1992, 61). In the case of the media representation of FGM, I argue that these two actions

take place. It must be made clear that I am not suggesting that the media has intentionally set out to totalize or misrepresent FGM. Instead, the totalization and misrepresentation occur due to certain limitations within which the media operates such as time or keeping in line with the agenda set by producers or media moguls.[36] Ganguly and Spivak explore how representation is erroneously linked to realism when actually the act of representation results in the production of a simulation of events or an object, thus preventing reality from being represented in its totality (Ganguly, 1992, 63). This is reflected in media coverage of FGM in the West. The purpose of representation, whether in the strictest political sense (international delegates) or with relation to the media is to relay a message to a target audience. What is integral is the fact that a particular audience has been designated to receive a particular message and in order for the message to be relayed as efficiently as possible, certain linguistic processes and patterns are relied upon to effectively communicate it. The dissemination of an issue such as FGM cannot be reduced to the "sender-receiver" continuum of communication. Instead, the audience is more complex than merely being the receiver of a particular message; it is "a philosophically and politically motivated evocation of the real human beings in our inquiries" (Ganguly, 1992, 67). My definition of the audience relies on Ganguly's in that she perceives the audience to be the "implied *other* of representation, those absent presences who both inhabit our discourses and are remade by them" (Ganguly, 1992, 67). Having provided a theoretical background to questions of representation and the audience, the second part of this chapter sets out to illustrate and analyze central and structuring four patterns in how the media have spoken about the taboo topic of FGM and how these depictions have informed Western audiences on the practice.

Speaking Taboo: Patterns and implications

In tracking the media discourse, I examined a variety of texts over the past decade. I located and analyzed 29 *New York Times* articles between 1990- 2002. In addition, I examined 8 articles from *Newsweek* between 1993- 1999. Prior to the 1990s, the press coverage on female circumcision was of a purely descriptive nature with no real stories to convey to the public. It was in the 1990s however, that FGM popped up in the legal system of the US and Canada and this, I believe was what fully launched the topic into the public.While on some occasions FGM was in the Letters to the Editor section, it was evident that the issue had been previously presented as a feature, hence the response to the editors. The articles tended to be quite long, especially those concerning cases of FGM that were brought before the legal system. An exhaustive background to the case would be given, probably for the benefit of those who had missed previous coverage and quite often, there were images either of women who had undergone circumcision or the crude tools used for the procedure. It was interesting to note that the tools were usually presented on their own with no one else in the frame. I was curious to see how journalists were dealing with describing a practice that pertains to female genitalia. Other popular texts included Waris Dirie's *Desert Flower* (1998), an excerpt of which was in the June 1999 *Reader's Digest* and Alice Walker and Pratibha Parmar's book, *Warrior Marks: Female Genital Mutilation and the sexual binding of women* (1993). [37]

The first pattern I identify was the notion of false consciousness, which as I pointed out in the opening chapter is a troubling notion to feminists, especially where FGM is concerned. In this chapter however, the focus is not so much on feminists and

how they deal with the false consciousness charge, but how the media has played a role in perpetuating it. The crux of false consciousness is that it dismisses human agency and the question that I sought to answer with respect to this is how have the media dismissed the role of human agency in their coverage of FGM? While most sources construct the "victims" of FGM as also "victims" of false consciousness, I will highlight two examples drawn from two different media. The first is in an article by A. M. Rosenthal in the *New York Times* (September 6, 1994) and Alice Walker's *Warrior Marks: Female Genital Mutilation and the sexual binding of women* (1993).

These two serve as important examples of print media in that the *New York Times* is a popular source of news in the West and *Warrior Marks* was the well-known account/companion to the film, *Warrior Marks*. Rosenthal, in a description of female circumcision states "the specially sad thing was that the sufferers did not really grasp that they were victims. They thought that was the way things had to be for them, being female" (Rosenthal, 1994, A19). In Alice Walker's *Warrior Marks*, Walker recounts a conversation with Mary stating, "I'd asked Mary about sexual pleasure. You know, I said, the removal of sexual organs lessens sexual response and destroys or severely diminishes a woman's enjoyment. Well, she replied, my sex life is perfectly satisfactory, thank you very much! (How would you know, though, I thought)" (Walker, 1993). Rosenthal, in a tone heavily laden with pity, depicts the young girls as unsuspecting, helpless victims. By referring to circumcised females as "victims" Rosenthal is robbing the women of agency in that he does not take into account the strong possibility that they may not perceive themselves to be victims. Furthermore, he does not allow for room to disagree with his view. Walker on the other hand, comes across as an all-knowing authority on female

sexual pleasure, not allowing Mary the space to define her pleasure in her own terms. With Walker's thoughts on female sexual pleasure, the power play and knowledge is brought out in the unbalanced researcher-researched relationship. As a researcher, does Walker know and see more than Mary? In seeking to "make present" Walker has ended up "speaking for" yet in this instance, as opposed to Rosenthal's a dissenting opinion has been voiced then ultimately silenced.

