

# Female circumcision

## Universal prohibition or uncritical acceptance: somewhere in between?

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**Abstract.** The essay provides insights to further emphasize the importance of an alternative conceptualization of female circumcision that could overcome the still unsolved conundrum of a legislative ban that potentially perpetuates gender inequality. While law condemns the practice as a form of violence against women, the number of circumcisions does not drastically decline. In addition, we witness several women and girls wanting to undergo female circumcision: a phenomenon that some activists (and some scholars) attempt to portray in the wider frame of the right to self-determination and cultural identity. Hence, questions arise as to what alternatives can be recommended other than universal prohibition or uncritical acceptance.

**Keywords.** Female circumcision; women's rights; gender dimension and culture; critical anthropology of human rights; interdisciplinarity.

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### Moving beyond the current situation

International conventions and European law aim at eradicating female circumcision (henceforward FC)<sup>1</sup>. In fulfilling such obligations, international, European and national laws, as well as NGOs, condemn the practice as a form of violence against women. However, the ban is not fully implemented in Europe and cuttings are often performed clandestinely (Johnsdotter, Mestre 2017; Leye, Sabbe 2009). In addition, anthropological scholarship (Leonard 2000; Ahmadu 2000; 2007), judicial proceedings<sup>2</sup> and especially

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<sup>1</sup> My choice of using the option “female circumcision” results from ordinary conversations I have had with African circumcised women since 2005 (when I carried out my first fieldwork in Kenya) to date (in Italy). Although aware of the widespread use of “mutilation”, nearly all of them – either victims or consenting parties – have always translated the name of the practice from their native language into English with “circumcision”. I deem it appropriate to comply with this inclination that, simultaneously, mitigates the value judgment implied in the term “mutilation” which reflects discourses on the practice mainly produced by the approach of neoliberal feminism of the global North.

<sup>2</sup> Kenya, Constitutional Petition 8 of 2017.

some African feminist actions reveal that there are women and girls who claim the right to undergo FC on the basis of their emic representations of culture or religion. Militant feminists (Fumbai Ahmadou, Naasu Fofanah, the Somali Ayan Omar, Maseray Sesay among the most visible) translate such claims, in human rights terms, as a right to self-determination and cultural identity to be enjoyed on equal footing with circumcision for men and genital cosmetic surgery for western(ized) women, i.e. legally performed “designer vaginas” and reductions of labial and clitoral tissue for aesthetic purposes.

The divergence between (i) institutional perspectives against what is referred to as “female genital mutilations” and (ii) non-mainstream voices in favour of FC with their political claims for subjectivity, reveals a potential uneven protection of fundamental same rank rights and the lack of a substantial implementation of intra and inter gender equality. Questions therefore arise as to whether bans or even simple discouragement are the only desirable and most effective solutions to the practice.

Studies on FC has unfolded through major phases. From the 1940s to the 1980s, the human rights perspective was developed primarily by legal scholars, political scientists and western activists (Messer 1993) whose contributions were crucial in generating censure of the practice where it is performed on girls or unwilling women. However, the voice of those women who wanted to be circumcised was undermined. In 1978 the American radical feminist activist Hosken (1978) definitively rejected the term FC and coined the expression “female genital mutilations” (FGM), which is today used by the World Health Organization. Reports by Hosken and WHO (2006) marked international condemnation of the practice as a sexist and harmful tradition. Initially, strategies for eliminating FC involved community-based education programs on health hazards but these received criticism for not incontrovertibly demonstrating the physical damages related to the practice (Obiora 1997; Shell-Duncan, Hernlund 2000). Concomitantly, anthropologists (after a theoretical human rights vacuum following Herskovits’s Statement in 1947) reopened earlier debates on cultural relativism (Engle 2001). They emphasized the importance of seeing culture as a fluid concept which disclosed the plurality of cultural meanings attached locally to FC (Kennedy 1970; Boddy 1982; Kratz 1994; Talle 1993). Whilst human rights advocates positioned the practice within the fight against patriarchy and damaging body modifications, social scientists warned of the potential infringement of cultural rights.

In the 1990s, experts in medicine and medical anthropology (Obermeyer 1999; Edgerton 1989) concluded that scientific evidence of physical damage deriving from FC is not sufficiently proven by existing studies (see next paragraphs). Meanwhile, some raised the issue of pubescence since a large number of circumcised youngsters are underage. Scholars’ debates included disparate positions on parental educational rights (Slack 1988); the asymmetric reputation of circumcision for male compared to female children (Darby, Svoboda 2007); female and male children’s equal right to protection against circumcision (Fox, Thomson 2005); children’s rights to the enjoyment of their culture and to the highest standard of health, which are regarded as equivalent but conflicting (Renteln 2002). The international anti-FGM campaign actually widened the human rights agenda, formulating FC as an impairment of specific rights: mainly child-rights and freedom from torture. Since then, the human rights-based approach and the implementation of anti-FGM campaigns and legislations have been the subject of intense dispute between those who regard human rights as a dialogic movement that non-western countries are also joining

(Leary 1990; Glendon 2001) and those who regard human rights campaigns as a Western hegemonic mission (Mutua 2002; Kennedy 2004).

At the beginning of 2000, mainstream feminist discourse reformulated FC as a form of violence against women (VAW) sanctioned by customary and religious laws. After signing the 2011 Istanbul Convention on preventing VAW, a growing number of European States (i.a. Italy, UK, Spain, Sweden) banned the practice through *ad hoc* criminal provisions, while others (i.a. France, Germany, the Netherlands) placed FC under penal code provisions that penalize bodily injuries. However, South Asian, African, Arabic and other local feminists argued that the international VAW movement reinforces the image of powerless non-western women (Kapur 2002; Mohanty 2003; Ahmadu 2007), which makes it difficult to distinguish between real victims of forced circumcision and consenting circumcised girls/women. Over the last few years and to date, international law has included declarations and recommendations with an ever-greater focus on culture<sup>3</sup>. Cultural diversity has been recognized as essential for ensuring harmonious interaction among people and groups as well as, and more importantly, the right to self-determination and respect for identity. Accordingly, a growing number of African feminists and professionals claim the right of women to undergo FC on a cultural basis as well as on equal footing with circumcision for men and genital cosmetic surgery for western(ized) women<sup>4</sup>. Interestingly, all the above stances utilize the human rights discourse and somehow forget that rights require to be contextualized and negotiated, «also so-called universal [rights], are not natural and eternal but always emergent and historically specific» (Cowan *et al.* 2001: 27).

On an international level, all these historical events have led to the current antithetic and extreme positions regarding the practice. Some unquestionably object to FC (Van der Kwaak 1992) while others put it above the limit of relativist acceptance (Gordon 1991; Salmon 1997). Some insist on the problem of obtaining a valid consent (Oboler 2001), others attack the “western civilizational project” that underlies opposition to non-therapeutic bodily modifications (Morsy 1991) and invoke extreme cultural relativism. In these polarized discourses, autochthonous feminist actions carried out by non-western(ized) women, who locally claim the right to be the ultimate decision-makers on their own physical sphere, in other words, whether they refuse or accept certain bodily practices, have been marginalized. Yet, Facebook and Twitter pages, such as @fuambaisiaahmadu, @maminapawa and @CuttingVoices, receive hundreds of ‘likes’ within the African community; the organization “All Women are Free to Choose” now has tens of thousands registered women members<sup>5</sup>; and Dr. Tatu Kamau’s challenging of anti-FGM Kenyan law is fuelling discussions in Kenya<sup>6</sup>. Only the anthropologist and activist Fuambai Ahmadu is enjoying major international visibility on the grounds that she is conducting her (quite radical) campaign in the heart of the Western world, i.e. in the USA<sup>7</sup>.

