

The Importance of Genital Mutilations to Gender Power Politics

Seham Abd El-Salam

Introduction:

Male and female genital mutilations (known as circumcision) are known in some cultures as rites of passage and purification (Kennedy 1970; Toubia 1993; Turner 1985). However, I argue that they have another less declared but very significant aspect: they are functions and tools of patriarchal gender power politics. This paper deals with both types of genital mutilations, male and female, though it gives more attention to Male Genital Mutilation (MGM) because it is a muted gender issue. It is based on a study that I carried out in 1999-2000. It is a qualitative field study on the attitudes of 23 Egyptian intellectuals towards MGM*. All of the respondents are active against female genital mutilation (FGM) but tolerant to MGM. I interviewed them on semi-structured one-one basis. One important result of this study is that MGM as practiced in Egypt today is based on gender power politics (Abd el Salam 2000). Following is an elaboration on this point through interpretation of some observed beliefs and practices related to MGM and FGM.

Theoretical Overview:

Physical Description of MGM and FGM

The usual and most widespread forms of MGM and FGM (known as circumcision) are the partial or total removal of the male prepuce and the female clitoris and labia minora. Severer forms of both of MGM and FGM are reported among some cultures. This includes flaying of the whole penile skin as well as the skin of the lower part of the abdomen and upper part of the thighs (Salkh), and incision of the lower surface of the penis (subincision), and removal of the whole external female genitalia with subsequent suturing (infibulation) (Hastings 1980). The removed parts, even in the slightest forms of MGM or FGM, are the most sensitive parts of the human genitalia. They contain specified erotic nerve cells, immune cells, cells that produce a natural lubricant that makes the sexual act easier, gentler, and more pleasurable to the male and the female partners, and feromones, which are natural aromas that facilitate sexual attraction. (Taylor 1996; Immermann 1998; Cold and Taylor 1999; O'Hara 1999). The procedure has many hazards. First and

foremost, the loss of functions of the severed parts. In all cases there is pain, which culminates in some cases to irreversible shock. Bleeding, infection, urinary tract problems, septicemia, and even death are reported in some cases. Circumcised men and women have expressed their suffering from immediate and remote hazards of the procedure (Assaad, 1980; Toubia, 1993; NOHARMM, 1994; Abd el Salam, 2000).

Origin and Social Function of MGM and FGM

It is widely acknowledged that female genital mutilation (FGM) is a patriarchal invention to control female chastity and ensure the patrilineal purity of offsprings who will inherit their father's wealth (Assaad 1980; Dorkenoo 1994; Toubia 1993). On the other hand, the cultural origin of MGM is controversial. Nevertheless, the different theories of its origin base MGM on gender power politics. One theory suggests that MGM is based on male jealousy of female fertility that appears when women experience menstruation; and that MGM is a symbolic identification with this female attribute. Another theory states that MGM is considered a symbol of superiority of the father over junior males that

threaten his relationship to the mother, thus severing the most sensitive parts of junior males' genitalia ensures their submission to senior males, who will then feel less anxious (Bettelheim 1954). I argue that MGM could be explained by combination of both theories. In patriarchal societies MGM has a symbolic sexual role, because erection is considered a significant sign of male adulthood. Exposure of the head of the penis by circumcision gives it a perpetual appearance of erection. Accordingly, the procedure transfers the child who is not yet sexually mature, making him a symbolically mature male, separating him from the female world. Traditionally, the genital cutting is accompanied by rituals, such as dressing the male child in female attire and jewelry, and segregating him till the wound heals, then allowing him to be reaggregated into the community in his new circumcised, and presumably more masculine, status. The accompanying rituals are significant because they imply a symbolic death of the child and resurrection of a new male figure (Kennedy, 1970). This new birth comes from the father not the mother. That is the circumcision of male children plays a dual symbolic role reinforcing male authority: the first of which is by giving the child a mature male appearance, ensuring his possession by the male community, and giving him the privilege of the bio/social feminine sign of fertility, shedding of genital blood. And the second is that this new birth and symbolic mature masculinity is given to the child by the father not the mother (Bettelheim 1954).

Another evidence of the patriarchal origin of genital mutilations is that FGM and MGM did not take place in pre-patriarchal societies that were based on sexual equality, for example, in communities of fruit gatherers. Adoption of MGM and FGM as a tradition is associated with the rise of the patriarchal society. FGM and MGM continue in our modern time because of the persistence of old patriarchal values, in spite of the different motives behind them in antiquity and present day societies (Montagu, 1991).

The power political aspect of Genital Mutilation is evident in practice as it is suggested in theory. One of the main political objectives of MGM is to separate the child from his mother and link him to the male community through a painful experience (DeMeo, 1997). For example, an interesting anthropological research carried out by Victor Turner shows that in the "Ndembu" tribe in Zambia the motive behind MGM is a modification and reorganization of the male child's relationship with his parents. In this tribe, mothers link children to one village, whereas, the father who acquaints them with other groups from several villages in which their cousins live makes their relationship with others broader. Naturally, male children are attached to their mothers before being circumcised,

helping them in their daily chores, but after circumcision, they become more attached to their fathers, brothers and other male members of the tribe having similar activities. Because of the attachment to the mother, male children are considered polluted and immature. And accordingly, they do not deserve to be guided by their fathers and other male figures. In these tribes, when leaders find that children are increasing in number and that there is a lack of laborers, consequently disturbing the tribe's male/female power balance, there are immediate preparations for male circumcision. It separates the male child from his mother before they develop a stronger mother/son attachment that is difficult to separate. Moreover, the father/son relationship becomes stronger after circumcision, as the child before circumcision was considered polluted and immature and not worthy of taking instructions from the father because he is still under the mother's control. Evidence that Ndembu male circumcision separates the child from the mother, is that they believe that the male prepuce is analogous to the female labia majora, thus, its removal is significant in that it cuts the mother/son bond. Circumcision is a ritual that takes place to which all relatives - not only males but also female cousins too from the villages close by - are invited. Therefore, the child's relationship with the world becomes broader because it is not only attached to the mother but becomes involved in the world of the father's kinship network which involves interaction with the males in the surrounding villages (Turner, 1985).