In the case of Rosenthal's article, the fact that it was text from the *New York Times* suggests that FGM was presented as a news item. John Fiske (1992) offers a basic definition of news, stating that any definition of news whether it is official or tabloid must include an "informational function" (1992, 49). In fulfilling this "informational function" the Rosenthal news article is seen to be contributing to the informative discourse on FGM. Fiske further suggests that the action of informing is not a simple process; it entails a political process. As he states, "to inform is simultaneously to circulate knowledge and to give form to something; and what information 'forms' is both reality and identity" (Fiske, 1992, 49).

The circulation of knowledge entails the existence of an audience; or a "believing subject" (Fiske, 1992, 49). The word "subject" alludes to a power struggle; one in control and one controlled, an "other" so to speak. The "other" in this case emerges out of the audience being on the margin of knowledge and thus relies on a power figure to provide this information. In addition "to give form to something" alludes to the creation of something new or an addition to something already in existence. Therefore the article and the paper itself are disseminating a particular knowledge on FGM, a view that will likely be embraced either in whole or in part by the audience of the *New York Times*,

particularly given the likely absence of other knowledges with which to evaluate its truth claims.

Alice Walker's book also shares similarities with the analysis on Rosenthal's article. Both texts are grounded in fact, Rosenthal is referring to young girls who have been circumcised and Walker's book is an account of her trip to Africa in preparation for the film, *Warrior Marks*. The fact that these two accounts are grounded in fact and not fiction is more reason to create what Fiske has aptly described as the "believing subject." Furthermore and more problematic is that as factual accounts, the discourse produced by Rosenthal and Walker is less likely to be questioned. The possibility of "other" stories is not opened up by the factual discourse. In the case of Rosenthal, the *New York Times* is a well established paper that enjoys a wide readership. Walker too, has made a name for herself; her literary works have received accolades. But there is need to go below the surface; to interrogate what has been taken for granted. There is a need to interrogate the assumptions presented in not only these texts but others and seek to uncover what is not being said, who is not speaking.

Following in the trajectory of how Rosenthal and Walker create the victim as "other" through reproducing false consciousness, this next section explores different ways in which the above two writers have created an "other" through their texts. In looking at the discourse disseminated by the authors, the first instance where an "other" is identified is in terms of the framework from which they are writing. What I am arguing is that both authors are writing using their cultural background as the lens through which they view the practice of female circumcision. In other words the discourse on the body is produced through a specific (similar) cultural lens, one that differs from the cultural lens

of the societies that practice female circumcision. The views held on the body in each "society" are long-held views but in interrogating the nature of "society" does it suggest the patriarchy and its stranglehold on women or does it include all members of a particular community, whether urban or rural? The two authors' views are essentialist and suffocating in the sense that they leave no room for dissension and agency on the part of not only the audience but the subjects of research, creating a *silenced* "other." The audience is seen as a silenced "other" in terms of their ignorance in the matter and the fact that they are naturally relying on the two authors' knowledge to inform their opinions. The societies and the young girls in particular are considered "other" in terms of their location (West/Third World), age, ethnicity and more significantly as subjects of study or the Western gaze.

The second broad pattern I identify in how FGM is spoken about in the mass media is through what I have call the "visceral text." What I mean is that where there were no illustrations the words used to describe the procedure left the reader with no doubt on the trauma experienced. The use of graphic terms to describe FGM in not only newspaper articles but academic articles as well is clearly a strategy to bring the issue to the forefront of the public agenda. If it cannot be shown in pictures, let it be "shown" through words. The use of visceral text, I argue, creates a "gaze"; through reading the graphic text, the audience is given the opportunity to peer into a strange yet fascinating cultural practice. While the adage "a picture is worth a thousand words" rings true in many instances, for the case of FGM, where illustrations are in scanty supply, the word becomes mightier than the picture. On a discursive level, the fact that certain descriptions

of the practice appear not only in popular media but on a number of occasions as well is instrumental in shaping the construction of FGM in the media.

Prior to delving into examples of visceral text, a brief mention on the "gaze" must be offered. The "gaze" occurs and continues to occur on a number of levels. With respect to women, Laura Mulvey (1975) illustrates how the cinema has created woman to be the object of the man's gaze. Similarly Lutz and Collins (1993) illustrate how reading *National Geographic* offers readers the opportunity to gaze into exotic, foreign cultures and juxtapose them with their own. In the same way, the written texts on FGM offer a window for audiences to peer into this complex practice.