<sup>3</sup> 2001 Universal Declaration on Cultural Diversity; 2007 Fribourg Declaration

<sup>4</sup> This is also confirmed by a number of studies: Shweder 2002; Darby, Svoboda 2007; Shell-Duncan 2008; Johnsdotter, Essén 2010, to name a few.

<sup>5</sup> And the vast majority of these women have no access to social media in Sierra Leone just like in Gambia, Kenya and other countries.

<sup>6</sup> See Dr.’s Tatu Kamau’s interview on Ktn News, January 17, 2018.

<sup>7</sup> I should also mention Ayan Omar Salah, in London. She has been trying to raise awareness of the impact of racial profiling and targeting of the Somali community. See her recent interview on <https://www.shiftingsands.org.uk/being-called-mutilated-is-like-being-called-a-nigger-or-a-kaffir/>.

Although controversial for many, her figure nevertheless deserves specific consideration in that she emphasises the importance of «necessary subjectivity, making us reconsider the different realities that are subsumed into the abbreviation FGM/C, which she considers overly focused on infibulation, and thus on its most extreme form» (Falcão, Carvalho 2017: 132). Ahmadou, in fact, stresses that different types of FC are performed for several different reasons and in various sociocultural contexts: therefore, just as there are women who do not support these practices, others view them as empowering (Ahmadou, Shweder 2009).

One might argue that these women's claims are a form of resistance to colonial cultural interference in their approach to sex and genitalia rather than a real willingness to support the practice itself. It seems to me, however, that these women's stances are more advanced than that: in fact, on the one side, they firmly declare the right of a woman to decide what she can do to her body once she has reached the age of consent — even when this means being circumcised according to her emic representation of cultural identity, while on the other, they are against being forced to undergo the practice and demand protection for their victim sisters. However, an ample part of the mainstream Western (and also part of the African) feminist movement — not without inner critics (Wade 2012) — seems to be deaf to this articulated approach and confuse their “FC claims” with “abetting mutilation”.

Could these women's militant intentionality dialogue with anthropological efforts to improve cultural rights without falling into culturalization and relativism excesses?

My argumentation challenges the widespread and inflexible idea of definitively combating FC either through law, recommendations or long-term persuasion. At the same time, though, it is neither a proposal for alternative rituals, nor a *live-and-let-live* mantra, nor a total deregulation stance since I cannot ignore cases where girls or women are forced to undergo FC and I firmly believe that victims are to be protected. I am among those who favour an alternative conceptualization of FC that is potentially suitable for both protecting infants and unwilling women and for allowing consenting adults – and I dare to add youths – to legally undergo the practice. For this purpose, I regard greater dialogue between disciplines, a revised perspective of the gender dimension and a critical anthropological approach to human rights (Goodale 2006) as key elements for finding a suitable solution to women's many — conventional and cultural – rights in relation to FC.

In the same way as anthropology has offered debates that have nurtured a general refusal of FC in the mainstream political discourse and in liberal academy, it has also highlighted the multiple (sexual and non-sexual) meanings behind the practice and offered analyses that challenge an acritical reading of FC as discriminating, harmful and cruel (i.e. the one that supports both legislative bans and anti-FGM campaigns). I rely on data resulting from field research<sup>8</sup> and especially from others' ethnographic studies that (better that

<sup>8</sup> In 2005, in Kenya, I investigated the issue of FC among communities of three different ethnic groups (Masai in Narok and Kajado; Somali in Wajir and Mandera; Abagusii in Kisii, Gucha and Nyamira). The findings resulting from that research formed part of a short article (Decarli 2007) as well as my graduation thesis, which, although much-appreciated by the Commission, I now regard as excessively limited. As a graduate student in law, my initial study was highly influenced by a conventional legal perspective and methodology and, at the time, I was unwilling to overdo things. The limits of that approach became apparent as my anthropological studies advanced, which is why now I advocate for an interdisciplinary approach. The many encounters with circumcised women I have had in the last decade along with the relativist perspective offered by anthropology,

mine) offer research-based efforts to detect local emic representations of FC and reveal the “polythetic” nature of the practice (Lyons 2007). Ahmadou’s study (2000) has been included because she is an anthropologist and has herself undergone circumcision. In short, she unites ethnography and testimony along with militance (which is, nonetheless, a part of the general discourse on FC that cannot be neglected). I am aware that these works might have their counter-narratives. Therefore, Aisha Fofana Ibrahim (2019), for example, offers a critical description of the same Bondo society that Ahmadou (2000) greatly supports, and it seems to me no coincidence that she is an anti-FGM supporter. As anthropologists, we know that the narrator’s background and motives influence her/his way of understanding things.

The accounts – of which there are many more than those I have selected to support my perspective – highlight several difficulties in reconciling the prevailing global discourses on FC with the personal experiences of a number of girls and women. Although they deviate from the generic account, quite interestingly they are not confined to a sterile censure of the standard mainstream meta-narrative<sup>9</sup> but rather prove that it is not always right. I argue that a re-formulation of the «standard tale» (Leonard 2000: 225) – the latter being based on a commonly accepted monothetic construction of the practice – may help increase institutional awareness, not in view of a gradual elimination of FC (regarded as a more successful long-term solution than bans or criminalization) but rather of a possible “institutional” acceptance and support. By this I do not mean a blinded endorsement or a total deregulation.

To offer a good example of the how these anthropological contributions can help pave the third way towards an FC solution, I have used them for challenging the Italian case and in particular Law 7/2006 “Regulations concerning the prevention and prohibition of female genital modifications”. Italy is emblematic of the European approach to FC. Not only do existing actions and campaigns strongly fight for eradicating the practice<sup>10</sup>, one of the harshest “zero tolerance” criminal legislations has also been adopted, which bans the practice at any age, regardless of consent, and carries a prison sentence of up to 30 years.

I agree with Fusaschi (2007: 99) that Law 7/2006 was the result of «a fast, superficial and cursory» communication that followed (and rejected) a 2004 proposal by Doctors Abdulcadir and Catania of clitoris pricking as a means for replacing infibulation among Somali women in Italy. I also agree with her when she says that the governing authorities underestimated the importance of understanding a complex phenomenon such as FC and that it turned a deaf ear to the “other’s” point of view. However, whereas by «rejection of intercultural dialogue» Fusaschi (2007: 98) means the non-involvement of anti-FGM associations (she makes no mention of FC-friendly women), I mean the non-involvement of women with multiple perspectives on FC since it is not certain at all that these cultural practices are universally unacceptable. I argue that a broadened and multi-approach that voiced every possible perspective regarding FC, might have led the governing authorities onto different paths. The Law (and, prior to that, anti-FGM campaigns) seems to disregard

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have made me reconsider my own stance towards the practice. I now see the Kenyan fieldnotes that still I have through different eyes.

<sup>9</sup> According to it, about 200 million women worldwide have “suffered FGM” and been subject to psycho-physical hazards. The practice is rooted in misogynistic societies where men demand chaste brides and indoctrinated matriarchs indulge male domination. This is why FC must be universally recognized as a VAW.

<sup>10</sup> International “StopFgm” campaign launched by Emma Bonino and AIDOS.

some major aspects that still have relevance for many of those who undergo FC, both in the native and host country. It perilously treats all circumcised girls/women as victims, incapable of making decisions regarding their own bodies. This essentialist approach not only risks indulging a (post)colonial attitude towards non-western(ized) women, it also has considerable consequences in terms of women rights where – although well-intentioned – the law draws an invisible line between (alleged) liberated women of the first world and (alleged) uneducated and unsophisticated women coming from the dark continent.

In the Italian context, a discussion already exists about FC and about Law 7/2006 (Brunelli 2007; Fusaschi 2007; 2011; 2015). However, labelling the remarks made by Italian experts as “debate”, sounds inappropriate to me in that – although they criticize the hyper-simplistic approach to the practice or the resorting to criminalization, as do I – those who have spoken-out argue, nonetheless, that FC (at least in the form of clitoridectomy and infibulation) is negative, prejudicial, «usually always part of larger programmes of socially hierarchized control over women’s sexualities and self-determination» (Fusaschi 2017: 57)<sup>11</sup> and, therefore, comply with the well-known meta-narrative that aims to prevent and (soon or late) eradicate the practice. Although at times they use a softer approach, their discussions involve “how” to annihilate FC rather than “if” it should be annihilated. Therefore, I regard them as partaking in the general denial process of the capacity for agency and legitimate consciousness of many young girls and women. This explains why their works, although interesting and at times very detailed (Fusaschi especially), are little mentioned in this speculation which does not exclude the possibility that FC continues to exist.

On the other hand, I am sympathetic with the scientific approach and proposal of Maria Caterina La Barbera (2009), who published an interesting book a decade ago, that I recommend reading, at least in terms of her advice on listening to different voices of feminism (which she refers to as “multi-centered feminism”):

an approach [that] allows recognizing women not as victims of social structures, but as dynamically interacting agents. By paying attention to the different location of women within the complexity of social structure in terms of class, race, and ethnicity, it is possible to acknowledge that women are, at the same time, both oppressed and oppressors of other women and men (La Barbera 2009: 17).

This approach is what ultimately led her to suggest a twofold way out, one that permitted symbolic circumcision on female minors and allowed adult women to choose whether or not to undergo the intervention (La Barbera 2009). I would like to go one step further. On the one hand, I would dare to consider the possibility that competent youth might be permitted to legally undergo FC as far as they are already empowered to do other things that potentially influence their identity and present and future lives. On the other hand, I would dare to suggest beginning a quite radical reflection on the possibility that – if the value of subjectivity is regarded as worthy of full recognition – consenting women might be able to freely decide what kind of circumcision to undergo, regardless of its invasiveness.

<sup>11</sup> Fusaschi (2017) includes in “clitoridectomy” also genital aesthetic/surgical procedures.

## Is FC about gender?

Law 7/2006 never uses the expression “gender discrimination”. Nonetheless, the fact that FC is perceived as discriminatory indirectly emerges from the reference to the principle of equality (article 3 of the Constitution) and to the Beijing Declaration.

However, a gender interpretation of the practice may be conceptually inappropriate. Not because it ignores that «allhuman societies have a gender structure which normally contemplates the hierarchical subordination of women» (Brunelli 2008: 204), but rather because FC may not “unquestionably” fall within a gender relation. Governing authorities has blindly entertained (and transposed into law) the standard tale that universally (although precipitously) depicts the practice as part of an oppressive system based on the compensation that the groom’s family gives to the bride’s family (erroneously described as “bride-price”) in return for a chaste woman, in other words, a woman who has undergone circumcision. It is true that, in some societies, women are regarded as seductive and erotic creatures able to tempt men other than their husbands, with major repercussions on the community’s social stability (Kennedy 1970; Gordon 1991). Here, at times, FC is regarded as a measure that inhibits a woman’s (alleged) intrinsic and dangerous power to seduce.

Many studies on gender inequalities, however, involve societies where circumcision is practiced on both sexes, which reasonably suggests that it may not be the linchpin of sexual discrimination. On the contrary, FC often appears in societies that treat girls and boys equally before the local law. For example, for the Sudanese in the tea plantations of West Java in Indonesia, circumcision positions the child in the Muslim community «by physically tracing Islamic identity onto the body. It is also an expression of the idea that both men and women are considered equal before Allah» (Newland 2006: 399). Interesting studies on FC and male circumcision (MC) that involve the cultural and symbolic importance of gender complementarity and interdependence have been carried out (Kratz 1990; 1994; Ahmadu 2000; 2007) but the standard tale (and, by extension, the Italian governing authorities) have disregarded them (along with cases where girls are wilfully excluded from circumcision it being regarded as a valued practice for boys only, as, for example, in the Jewish community). Corinne Kratz quite clearly proved how, in initiation ceremonies among the Okiek of Kaplelach and Kipchornwonek in Kenya, false assumptions regarding daily gender relations emerged. When she conducted her ethnography, the Okiek women were relatively more self-sufficient in economic terms than in the past, yet they were not allowed to act independently from their husbands or fathers-in-law, who controlled family resources, and the view of men as decision-makers and organizers and of women as «children to be organized» (Kratz 1990: 457) was stressed in public songs and initiation ceremonies. Seclusion teachings in female initiations, however, contradicted public narratives.

Contrary to the image of women as incapable of making decisions, of cooperation, or of collective accomplishment, the ceremonies of seclusion actually demonstrate their ability for independent organization and action. That women’s behaviour in other situations actually conforms unflinchingly to norms of expected conduct is belied by the vehemence of some seclusion lectures to female initiate especially regarding sexual fidelity and unquestioning obedience to their husbands (Kratz 1990: 457).

Ethnographies also include cases where FC is perceived as a way of empowering women rather than subjugating them. In Sierra Leone, a vast majority of women seem to empathize with the practice, something that anti-FGM activists also publicly recognize. In 2018, I myself had contacts and conversations with Sierra Leone's Ministry of Social Welfare, Gender and Children's Affairs, whose efforts were aimed at resisting the UN's imposition of an FC ban and at promoting a policy that preserved women's decision-making power regarding their bodies. According to large groups of Kono women in Sierra Leone, removing the peripheral clitoris while young girls are being brought up, defines the quintessence of matriarchal power (Ahmadu 2000). According to Mande mythology, matriarchy came prior to patriarchy and actually generated it. FC – in the form of excision – is believed to symbolize the separation of mother and son, that is, of matriarchy and patriarchy.

Female elders say that initiation and the act of excision is a potent emotional and psychological reminder to men that it is women who give birth to them and mothers who, after God, are the natural origins or raw elements from which all human creation, culture and society are derived. This concept of a primordial, supreme and all-powerful Mother is at the core of Mande creation mythology and ritual practices that are prevalent even today (Ahmadu, Shweder 2009: 14).

In these circumstances, women's authority would be enhanced – not lowered – by circumcision which, according to Fuambai Ahmadu, «is synonymous with women's power, their political, economic, reproductive and ritual spheres of influence» (Ahmadu, Shweder 2009: 14).