For example in the Letters section of the Atlantic edition of *Newsweek* (August 16, 1999), entitled "A Horrifying Ritual" Mukami Mbugua wrote in response to an earlier article carried by the periodical called "The Ritual of Pain" which apparently had "a picture of a woman lying on the ground undergoing female genital mutilation with old women bending over the young woman and the disgusting stares from the bystanders, many of whom [were] men" (Mbugua, 1999, 6). What is interesting about this response is the fact that the woman was seen to be undergoing female genital mutilation, not circumcision, suggesting that "The Ritual of Pain" may have described the practice in these terms, referring to it in human rights abuse language or that Mbugua had already designated it as mutilation and not circumcision. Whatever the case, it is clear from the rest of Mbugua's letter how abhorrent he finds the practice. The word "undergoing" struck me since it alludes to a powerlessness of sorts. It is often used in medical discourse when a person is being operated on; the patient is powerless due to the fact that an anesthetic has been administered to them. The theme of the victim seems to arise here

once again through the use of words like "disgusting", "horrifying" and the notion of the men "looking."

A difference response to the same article was sent in by The Global Fund for Women (Palo Alto, California), where Laila Macharia and Leanne Grossman expressed their disappointment at *Newsweek's* "sensationalistic and voyeuristic photo on FGM in Uganda...we were disturbed by the picture of a girl lying on her back with her legs apart." The similarity Mbugua and these women share is that they were affected by the graphic images depicted. However, the reasons for the disappointment are different. While Mbugua was affected by the images and suggested that the "horror is something that should send all of us reeling into action" (Mbugua, 1999, 6), the two women attack *Newsweek* from a very significant perspective. They suggest that "by providing so little supporting information, such pictures fail to educate your readers about the cultural significance of such traditions as rites of passage, and the progressive efforts of community-based organizations in African countries to eradicate the practice and develop alternative rituals" (Macharia & Grossman, 1999, 18). This depiction of only this aspect of female circumcision shows how totalization and misrepresentation have taken place. The misrepresentation of the issue is evident in the fact that Mbugua is of the belief that no action has taken place while Macharia and Grossman suggest that action *has* taken place; it just has not received coverage.

In examining other articles and scholarly works, one significant thing that I noticed was that while female genitalia in and of itself is a scientific term, repeated use of it has resulted in its being appropriated as a mainstream term. As such I came across very few definitions of female genitalia or the act of female circumcision that did not already

operate on the assumption that the reader was familiar with the terms. For example, the various classifications of female circumcision outlined in the first chapter mention the "clitoris", "vulva", "labia minora", and "labia majora" in so casual a nature suggesting that the reader must be familiar with the terms. If they are not, does this imply ignorance on their part? One "new" term, which Dorkenoo seems to suggest should be widely understood is "nymphectomy" (Dorkenoo, 1994, 1). Perhaps the failure to define certain terms is a testament to how talking and writing about female circumcision is still somewhat taboo. By operating on the assumption that the reader is aware of what these terms refer to, the writer is absolved of providing comprehensive definitions to what is already graphic by virtue of the act as well as the location of the act.

What is the outcome of the use of visceral text? What comes after the gut response? As mentioned earlier, the graphic text works with the graphic image, but there is more to it than just voyeurism. By mentioning the various parts that constitute female genitalia, I argue that once again, the female body is being cut up; it is approached from the genitalia and thus results in the presentation of a female body without agency. The fact that the female body is presented in part(s) and not in whole alludes to Sut Jhally's video, *Dreamworlds* (1990, 1995) where he shows the representations of women in popular culture and advertising images. While the objectification of women's bodies is shown visually the same objectification occurs through the written text on female circumcision and the female body.

A third pattern which I identify in examining the various media representations of FGM is the authority of experience. In this case the texts I use as exemplary are Waris Dirie's *Desert Flower* (1998) and Alice Walker's *Possessing the Secret of Joy* (1992). An

excerpt of Dirie's book, *Desert Flower: The extraordinary journey of a desert nomad* (1998) was included in the June 1999 *Reader's Digest.* The story had the necessary ingredients to arouse a great deal of interest, a real-life "rags-to-riches" tale that is hard to find. There was a villain, a heroine and a savior. Kay Dusheck in reviewing the book summarizes it as a story about someone "victimized but not a victim...an excellent selection for public libraries" (Dusheck, 1998, 96). More pertinent to discourse analysis is exploring the significance of this book. First and foremost its subject matter contributed to the growing body of discourse on female circumcision but secondly and on a deeper level, its narrative structure and the fact that it was based on experience lent a great deal of credibility and legitimacy to the already existing body of knowledge on FGM, especially to the practice of infibulation. Bauer and Gaskell define narrative as bringing "to light new elements of the situations and of the characters that previously were implicit. In so doing they call for thinking or for action or for both" (2000, 360). This definition encapsulates not only the effect of Dirie's account but the campaign to abolish FGM. Dirie's appointment as special Ambassador to the UN in the campaign against FGM led credence to the anti-FGM campaign and as such the relationship between narrative and reality and representation requires some exploration. While I am not suggesting that Dirie's account contains inaccuracies, there is a need to interrogate her narrative in that it must be emphasized that it is a particular interpretation of her world and not the world in general (Jovchelovitch & Bauer, 2000, 72).