A widespread misogynist interpretation may also be challenged by premenstrual sexual debut and female extra-marital sex that recur in several Nilotic pastoralist societies (Talle 2007; Blystad 2000; Evans-Pritchard *et al.* 1951). In consistence with Talle's account, it also emerged from my fieldnotes that, in some Maasai communities, a virgin bride can be looked upon as embarrassing. For this reason, warriors (*morans*) and girls may be encouraged to have sex and «these meetings are an important social institution, preparing young people for married life and future procreation» (Talle 2007: 358; Decarli 2007). Maasai FC (*emurata*) seems to imply a model of femininity, according to which a barren woman is asocial and physically and morally immature. By paring away the outer flesh, the genitals would be given an “open-look” that is both the «body inscription of adult femaleness» and «a ‘transformational experience’ with possible effects on consciousness and character structure» (Talle 2007: 362; Decarli 2007). After marriage, prohibitions on sexual behaviour, as well as discretions can be equally imposed on the bride and groom: while the husband is normally allowed to have sex with his other wives, it can happen that the bride is courted by, and has sexual relations with, the groom's peers (Talle 2007). Along with Talle (2007), I also observed that, in these communities, when chastity is called into question, it is not because of misogyny but rather due to (widespread Christian ideals of) monogamy, love-based sexuality and bride virginity that some girls may desire.

Aesthetic reasons also seem to play an important role in that FC is believed to make the feminine genitalia more appealing. In rural and urban Egyptian communities, where Lane and Rubinstain conducted their researches, uncircumcised genitalia were regarded as «disgusting» (1996: 35). Similarly, Corinne Kratz (1994: 356) spoke about circumcision among female and male Okiek in Kenya in terms of «cleanliness, beauty and adulthood».



The importance of making the sexual area smooth seems not only to reflect emic representations of femininity, honour and human completeness but also an aesthetic culture that embraces beauty and glamour together with repulsion for unmodified genitals (Shweder 2002).

Notions of the body's beauty and ugliness develop within local contexts (and often dissolve into broader meanings that extend to include the body's social acceptability) thus, one culture may find another culture's ideal body repulsive (Shweder 2002).

Many women in places such as Mali, Somalia, Egypt, Kenya or Chad are, in fact, repulsed by the idea of unmodified female genitals, which they see as ugly, unrefined, undignified, uncivilized (Shweder 2002: 224-5).

This happens even without men showing any interest in female genital aesthetics. Men often have little to do with the practice, it being an intimate domain of women, whose secrets are closely guarded and bravely defended<sup>12</sup>. In many societies, FC appears to be an all-female matter resulting from a feminine model that women elaborated or contributed to developing. It is taught, wanted, even imposed and performed by women on women as a compulsory transition to the image of femininity that their particular society has given itself. And such a positive explicative strength may be what justifies its spread and persistence (Remotti 2013).

In short, FC could be as synonymous with male domination as gender-equality, female power, transformation and beauty all rolled into one. Hence the assertion (repeatedly also cited in the standard tale) that, without male preference for women who have undergone the operation, the practice would die out, risks becoming fragile (Hosken 1982).

## **A second look at the dimension(s) of health, physical integrity and medical issues.**

Another controversial aspect of Law 7/2006 seems to me formulating FC as a violation of women rights in relation to individual integrity and health. The Italian legal system embraces a broad interpretation of health that goes beyond what is strictly a matter of medicine (Durante 2011). It formally adopts WHO's definition according to which «health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity»<sup>13</sup>. Hence, the good working order of physical organs, serene family and social relationships, opportunities for expressing spirituality and religiosity all equally contribute to individual global health (Durante 2011)<sup>14</sup>. The effective health of the individual depends on medical expertise as well as on social policies to such an extent that the concept of health is developing into a sort of ideal:

<sup>12</sup> See the *Ngaitana* ("I will circumcise myself") protest movement described by Thomas (1996)

<sup>13</sup> WHO Preamble Constitution 1948.

<sup>14</sup> This applies to MC. According to Judgment 2046/2007 at the Padua Court, MC aims at gaining a «higher standard of health [...] also with a view to conform to an ethnic or cultural identity». Well-being is at the core of a practice that is legitimized both as therapeutic surgery and as a rite (Italian National Bioethics Committee 1998). MC is not condemned. Might it be because, once again, the governmental authorities were influenced by an interpretation that is deep-seated in the western population's imaginary (Calcagno 2008).

a purpose that individuals seek to achieve through their personal and collective actions (Durante 2011)<sup>15</sup>.

Some ethnographies (Kratz 1994; Leonard 2000; Ahmadou 2000) show that the aforementioned “state” appears to be one of the conditions that some girls and their social surroundings aim to reach through FC. These studies indicate that there are young circumcised girls who feel they have been physically, spiritually and socially improved by the practice and its symbolic *milieu*, with no negative consequences on their psycho-physical integrity. Like it or not, FC still seems to be important for some girls’ identity in that it modifies their social position – as in the case of Mandinga of Bissau and Bafata-Oio, where the practice is part of an initiation ritual that fosters «the knowledge and behaviours that adult Mandinga are thought ideally to possess» (Johnson 2007: 207) – and it can also play an important role in gender, sex and kinship construction processes. For example, Kono girls who decide to be initiated into the Bundu secret society, are taught that FC creates new females with successful reproductive powers, a point that involves «the centrality of individual women and female ideology in controlling and manipulating the most critical resources in society: women’s fertility and sexuality» (Ahmadou 2000: 289). It is the responsibility of the *Soko* (mother of the community) to ensure that the new women created through circumcision are both community-oriented and accommodating with husbands as well as defiant individuals that are able to defend their own goals and priorities (Ahmadou 2000). Through an identity investiture, FC remodels social behaviour (Remotti 2013) and this can be transversally true for both non-educated and educated women. Even though this transformation can sometimes restrict women’s room for manoeuvre, at the same time it enables circumcised girls/women to live as fully-fledged and entitled human beings and enter officially into the social life and power relations of their communities. The above shows that the practice, with all that it involves, may also be perceived in terms of improvement or not universally in terms of mutilation.

In general, FC is said to cause severe medical complications and to maim the normal functioning of the girl’s sexuality. In no way do I mean to disclaim or belittle cases (some of which have attracted clamorous attention among the media) where circumcised girls/women have died or been tragically damaged. However, I deem it appropriate to bring the debate onto a level that more thoroughly regards information that is usually neglected. In so doing, I cannot ignore Obermeyer’s in-depth study according to which, health hazards ascribed to FC by widespread official reports have not always been assessed on the basis of clear data and quality criteria. Her analytical work puts the significance of the risks into another perspective by finding «no incontrovertible evidence on mortality» and by noting that medical complications are «the exception rather than the rule» (Obermeyer 1999: 92). According to a more recent large-scale comparative study, differences in morbidities found on circumcised and non-circumcised Mandinka, Wolof and Fula women in Gambia (infertilities, painful sex, menstrual pain etc.) were slight (Morison *et al.* 2001). Furthermore, a large part of the hazards appears to be associated with unsafe procedures rather than with FC itself (Obermeyer 1999). Therefore, one might wonder why the practice is not just made safe rather than banning it. After all, this already applies to MC for which (to the opposite extreme) Italian law totally ignores the potential

<sup>15</sup> This Italian paradigm of health is validated in Law 194/1978 and Constitutional Court Judgment 27/1975, relating to voluntary pregnancy interruption and also in Law 164/1982 and Constitutional Court Judgment 161/1985, relating to gender reassignment.

hazards<sup>16</sup> or its possible discriminatory nature<sup>17</sup> and, instead, relies on the discretion of the doctor (who can claim conscientious objection and refrain from surgery) or the judge (in relation to the ritual practitioner's negligence or incompetence).