Despite the above argument, however, the media discourse depicts Waris Dirie as the embodiment of female circumcision, or specifically in her case, infibulation. On a discursive level, her case serves to show how once credibility through experience is

established, it takes a great deal to question that experience, that truth. Foucault argues that discourse produces truths. In Dirie's case, her experience is in a sense a production of "truth" and its permanence as discourse is through the publication of her account. Although Dirie's account is truth, it is merely *a* truth, suggesting that there are other "truths" in existence.

A sharp contrast to Waris Dirie on a number of levels, is Alice Walker and her book, *Possessing the Secret of Joy* (1992). While Dirie's account of female circumcision is based on personal experience, Walker's book, which also deals with the same subject matter, is based on fiction. In spite of this, Laura Shapiro, on reviewing the novel for *Newsweek* describes it as "a true rarity [it] is a novel strengthened, not strangled by its political mission" (Shapiro, 1992, 57). Simon Ndombele echoes Shapiro's sentiments and mentions how the book is "long overdue" and that "it sometimes takes a well-known personality to bring things to a global perspective" (Ndombele, 1993, 476). On a deeper level, the notions of location and identity play a significant role in approaching the two books. As a native Somalian, Waris seems to have the silent authority to speak on the issue as a true "insider" being from a continent where the practice prevails, as well as having gone through the procedure. Walker, on the other hand, much as she is a well known and established African-American author remains an "outsider" on account of using fiction and thereby lacking the credibility/infallibility that a non-fictitious tale enjoys but more so is the fact that she is an "outsider" by virtue of her ethnicity. Her insider/outsider status as an African-American-Indian may be a unique position to occupy as suggested by Collins (1999) in her discussion on the social significance of Black feminist thought. As insider/outsider, Collins suggests that there are advantages to

occupying this liminal position. These contestations over identity, race and location with respect to the FGM debate are dealt with in greater depth in the chapter on feminist debates.

The comparison between Waris Dirie and Alice Walker is not so much on the two women per se but revolves around the symbolic role they play in the discourses in and around them. Both of them served as catalysts to the discussion and debate on FGM, but in different ways. The above discussion has highlighted the role that experience can play in determining credibility in media discourse. While Waris Dirie is created as an embodiment of FGM, Alice Walker is figured as the North American perspective on the issue. The difference in ethnicity creates an "other" in that as representatives of different localities and geographies, the perspectives presented by Dirie and Walker differ and have implications for how the discourse they have produced is engaged with. Following in the same trend of exploring various ways in which media discourse has created an "other", the final section deals with Oprah Winfrey and the *Oprah* show.

Oprah Winfrey, touted as one of the most successful talk-show hosts in the history of talk-shows covered the topic of FGM in September 1995 and again in December 2001. These two shows differed in a number of ways. There was a clear shift in approach: from spectacle of the other to a manageable social problem. The shift was from presenting horror to infotainment. While the earlier show focused on the horrific nature of the practice, the later show framed female circumcision within the broad theme of violence against women. I suggest that this shift in representing the practice was a result of having successfully brought the issue to public consciousness through its graphic nature. After eliciting a gut response, the public was in a position to debate the issue.

In 1995, Oprah's guests were two survivors of FGM, Soraya Mire, Mimi Ramsey and an FGM activist, Dr. Nahid Toubia. Oprah set the mood for her audience by highlighting the fact that the circumcision of women and girls was done without the administration of anesthesia and with the crudest of tools. In analyzing the "line up" of guests, it is clear that Soraya and Mimi were present as embodiments of the practice while Dr. Toubia was there in her capacity as a doctor familiar with female circumcision but also as a woman who came from a culture where the most severe form of circumcision was practiced (infibulation). While Mimi and Soraya were to provide first hand accounts of their experience with circumcision and add to the experiential discourse on FGM, Dr. Toubia was there from a medical perspective and contributed to this aspect of the discourse on FGM.