Indeed, it seems to me that the prevailing literature overshadows traumas of a different nature: the ones that may result from compulsive institutional behaviours which could potentially be more harmful than FC itself - at least when the latter is performed as a slight clitoris incision, which is the majority of cases. According to Sara Johnsdotter (2019), in Sweden, on the simple assumption of a suspicion, police can open investigations and legally grab African girls in (pre)schools and submit them to forensic genital examination without notifying the parents. To some extent, such an exercise of power reminds me of an Italian case where a little girl's genitalia were invasively and repeatedly examined in search of wounds that were no longer visible<sup>18</sup>.

Focusing specifically on the maiming of sexual organs that FC allegedly causes, the debate contours fade from medicine and law into political militancy and back. The global meta-narrative that regards FC as a "mutilation" suggests the idea of irreversible dysfunctions that would indiscriminately result in a loss of libido. This, according to Italian law, would violate the right to physical integrity which can only be granted by derogations<sup>19</sup>, if there is no permanent reduction of integrity itself<sup>20</sup>. On the one hand, however, part of current medical-anthropological research (supported by significant evidence) is critical of such alleged sexual impairment (Shell-Duncan, Hernlund 2000; Catania *et al* 2007). On the other, many uncircumcised women also report that they have never reached orgasm in their lifetime. This leads to a basic issue: is the clitoris essential to female sexuality (Shweder 2002)?

Interesting studies are available to the Italian governing authorities on its own soil: according to Doctor Catania, healthy infibulated women, who have no other complications and are engaged in a good relationship, enjoy sex and have experienced no negative impact on their psycho-sexual life in terms of desire and the ability to experience orgasm (Catania *et al.* 2007). Similarly, many women who have undergone other forms of FC are able to reach orgasm: they report that they do experience different types of sexual pleasure, as do uncircumcised women, with or without a partner, depending on individual psychosocial conditions (Lightfoot-Klein 1989; Ahmadu 2000; Gruenbaum 2001: 139-43;). This neither means that all circumcised girls/women mathematically experience orgasm nor that they do not experience it at all. It does imply, however, that the potential biological capacity for experiencing orgasm is definitely not reduced by circumcision (Shell-Duncan, Hernlund 2000), which explains current, in-depth medical studies on the anatomical internal size of the clitoris, which remains intact after any kind of FC surgery (Abdulcadir *et al.* 2016).

Shweder (2002) assumes that the idea of no *clitoris* = *no libido* (more than a science issue) is the result of the popular western ethno-anatomical belief according to which the female penis is the essence of female (auto)sexuality and emancipation. Shweder himself

<sup>16</sup> The practice is, in fact, commonly regarded as non-invasive. However, according to "non-standard tales" MC can entail some physical risks (Anand *et al.* 1987).

<sup>17</sup> Earp 2013; 2016.

<sup>18</sup> Judgment 979/2010.

<sup>19</sup> Donation of organs.

<sup>20</sup> Article 5 of the Italian civil code.

knows that such an androcentric idea would be contradicted by the large number of “sexually liberated Western women” who, in recent years, have undergone severe clitoris reduction in western clinics for aesthetic reasons. In a thought-provoking contribution, Fusaschi (2011) warns of the possibility that these alleged liberated bodies are ultimately nothing but bodies that are free to choose new, subconscious and incorporated forms of domination and can therefore annihilate decades of struggle for liberation<sup>21</sup>. At this stage, however, Fuambai Ahmadou’s (2007) argument that the credibility of these “liberated” women – when asserting increased psycho-physical sexual satisfaction after such invasive and irreversible genital modifications/mutilations – is never questioned, can hardly be challenged.

In light of the afore-mentioned definition of health, even the concept of “therapy” may acquire a broader meaning, challenging the definition of FC as non-therapeutic. In fact, what emerges from ethnographies would suggest that, at least in those societies where the new-born child is regarded as naturally androgynous or as having an ambiguous sex, FC plays a sort of therapeutic role. In these circumstances, «the Creator did not set things right and fair [...] Ablation of clitoris and of foreskin complete the work and free both sexes from residual impurity in order to make them correspond with respective natures» (Lévi-Strauss 2015: 34). Even though this might sound contradictory, in some societies, the body's proper functioning and perfectness (its integrity?) is attained through physical incompleteness (i.e. by removing certain parts). This is true for the Dogon in Mali (Parrinder 1996), for the Kono in Sierra Leone (Ahmadou 2000) and also for other non-African societies, such as the Hagen in Papua New Guinea (Strathern 1988). Portions of people in these groups regard circumcision as the means to clearly define an individual’s sexual identity, which may create a parallel (although quite radical) with gender reassignment. According to the Italian Constitutional Court, for the purposes of a new sexual identification, attention shall be given both to external genitals and to psychological and social elements in order to adhere to a conception of sex as a complex fact of personality, driven by a combination of factors whose balance is to be sought by giving priority to the dominants. Such surgery is therefore allowed to meet the transgender's needs to match the physical aspect with the psyche. So why not FC too when interpreted as the removal of a distinctive male attribute, i.e. when it consists of a process of sexual identification? A transgender (who claims that her identity is not reflected in her genitals) is lawfully in charge of her own body and can undergo an irreversible genital modification that comes within her right to psycho-physical health and represents the achievement of a state of global wellbeing<sup>22</sup>. However, an African sexually “not identified” woman, who claims that such a condition affects her wellbeing because of personal and social non-acceptance, may not benefit from the same right. So, one might wonder on what criteria do the doctor and (primarily) the governing authorities, measure the degree of reliability, psycho-physical stress and social pressure that exist in the two circumstances in order to establish that, whether in hospital or not, only one is worthy of support?

<sup>21</sup>See also Hellsten 2004.

<sup>22</sup>Judgment 161/1985.

## Criminalization of the practice.

The introduction of article 583-*bis* in the penal code, condemns whoever, with no therapeutic aims, engages in surgery on a female's genitals. The issue has been directly dealt with to varying degrees by Italian scholars who have finely discussed the unfolding of legal cases (Basile 2013) and the limitations of resorting to the legislative tool (Fusaschi 2007; Brunelli 2007). From their speculations, a problem already emerged regarding the inherent criminal intent of relatives. So, for example, among the Sudanese in Java the active participation of parents in the FC *milieu* is often perceived as mandatory: parents fulfil «their obligations by circumcising boys and girls to conform to a moral order [...] and to position them appropriately in the Muslim community» (Newland 2006: 403)<sup>23</sup>. More generally, at any moment in the girl's life, her relatives may coax her into undergoing circumcision, which – in the eye of the law – turns them into cruel demons to such a point that the burden of sanctions increase when the fact is committed on a direct descendant, even if what makes these relatives endure the practice is often the belief of acting in her best interest and for her future benefit within her society, with no wilful misconduct.

I argue that these speculations – which I support – fail to address another crucial aspect of the issue that involves subjectivity, occasionally also intended as parental disobedience. In Africa as elsewhere, girls at times refuse to listen to their parents. Some girls escape circumcision while other girls undergo it against their parents' will. Among the Sara Kaba (Chad), if parents deny permission for FC, some girls organize it themselves and the family has no choice than to accept it when it is done (Leonard 2000). Sometimes they are self-motivated and other times they imitate friends. They do it willingly because, far from being the «last legacy of a tribal tradition» (Italian draft-law 414/2001), FC is regarded as fashionable (Leonard 2000)<sup>24</sup>. More generally, some girls and women demand to be circumcised with no form of constraint and reiterate their right to self-determination, i.e. an individual right of the same order as the right to life and integrity. A punitive measure towards FC may potentially impact the girl/woman herself by exposing her to public discrimination. While condemning non-western societies because of their alleged misogynist attitude to women, the governing authorities themselves have ended up treating all circumcised girls/women indistinctly as children with no capacity for self-decision<sup>25</sup>. In fact, they have decided, on behalf of the woman concerned, that FC is a crime, regardless of what she believes, experiences and wants, whatever her age. Interestingly, such an attitude is quite the opposite when it comes to MC which not only does not constitute a crime, it often comes second to the boy's consent, parental discretion, religious and cultural education.

One might argue that the governing authorities could, at least, recognize the value of the majority and give women a degree of self-governance. However, even though it might be an interesting suggestion, it would not necessarily be the most desirable solution since

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<sup>23</sup> This, however, may raise objections against the repeated claim of the parliamentary Commissions that FC is not traceable to religious beliefs. Therefore, a potential issue of religious discrimination may also emerge.

<sup>24</sup> Similarly, only 15 years ago, the girls of the (non-infibulating) Zabarma group in Sudan begun to ask to be circumcised (Gruenbaum 2005).

<sup>25</sup> According to article 583-*bis*, the majority of girls/women's consents to circumcision is only relevant if FC cannot be classified as clitoridectomy, excision or infibulation.

FC often has no definite age. Among the Sudanese in Java, where FC occurs shortly after birth, the practice is part of a series of birth-rituals that include a number of linked stages (Newland 2006). In societies where the practice is a generational rite of passage, having a legal age-limit would likely undermine the significance of the rite itself. In fact, FC is normally integrated within wider anti-social events that can protract for a long period during which girls must withdraw from society, accompanied by elderly women who teach them rules, myths and mediation. For these societies, there is no point in performing FC on women who are “already grown” since adulthood is reached neither in conjunction with the legal coming-of-age nor in a single and specific point of the individual’s life. In my opinion, this ought to elicit further discussion on youth competence and when those who consciously ask to modify their genitalia for cultural-identity purposes should be legally allowed to make these important decisions regarding their own lives.

## **Conclusion.**

The need to overcome the dichotomy of “universal eradication or uncritical acceptance” regarding FC is a long-standing problem, but middle ways to deal with the practice have not been properly considered up to now. One could consist of a measure that, on the one hand, protects infants and unwilling women while, on the other, allows consenting circumcised girls and adult women to legally undergo the practice on the basis of subjectivity, self-determination, the emic perspectives of their own cultures and on equal footing with genital cosmetic surgery for western(ized) women. Such a new conceptualization could have the potential to significantly affect the global discourse on the issue as well as to influence the facilitation and reconfiguration processes of meaningful interactions between legislative powers and women in relation to their multiple rights. The amount of work to be done is daunting but a tentative and valid start may lie in three crucial aspects that have so far been ignored or that have not been used in conjuncture when dealing with FC.

The first aspect is greater interdisciplinary action. Ethnography, which can be an extraordinary socio-legal instrument, is available to the governing authorities. Far from raising the idea that the latter are acting as anthropologists, I consider it appropriate that the two figures systematically cooperate in law-making right from drawing up the first draft. An inclusive legal order is not just one where anthropologists assist legal actors after State law has already been established (and is therefore inflexible). Indeed, a pluralist system ought to be polyvocal from its earliest stages in order to accommodate multiple world views. In Europe, the engagement of anthropologists in legal issues has not been adopted by many countries where the relation between anthropological and legal sciences is sterile. However, an enlightened use of ethnography has the potential to enrich FC discourse (where Western feminist perspective and sovereign powers have always dominated) and to give governments the chance to refine their knowledge of the practice as well as to address its complexity by understanding people better in the context of their lives, thus changing the focus of policy responses.

The second aspect deals with a revised approach to gender dimension which should be combined with a dynamic and pondered approach to culture. In line with the 2012 recommendations of the “Rapporteur in the field of cultural rights” (HRC A/67/287), culture should not be seen as an uncritical obstacle to women’s rights but more

of a potential support for the achievement of female equality. By investigating FC through their voices, ethnography is able to put the focus back onto women so that they can actively engage in deciding which cultural values or practices are to be protected, reoriented or fought against. By expanding the circle of women involved to include victims as well as women whose perspectives on FC do not include a sense of damage, women would be able to represent their own views of the practice according to multiple cultural models and personal experiences. In this way, their perspectives shift from the margins of cultural life to the centre of the processes that create, interpret and shape culture and play a leading role in developing transformative initiatives, new epistemologies and best practices that are fundamental in reinforcing both their conventional and cultural rights. In this sense, ethnography may be able to unveil underlying «normative humanism» dynamics (Goodale 2006: 492). According to Goodale (2006), in the absence of constraints, people establish meaningful interactions in ways that incorporate a basic set of human-centred values, i.e. ways that balance local cultural and social possibilities with common cognitive, physical and emotional imperatives. Accordingly, a bottom-up approach, which would assign a major role to ordinary girls and women regarded as capable of constructing patterned “humanistic” orders for themselves, may be crucial in producing knowledge on FC, as well as in responding to the emergence of dispossessing women of their democratic participation in decision-making.

The last aspect deals with the possibility of resorting to a critical anthropological approach to human rights. Goodale describes a critical anthropology of human rights as

one that seeks to uncover the latent progressive potential underlying their core principles, which have become repressed as human rights discourse has become reified so that all that remains is an impenetrable granite surface that blocks from view all of the “mediated conceptual moments” that actually constitute human rights (2006: 491).

I believe that, once potentially emancipatory principles in relation to FC (often co-opted by power structures) are detected, a new conceptualization of the practice may be validated in accordance with the (too little invoked) *Statement on Human Rights* (1999) produced by the Human Rights Committee of the American Anthropological Association (AAA). The statement recommends regarding human rights as a fluid and dynamic concept, consistent with international principles but not limited by them. In other words, expand their definition to include (among other things) collective as well as individual, cultural, social and economic development rights.

I argue that gender and culture can be assumed as cross-cutting variables that broaden the scopes of existing treaties (i.a. UDHR; the International Covenants on Civil and Political Rights and on Social, Economic and Cultural Rights; the Elimination of All Forms of Discrimination Against Women). A third way to tackle FC, therefore, could appear to lie in women rights intended as an evolving culture that might now be able to include conventional as well as cultural rights.

For this purpose, I would like to encourage anthropologists not to forget the guidelines of the AAA Human Rights Committee. As a part of their profession, anthropologists are called upon to seek to apply their knowledge to the solution of human problems. This also implies using ethnography, anthropological critique and other methodologies as precious tools for human rights theory and practice, something that, to date, in Europe, have been

implemented too hesitantly. In so doing, it may be possible to radically expand and deepen anthropology's contribution on the subject of FC in a way that oversteps extreme positions and value the manifold metaphysics of FC in relation to multiple women's same rank rights.

## References

Abdulcadir, J., Botsikas, D., Bolmont, M., Bilancioni, A., Djema, D., Bianchi-Demicheli, F., Yaron, M., Petignat, P. 2016. Sexual Anatomy and Function in Women With and Without Genital Mutilation: A Cross-Sectional Study. *The Journal of Sexual Medicine*, 13(2): 226 – 237.

Ahmadu, F. 2000. «Rites and Wrongs: An Insider/Outsider Reflects on Power and Excision», in *Female "Circumcision" in Africa: Culture, Controversy, and Change*. Shell-Duncan, B., Hernlund, Y (ed.). Boulder, Colorado. Lynne Rienner: 283 – 312.