With the above three guests, binaries are created on two levels. First and foremost is the guest/audience binary, an overt binary which alludes to a "gaze" being directed at the guests. Through this binary, the audience is given the opportunity to gaze with horror and fascination at a foreign practice. Secondly and on a more subtle level and aligned with post-colonialism is the First World/Third World binary. Both binaries however, hint at the politics of power at play. *Oprah* falls into the category of infotainment, which Orlik defines as the packaging of "*soft news* items in a way calculated to maximize these items' perceived entertainment value to viewers" (Orlik, 2001, 262). The "soft news" Orlik is referring to is described by NBC News producer, Brian Holey as "items of interest but which have less direct affect on you than *hard* news which is something you should know because it affects your world" (Orlik, 2001, 262). These two definitions hold great significance as far as the airing of FGM on *Oprah* is concerned. Dealing first with the

notion of "soft news" and letting the description speak to FGM, the topic, from the start was introduced in an "Us vs. Them" rhetoric, our world practices vs. their world practices. This, in turn, set the stage for horror and repulsion once the procedure was communicated to the audience via the two women who have survived the ordeal. But after eliciting a gut response, what next?

If as Brian Holey suggests, hard news is news which you should know about since it directly affects your world, what does that say to FGM? On the contrary, I argue that FGM came across as both "hard" and "soft" news to Oprah's audience especially the show aired in December 2001. The issue presented itself as "hard" news in that it pertained to the world from a female perspective and therefore directly affected them on that level; it was presented as an example of the physical abuse of women under the attention-getting caption, "A Scar that Never Heals". Unlike the 1995 show, the December 2001 one differed in strategy; it sought to unify women in their diversity as women as well as in the abuses they suffer. Alongside FGM were topics such as acid disfigurement and life under the Taliban.

On a discursive level, this shift from presenting the issue as an isolated practice as was done in 1995 to framing it as one of the many examples of the repression of women also reflects a shift in strategy towards curbing the practice. It is evidence of the dynamic nature of not only the practice, but discourse on the practice. A discursive shift necessitated a shift in strategy and activists were quick to recognize that. The 1995 show was high on sensationalism as seen by the graphic descriptions of the practice as told by Soraya and Mimi and supported with Dr. Toubia's medical expertise and therefore did not offer much as far as a viable solution was concerned. All it did was present the issue.

The sensational nature of the show, however, is quite strategic in that to a large extent, it is through the focus on the shocking nature of the practice that women were stirred up in North America to get involved in eradicating it. Following the insider/outsider argument that was explored in the chapter on feminist debates, Oprah Winfrey, the person and not the show, provides another facet to the insider/outsider argument, especially with respect to African-Americans. As a prominent African-American entertainer, she sets a feminist agenda albeit a "soft" one. Her "outsider" status is seen in the fact that she operates and entertains outside the official feminist parameters yet she is an "insider" by virtue of being Black.

In a discussion on sensationalism, Orlik refers to two definitions of this characteristic, often associated with tabloids. The first one is William Adams' which describes sensationalism as coverage of "crime, violence, natural disasters, accidents and fires, along with amusing, heartwarming, shocking or curious vignettes about people" (Orlik, 2001, 263). This definition does not offer much in the interpretation of FGM aside from presenting it as an example of a "shocking and "curious" practice. Another definition is offered by Professors Hofstetter and Dozier, who define sensationalism on two levels, suggesting it is "coverage of unexpected events" and secondly "these events have some inherent entertainment value" (Orlik, 2001, 263). A comprehensive definition of sensationalism with FGM in mind would be a combination of the two. I must add, however, that this "definition" has a major flaw; it cannot be applied on a broad basis. What I mean by this is that the word "unexpected" is a culturally specific term. In other words, to define sensationalism with FGM in mind in such terms to a culture that upheld

the practice would be met with resistance for the simple reason that the culture does not consider the practice "unexpected."

Returning to the *Oprah* show, aside from providing infotainment[38], what other purpose did the exposure as well as the nature of the exposure on FGM serve? Clearly the nature of the practice of female circumcision and its subsequent exposure displaced other stories that may have been initially perceived as significant. Grabe, Zhou and Barnett (2001), in discussing the role of sensational journalism in tabloids highlight a point which I think speaks to the airing of FGM on the *Oprah* show, which incidentally is not categorized as a tabloid show. The above authors suggest that sensationalism serves to maintain a "society's commonly shared notions of decency and morality by publicly showcasing what is unacceptable..." (Orlik, 2001, 262). Clearly, the authors are aware of how culturally specific terms such as "decency", "morality" and "unacceptable" are but what is important is that these are *shared* values of a society. These terms allude to ethnocentrism, giving the unsuspecting audience not only the power but the authority to judge other practices. By rallying together in shared shock and disbelief at this "unacceptable" practice, the audience is in a position to forget about the indecent, immoral and unacceptable events occurring in their nation.