Ahmadu, F. 2007. «I'Ain't I a Woman Too?' Challenging Myths of Sexual Dysfunction in Circumcised Women», in *Transcultural Bodies: Female Genital Cutting in Global Context*. Shell-Duncan, B., Hernlund, Y. (ed.). New York. Rutgers University Press: 278 – 310.

Ahmadu, F., Shweder, R. 2009. Disputing the Myth of the Sexual Dysfunction of Circumcised Women: An Interview with Fuambai S. Ahmadu by Richard A. Shweder. *Anthropology Today*, 25 (6): 14 – 17.

Anand, K.S., Phil, M.B.B.S., Hickey, P.R. 1987. Pain and its effects in the human neonate and fetus. *The New England Journal of Medicine*, 317(21): 1321-1329.

Basile, F. 2013. Il reato di "pratiche di mutilazione degli organi genitali femminili" alla prova della giurisprudenza: un commento alla prima (e finora unica) applicazione giurisprudenziale dell'art. 583 bis c.p. *Diritto penale contemporaneo*, 4: 311 – 324.

Blystad, A. 2000. *Precarious Procreation: Datoga pastoralists at the late 20th century*. Ph.D. dissertation. University of Bergen. Norway.

Boddy, J. 1982. Womb as Oasis: The Symbolic Context of Pharaonic Circumcision in Rural Northern Sudan. *American Ethnologist*, 9 (4): 682 – 698.

Brunelli, G. 2007. Prevenzione e divieto delle mutilazioni genitali femminili: genealogia (e limiti) di una legge. *Quaderni costituzionali*, 27 (3): 567 – 588.

Brunelli, G. 2008. «Genealogia e limiti di una legge», in *Legalità Penale E Crisi Del Diritto, Oggi: Un Percorso Interdisciplinare*. Bernardi, A., Baldassarre, P., Pugiotto, A. (a cura di). Milano. Giuffrè Editore: 203 – 230.

Calcagno, C. 2008. «Circoncisione rituale nella società occidentale: una sfida multiculturale», in *I Problemi della Società Multietnica*. Marsonet, M. (a cura di). Quaderni della Fondazione Professor Paolo Michele Erede. 1. Genova. ECIG: 103 – 117.



Catania, L., Abdulcadir, O., Puppo, V., Baldaro-Verde, J., Abdulcadir, J., Abdulcadir, D. 2007. Pleasure and Orgasm in Women with Female Genital Mutilation/Cutting (FGM/C). *The Journal of sexual medicine*,4(6): 1666 – 78.

Cowan, J.K., Dembour, M.B., Wilson, R.A. 2001. *Culture and rights. Anthropological perspectives*. Cambridge. Cambridge University Press.

Darby, R., Svoboda, S. 2007. A Rose by Any Other Name? Rethinking Similarities and Differences between Male and Female Genital Cutting. *Medical Anthropology Quarterly*, 21(3): 324 – 342.

Decarli, G. 2007. Tra Diritto e Tradizione. Riflessioni sulle mutilazioni genitali femminili in Kenya. *The Cardozo Electronic Law Bulletin*, 13: 1 – 59.

Durante, V. 2011. «La salute come diritto della persona», in *Il Governo del Corpo, Trattato di Biodiritto, Part III, Corpo e Integrità della Persona*. Canestrari, S., Ferrando, G., Mazzoni, C.M., Rodotà, S., Zatti, P. (a cura di). Milano. Giuffrè Editore: 579 – 599.

Earp, B.D. 2013. The ethics of infant male circumcision. *Journal of Medical Ethics*, 39:418 - 420

Earp, B.D. 2016. «Boys and girls alike: The ethics of male and female circumcision», in *Women, Health, & Healthcare: Readings on Social, Structural, & Systemic Issues*. Gathman, E.C.H. (ed.). Dubuque, IA. Kendall Hunt Publishing Company: 113 – 116.

Edgerton, R. 1989. *Mau Mau: An African crucible*. New York. The Free Press

Hellsten, S. 2004. Rationalizing Circumcision: From Tradition To Fashion, From Public Health To Individual Freedom - Critical Notes On Cultural Persistence Of The Practice Of Genital Mutilation. *Journal of Medical Ethics*, 30(3): 248 – 253.

Engle, K. 2001. From skepticism to embrace: Human rights and the American Anthropological Association from 1947 – 1999. *Human Rights Quarterly*, 23: 536 – 559.

Evans-Pritchard, E. 1951. *Kinship and Marriage among the Nuer*. Oxford. Clarendon Press.

Falcão, R., Carvalho, C. 2017. «Ethnography: Fgm/C And Cultural Differences», in *Multisectoral Academic Training Guide on Female Genital Mutilation/Cutting*. Gómez, L.N. (ed). Madrid. Dykinson: 130 - 138

Fofana Ibrahim, A. 2019. «The Bondo Society as a Political Tool: Examining Cultural Expertise in Sierra Leone from 1961 to 2018», in *Cultural Expertise An Emergent Concept and Evolving Practices*. Holden, L. (ed.). *Laws* special issue. Basel. MDPI: 73 – 84.

Fox, M., Thomson, M. 2005. A Covenant with the Status Quo: Male Circumcision and the New BMA Guidance to Doctors. *Journal of Medical Ethics*, 31: 463 – 469.

Fusaschi, M. 2007. «Verso un multiculturalismo all'italiana. La "legge speciale" e il dibattito sull'infibulazione», in *La società di tutti: multiculturalismo e politiche dell'identità*. Pompeo, F. (a cura di). Roma. Meltemi Editore: 95 – 116.

- Fusaschi, M. 2011. "Designer vagina": immaginari dell'indecenza o ritorno all'età dell'innocenza?. *Genesis. Rivista della Società Italiana delle Storiche*, X (1): 63 – 84.
- Fusaschi, M. 2015. Humanitarian Bodies. Gender, Moral Economy and Genitals Modifications in Italian Immigration Policy. *Cahiers d'Études Africaines*, 217: 11 – 28.
- Fusaschi, M. 2017. «The Genitals and Construction of Women's Body», in *Multisectoral Academic Training Guide on Female Genital Mutilation/Cutting*. Gómez, L.N. (ed.). Madrid. Dykinson: 54 – 57.
- Glendon, M.A. 2001. *A World Made New: Eleanor Roosevelt and the Universal Declaration of Human Rights*. New York. Random House.
- Goodale, M. 2006. Toward a Critical Anthropology of Human Rights. *Current Anthropology*, 47(3): 485 – 511.
- Gordon, D. 1991. Female circumcision and genital operations in Egypt and the Sudan: a dilemma for medical anthropology. *Medical Anthropology Quarterly*, 5 (1): 3 – 14.
- Gruenbaum, E. 2001. *The Female Circumcision Controversy: An Anthropological Perspective*. Philadelphia. University of Philadelphia Press.
- Gruenbaum, E. 2005. Socio-Cultural Dynamics of Female Genital Cutting: Research Findings, Gaps, and Directions. *Culture, Health & Sexuality*, 7 (5): 429 – 441.
- Hosken, F. 1982. *The Hosken Report: Genital and Social Mutilation of Females*. Lexington. Women's International News Network.
- Italian National Bioethics Committee. 1998. *La circoncisione: profili bioetici*, 25 settembre 1998, [http://bioetica.governo.it/media/1890/p36\\_1998\\_circoncisione\\_it.pdf](http://bioetica.governo.it/media/1890/p36_1998_circoncisione_it.pdf)
- Johnsdotter, S., Essén, B. 2010. Genitals and ethnicity: the politics of genital modifications. *Reproductive Health Matters*, 18(35): 29 – 37.
- Johnsdotter, S., Mestre, R. 2017. 'Female genital mutilation' in Europe: Public discourse versus empirical evidence. *International Journal of Law, Crime and Justice*, 51: 14 – 23.
- Johnsdotter, S. 2019. Meaning well while doing harm: compulsory genital examinations in Swedish African girls. *Sexual and Reproductive Health Matters*, 27(2): 1 – 13.
- Johnson, M.C. 2007. «Making mandinga or making muslims? Debating female circumcision, ethnicity, and islam in guinea-bissau and Portugal», in *Transcultural Bodies: Female Genital Cutting in Global Context*. Hernlund Y., Shell-Duncan, B. (ed.). New York. Rutgers University Press: 202 – 223.
- Kapur, R. 2002. The Tragedy of Victimization Rhetoric: Resurrecting the "Native" Subject in International/Post-Colonial Feminist Legal Politics. *Harvard Human Rights Journal*, 15: 1 – 37.
- Kennedy, J. 1970. Circumcision and Excision in Egyptian Nubia. *Man*, 5(2): 175 – 191.
- Kennedy, D. 2004. *The Dark Sides of Virtue: Reassessing International Humanitarianism*. Princeton. Princeton University Press.

- Kratz, C. 1990. Sexual Solidarity and the Secrets of Sight and Sound: Shifting Gender Relations and Their Ceremonial Constitution. *American Ethnologist*, 17(3): 449 – 469.
- Kratz, C. 1994. *Affecting Performance: Meaning, Movement and Experience in Okiek Women's Initiation*. Washington DC. Smithsonian Institution Press.
- La Barbera, M.C. 2009. *Multicentered Feminism. Revisiting The "Female Genital Mutilation" Discourse*. Palermo. Campostampa di M. Svasta.
- Lane, S.D., Rubinstein, R.A. 1996. Judging the Other: Responding to Traditional Female Genital Surgeries. *Hastings Center Report*, 26: 31 – 40.
- Leary, V. 1990. «The Effect of Western Perspectives on International Human Rights», in *Human Rights in Africa: Cross-Cultural Perspectives*. An-Na'im A.A., Deng, F. (ed). Washington DC. Brookings Institution: 15 – 30.
- Leonard, L. 2000. 'We Did It for Pleasure Only': Hearing Alternative Tales of Female Circumcision. *Qualitative Inquiry*, 6(2): 212 – 228.
- Lévi-Strauss, C. 2013. *Nous sommes tous des cannibales*. Paris. Le Seuil. Trad. It. *Siamo tutti cannibali*. 2015. Bologna. Il Mulino.
- Leye, E., Sabbe, A. 2009. *Responding to Female genital mutilation in Europe. Striking the right balance between prosecution and prevention*. Gent. International Centre for Reproductive Health.
- Lightfoot-Klein, H. 1989. The Sexual Experience and Marital Adjustment of Genitally Circumcised and Infibulated Females in the Sudan. *The Journal of Sex Research*, 26 (3): 375 – 392.
- Lyons, H. 2007. Genital Cutting: The Past and Present of a Polythetic Category. *Africa Today*, 53(4): 3 – 17.
- Messer, E. 1993. Anthropology and human rights. *Annual Review of Anthropology*, 22: 221 – 249.
- Mohanty, C.T. 2003. *Decolonizing Theory, Practicing Solidarity*. Durham - London. Duke University Press.
- Morison, L., Scherf, C., Ekpo, G., Pain, K., West, B., Coleman, R., Walraven, G. 2001. The Long-Term Reproductive Health Consequences of Female Genital Cutting in Rural Gambia: A Community-Based Survey. *Tropical Medicine and International Health*, 6: 643 – 53.
- Morsy, S. 1991. Safeguarding women's bodies: the white man's burden medicalized. *Medical Anthropology Quarterly*, 5: 19 – 23.
- Mutua, M. 2002. *Human Rights: A Political and Cultural Critique*. Philadelphia. University of Pennsylvania Press.
- Newland, L. 2006. Female circumcision: Muslim identities and zero tolerance policies in rural West Java. *Women's Studies International Forum*, 29(4): 394 – 404.

- Obermeyer, C. 1999. Female Genital Surgeries: the Known, the Unknown and the Unknowable. *Medical Anthropology Quarterly*, 13(1): 79 – 106.
- Obiora, A. 1997. Bridges and Barricades: Rethinking Polemics and Intransigence in the Campaign against Female Circumcision. *Case Western Reserve Law Review*, 47(2): 275 – 378.
- Oboler, R. 2001. Law and persuasion in the elimination of female genital mutilation. *Human Organization*, 60: 311-318.
- Parrinder, G. 1996. *African Mythology*. London. Chancellor Press.
- Remotti, F. 2013. *Fare umanità. I drammi dell'antropo-poiesi*. Roma-Bari. Laterza.
- Renteln, A. 2002. «In Defense of Culture in the Courtroom», in *Engaging cultural differences: The Multicultural Challenge in Liberal Democracies*. Shweder, R., Minow, M., Marcus, H.R. (ed.). New York. Russell Sage Foundation Press: 194 – 215.
- Salmon, M. 1997, Ethical considerations in anthropology and archaeology, or relativism and justice for all. *Journal of Anthropological Research*, 53: 47 – 63.
- Shell-Duncan, B. 2008. From Health to Human Rights: Female Genital Cutting and the Politics of Intervention. *American Anthropologist*, New Series 110 (2): 225 – 236.
- Shell-Duncan, B., Hernlund, Y. 2000. *Female "Circumcision" in Africa: Culture, Controversy, and Change*. Boulder. Lynne Rienner.
- Shweder, R. 2002. «What about female genital mutilation? And Why Understanding Culture Matters in the First Place», in *Engaging cultural differences: The Multicultural Challenge in Liberal Democracies*. Shweder, R., Minow, M., Marcus, H.R. (ed.). New York. Russell Sage Foundation Press: 216 – 251.
- Slack, A. 1988. Female Circumcision: A Critical Appraisal. *Human Rights Quarterly*, 437(4): 440 – 442.
- Strathern, M. 1988. *The Gender of the Gift: Problems with Women and Problems with Society in Melanesia*. Oakland. University of California Press.
- Talle, A. 1993. «Transforming Women into 'Pure' Agnates: Aspects of Female Infibulation in Somalia», in *Carved Flesh/Cast Selves: Gender Symbols and Social Practices*. Broch-Due, V., Rudie, I., Bleie, T. (ed.). Oxford. Berg Publishers: 83 – 106.
- Talle, A. 2007. 'Serious games': Licences and Prohibitions in Maasai Sexual Life. *Africa: Journal of the International African Institute*, 77(3): 351 – 370.
- Thomas, L. 1996. 'Ngaitana (I will circumcise myself)': The Gender and Generational Politics of the 1956 Ban on Clitoridectomy in Meru, Kenya. *Gender and History*, 8(3): 338 – 363.
- Van der Kwaak, A. 1992. Female circumcision and gender identity: a questionable alliance? *Social Science and Medicine*, 35(6): 777 – 787.

---

Wade, L. 2012. Learning From 'Female Genital Mutilation': Lessons From 30 Years of Academic Discourse. *Ethnicities*, 12(1): 26 – 49.