Representing the female body

The patterns identified in media discourse the preceding sections all work to construct the female body. While I have illustrated various ways in which FGM has been covered in the media, it is appropriate to close this chapter with an overview of how the female body in general has been dealt with and talked about. To illustrate the gradual shift in attitude towards women and their bodies, I shall borrow from the works of Rose

Weitz (1998) and Emily Martin (1987). Rose Weitz provides an historical overview of how attitudes towards women's bodies have changed over time. She illustrates how woman has been perceived as man's property and later as "misbegotten men" by virtue of not producing enough heat (Weitz, 1998, 3). In this case, the standard of humanity is the male form; anything other than that is less than human.

This hierarchy in humanity and the subsequent construction of woman as pseudo-human is echoed by Emily Martin but with slight variation. In her chapter entitled *Medical metaphors of women's bodies: Menstruation and menopause*, she suggests that from the era of ancient Greece until the late eighteenth century, it "was an accepted notion in medical literature...that male and female bodies were structurally similar. As Nemesius, bishop of Emesa, Syria, in the fourth century, put it, 'women have the same genitals as men, except that theirs are inside the body and not outside it'" (Martin, 1987, 27). The word "except" is significant in that it alludes to inequality of the sexes, an idea that would continue to develop through time, one that would shape the feminist movement. These biological differences however slight they were alleged to be, are fragmentations nonetheless that were translated into the public and private spheres and were problematic to an issue such as FGM, which was considered to be part of the private sphere, hence the unwillingness of international organizations to involve themselves in the matter.

Feminists are still fighting against the idea that a woman's mind and body are inferior to that of a man's. In showing examples such as woman as property, misbegotten man, insufficient producer of heat, as weak yet dangerous to man, I illustrate how the discourse on women has not differed in kind as it has in degree. The media plays an

integral role in this perpetuation of the misrepresentation of women in the style they choose to deliver their coverage. However, it is pertinent to consider the positive developments that have occurred between the start of the second wave of the feminist movement in the second half of the 1960s and the present day. Despite the fact that there are various strands of "feminisms", what serves as a unifying factor to the feminist movement is the fact that all these strands, with their unique viewpoints and solutions are striving to challenge the currently accepted ideas of women and their bodies.

In conclusion this chapter sets out to "make present" the manner in which FGM and the female body have been dealt with in the media. Clearly in terms of the language used, writers of both journalistic and academic articles operate on certain assumptions as far as definitions and their audiences are concerned. The visceral text has served to not only highlight the issue; in fact it speaks in a more powerful manner than the visual depictions and has further objectified the woman's body. In order to clearly "make present" the issue of FGM, there is a need to adopt a more complex approach in not only talking about the issue but also in writing it since both speech and written text are constituents of discourse. The notion of representation within the media continues to be troubling; the distinction between trying to present an issue and speaking for the issue continues to be a blurred one but in order to understand the complexities involved in FGM, it is necessary that the issue be "made present" without misrepresenting it or "speaking for" it.

5. Conclusion

This thesis has set out to show how a taboo topic such as FGM is no longer taboo by virtue of the fact that it is being talked about. How the topic is classified as taboo is that in dealing directly with female genitalia and sexuality, it seems to break moral codes and is not typically what public discourse is composed of. In showing *who* has been talking about it and *how* they have talked about it however, a niche has been created for it in public discourse. But as illustrated, FGM is talked about in different ways by the different sites so where is the issue located in contemporary Western consciousness? What kind of niche has been carved out for the issue? To address these questions, there is a need to understand the different ways in which FGM has been perceived by actors such as feminists, the international human rights system and the media. How the topic has been talked about will, to a significant extent, influence the efforts to alter or altogether eradicate the practice.

In understanding how Western society has made sense of FGM, the issue has become politicized in the West and examples of this politicization are evident in legislation as well as foreign policy, especially regarding aid. In Canada for example, Bill C-126, 273.3(1) protects landed immigrants and Canadian citizens from being removed from the country for purposes of being subjected to female genital mutilation. In the US, the Female Genital Mutilation Act of 1995 (which took effect on March 30, 1997) states that anyone who circumcises, excises or infibulates the labia majora and/or labia minora and the clitoris of anyone below the age of 18 can be imprisoned for up to five years. [39]

Furthermore, the Federal Prohibition of Female Genital Mutilation strongly encourages US representatives to International Financial Institutions (IFIs) such as the World Bank and the International Monetary Fund among others, to oppose loans to

nations where FGM is prevalent or where there are no anti-FGM education programmes in place. The provision of aid to developing nations based on their meeting certain criteria as dictated by donor countries raises the troubling notion of neo-colonialism. With regard to FGM however, legislation such as the *Female Genital Mutilation Act* places the issue at the forefront of the US' donor policies but as footnoted in the chapter on feminist debates, is FGM the most significant problem facing developing countries? What about hunger and disease, where do they fit on this "list?"

Designating FGM as a factor that determines whether or not a country will be the recipient of loans and/or aid is a troubling issue. Not only does it resurrect the shadows of colonialism but it also places human suffering on a hierarchy. Who has the power to decide what is or is not a significant need? Continuing along the trajectory of conditional aid, how does this affect Western perception of the Developing World? It seems to reproduce the troubling binary opposition of saviour/victim. While legislating against the practice is somewhat effective, this too, like other "purist" solutions geared at dealing with FGM, has its limitations. Such a purist solution, I argue, lacks the complex nuanced approach that has been advocated for in this thesis.

Whether this politicization of FGM has clarified the issue for the Western audience is another matter altogether. The issue now intrinsically linked with the politics of development and the Third World perpetuates the West/ "Other" binary opposition and crucial aspects that would contribute to a better understanding the issue are drowned in the political nature of the issue. When a new actor such as the legislative arm of governments for example, enters the dialogue on FGM, the issue gains a new layer in complexity due to the perspective that the actor adopts and the framework within which

the actor operates. With the feminists, the term "female circumcision" seemed to erroneously equate the practice of circumcision to male circumcision, which at the time was thought to be harmless. In so doing, the unique experience of the woman was made absent; instead women were referred to in reference to men. The terminological and attitudinal shift to "Female Genital Mutilation" not only put "woman" onto the agenda, by shedding "circumcision" but it strongly proposed that abuses to and of women were human rights abuses and not "special issues." In other words, woman was human. Within the international human rights system, the bureaucratic system stripped FGM of its sexual nature, referring to the issue from a more neutral perspective and using neutral terms to describe it. The media, on the other hand tended to make absent the complex socio-cultural and economic factors that explained the practice and focused on the horror of the procedure itself in the name of infotainment.

As a result, FGM, due to the variety of actors involved and the nature of the debates that have taken place becomes a completely fractured issue in that each actor has contributed to yet another layer of complexity to the issue. In order to deal with the issue, each layer must be uncovered and talked about in a complex manner and not simply be reduced to just a human rights issue, a condition to giving aid or an example of "health damaging behavior" as USAID describes it.[40] This is the nuanced approach that becomes a theme throughout the preceding chapters.

Clearly there is an effort by the different knowledge communities to not only explore FGM but understand it in its most complex form but the issue continues to be trapped in frames such as varying time periods, different actors and therefore different perspectives. With regard to the campaign to abolish or change the practice, I believe the

greater promise lies with the feminist project. While it too is not perfect, it is not bogged down by factors such as industrial constraints, which the media face or the bureaucratization and inherent link to development and the politics of development which the human right system finds itself faced with. The loosely bound yet diverse character of the feminist movement awards it the flexibility of liaising with a variety of actors such as indigenous communities, Non-Governmental Organisations (NGOs) and states if need be. In closing, to talk the taboo of FGM one must be willing to realize that the "talk" is far from over. In addition it requires concerned actors and stakeholders – academic and non-academic to not only engage in the complex dialogue it requires but also continuously critique the nature of the talk. It is the *how* of the talk that influences any action taken towards the issue.

ENDNOTES

[1] The preferred term of choice for feminists and most international organizations such as the UN and its agencies is FGM. For purposes of this paper, I use female circumcision and FGM interchangeably.
[2] Martha Nussbaum (1999, 125) suggests that FGM is not practiced in Pakistan.
[3] These categories are derived from Efua Dorkenoo's *Cutting the Rose Female Genital Mutilation: The Practice and its Prevention* (1994:5-8). In consulting the *Hosken Report* (1980), I found that the majority of definitions in the literature I accessed, especially on infibulation were derived partially or wholly from the *Report.*
[4] WHO Fact Sheet No. 241, June 2000.
[5] It has been interesting to note the reactions of people when they inquire about my research and find out what it is about. The reactions range from curiosity or agreement to outright discomfort.
[6] Janice Boddy further explains that the preference for infibulation as opposed to *sunna* circumcision as beautiful is also translated into the act of laughing or smiling. These actions are considered inappropriate for women due to the fact that openings (genital or facial) on women are considered undignified.
[7] Scilla McLean, *Female Circumcision, Excision and Infibulation: The Facts and Proposals for Change.* Minority Rights Group Report No. 47, 1980.
[8] Report of the United Nations Seminar on *Traditional Practices Affecting the Health of Women and Children*, ECOSOC, Commission on Human Rights, June 12, 1991.
[9] Held in Addis Ababa, Ethiopia from April 6-10, 1987.
[10] Keya Ganguly (1992) Accounting for Others: Feminism and representation. In Lana Rakow *Women making meaning: New feminist directions in communication* NY: Routledge. Pp 60-79.
[11] Western feminists, in this particular case, also includes African-American women. "Western", in this case implies a shared mindset. I will also explore the center-periphery relationship that exists between these two groups- one that is founded on race (White/Black) and therefore posits African American feminists as being "closer" to their African counterparts than Caucasian ones. This position of African-American ambivalence is further explored in the chapter on feminist debates.
[12] Alice Walker quoted in David Kaplan et al., Is it Torture or Tradition*? Newsweek* Dec.20th, 1993 p.124.
[13] Hope Lewis (1995). Between Irua and Female Genital Mutilation: Feminist Human Rights Discourse and the Cultural Divide. *Harvard Human Rights Journal* 8:1-55. The quote is taken from page 7.
[14] Feminism and Women's Autonomy: The Challenge of Female Genital Cutting. *Metaphilosophy* 31: 469-491.
[15] See Marie-Angelique Savanne (1979). Why We are Against the International Campaign. *International Child Welfare Review* 37. This was written in protest to Western cultural insensitivity towards the practice and the f act that African women have more significant problems like hunger and survival.
[16] See Leslye Amede Obiora (2000) Bridges and Barricades: Rethinking Polemics and Intransigence in the Campaign against Female Circumcision. In A. Wing (Ed.). *Global Critical Race Feminism: An International Reader* Obiora suggest that one possible solution is to clinicalize circumcision.
[17] Nahid Toubia (1995). *Female Genital Mutilation: A Call for Global Action* (2nd Ed.). New York: RAINBO. Pg 9.
[18] A paper entitled Listening to Africa, Misunderstanding and misinterpreting Africa: Reformist Western Feminist Evangelism on African Women presented at the *42nd Annual Meeting of the African Studies Association* in Pennsylvania, PA. November 11-14, 1999.
[19] www.rho.org/html/hthps.htm
[20] Held in Lausanne, Switzerland between August 9-11, 1996.
[21] A. Rahman & N. Toubia (2000). *Female Genital Mutilation: A Guide to laws and policies worldwide.* Pg.4.
[22] R.C. Smith (1992). Female circumcision: Bringing women's perspectives into the international debate. *Southern California Law Review* 7: 2449-2473.
[23] Immediate complications include pain, bleeding, shock, infection while long term complications (of Types II and III) include urinary tract infection, pelvic infection, fistulae, pain during intercourse. Derived from WHO Female Genital Mutilation Fact Sheet No. 241, June 2000 at http://www.who.int/inf-fs/en/fact241.html
[24] A great deal of work has been done by NOHARM (National Organization to Halt the Abuse and Routine Mutilation of Males).

[25] See Denniston & Milos, 1997; Abdalla 1982; Rahman & Toubia, 2000; Hosken, 1979.
[26] See Obiora, 2000.
[27] See Dorkenoo,1994; Rahman & Toubia, 2000
[28] Okome defines "western feminists" as a "mind set that has come to be shared worldwide due to the hegemony of the West in scholarship and in the production of knowledge." This modification allows her to label some African scholars as Western feminists in their approaches.
[29] Report of the UN Seminar on *Traditional practices affecting the health of women and children.* ECOSOC, Commission on Human Rights, June 12, 1981.
[30] This idea will be followed up in more detail in the chapter on Media, dealing with Alice Walker's *Warrior Marks* (1993).
[31] UN Division for the Advancement of Women on http://www.un.org/womenwatch/daw/cedaw/
[32] The following states abstained: Byelorussian S.S.R., Czechoslovakia, Poland, Saudi Arabia, Ukrainian S.S.R., South Africa and Yugoslavia.
[33] See Oloka-Onyango, J & Tamale, S. (1995). "The personal is political," or Why women's rights are indeed human rights: An African perspective on international feminism. *Human Rights Quarterly* 17.4:691-731.
[34] Based on the fact that the article was written in 1985, Boulware-Miller makes no mention of the medicalization of female circumcision which later became an issue..
[35] Information from the UN Division for the Advancement of Women at http://www.un.org/womanwatch/daw/cedaw/states.htm
[36] For purposes of this study, a comprehensive overview outlining the various factors that affect media production will not be provided.
[37] This book is a companion to Alice Walker and Pratibha Parmar's documentary film on FGM also entitled *Warrior Marks*.
[38] I do not use the term in a condescending manner but in its capacity as a television genre.
[39]Derived from http://www.fgmnetwork.org/legisl/interntl/overseas.html
[40] Derived from http://www.usasid.gov/press/releases/2001/pr/011203_2.html

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