Severing the mother/child bond by MGM as is explained in this tribal model applies also to modern society. Modern feminist activists noticed the patriarchal political nature of male circumcision. One of them is Miriam Pollack, who refutes that circumcision has a religious significance. She says that it has a political background in general and is specially significant to gender power politics:

Circumcision is based on men's domination of women. By this procedure, the child is separated from his mother who does not have any authority on him any longer. This harms the child, for at this stage he needs his mother most and she cannot defend him, in spite of the fact that they are attached to one another at this early age. The knife that is pointed to the child is in fact pointed to the heart and soul of the mother. Circumcision is actually an injury to the mother; it is humiliating to her since it implies that 'Your authority over males is limited; moreover, this child belongs to the male community.' In this manner, the relationship between man and woman is disturbed and similarly the relationship between mother and child. The child's separation from the mother is a preparation for his separation from her when he is recruited by the army (Aldeeb Abu-Sahlieh 2000).

Similarities between FGM and MGM

There is evidence that MGM and FGM are of equal significance wherever they are practiced. For example, the anthropologist Hanny Leightfoot-Klein found that the African justifications of FGM are the same as the American justifications of MGM. Such similarities are found in the opinions that say that circumcision does not deprive the child of an important part of its body but it only takes off an unnecessary piece of skin; and that it is a beautifying procedure; that it also has health benefits such as the prevention of infection, and other diseases; and since doctors agree to do it, it has to be beneficial. In both sexes, men and women do not find any relation between long term complications they may have and circumcision that they experienced at a very early age. It was claimed that neither females nor males would find a partner if they were not circumcised (Lightfoot-Klein, 1994, Lightfoot-Klein, 1997).

Some beliefs and practices related to genital mutilations, especially MGM, give evidence that they are both tool and function of gender power politics.

Denial of Pain and Age Discrimination:

The disturbance in the relationship between mother and child, and child abuse by infliction of unnecessary pain all contribute to the continuation of the patriarchal society (DeMeo, 1997). Some activists against FGM state that MGM is not equally traumatic because it is done in infancy, when a baby does not feel pain as equally as adults. The widespread belief that infants can tolerate pain more than adults reveals bias against children. Pain is a subjective feeling that ranges from slight discomfort to severe agony. The only one who can assess the degree of pain is the person who experiences it, or the disinterested observer who detects the objective signs of pain as they appear on the sufferer (Chamberlain, 1991). However, those who believe that children tolerate pain are subjectively judging juniors, who are under their custody and who occupy a lower social rank in comparison to adults. Some objective studies on infants' perception of pain invalidate the traditional beliefs about children's tolerance of pain. Cortisol - which is the hormone that is released by the suprarenal glands in response to pain, shock, and stress - was measured in the blood of infants after circumcision and other less stressful situations, such as binding the children's limbs or pricking their heels. It was found that the blood cortisol level after circumcision exceeds its level after other stressful experiences (Goldman, 1997; Gunnar, 1985; Gunnar, 1988). Thus, contrary to the dominant belief that MGM is not painful, both FGM and MGM are painful experiences to the individual and his/her parents. Not only laboratory results prove this fact, but also field study. In my research on Egyptian intellectuals (Abd el Salam, 2000), one respondent recounts his son's circumcision:

We spent three miserable days. He cried such a lot. It wasn't a pleasant experience at all. Imagine a father watching his son being circumcised and the poor boy is screaming! To me it was a horrible experience.

Another respondent said that they were worried and tense for three weeks after the circumcision because the baby was having a lot of pain. His wife said, that the difficult period was longer than that:

He was in a very bad state for a month and half after the procedure, and I felt that he had changed a lot. The baby was sick and tired and so was I. He had become very nervous and cried a lot. He had a great deal of nervous movements. It was then that I felt that perhaps he had got a shock and I was worried and scared.

A respondent described the experience of her two sons:

It was a tragedy in both cases! No matter what I say, I cannot find words to describe it. The screaming!!! Oh my God!!!! I will never hear like it again! I left the clinic and went out and my husband was the one who stayed. After everything was over they called me to nurse the baby. On entering the room, I found my husband's face as pale as a white sheet "bafta bida" and the blood vessels bulging out of my son's face, just like the pictures you see of the African children in the famine. His face was so pale too "bafta bida." I could see an extraordinary expression of questioning on his facial expressions. I gave him my breast and all the time I was crying.

When I asked her about the expression on her son's face, she said:

With his eyes he was asking me, 'What have you done to me? Didn't you have mercy on me?' I will never forget what happened to my two sons when they were circumcised. It was really terrible. When I was feeding him he stopped sucking every now and then from the pain and kept looking at me as if he wanted to tell me something. It was a real tragedy. I hated myself. The conclusion is that I hated myself for circumcising my two sons.

This means that circumcision in both sexes and all ages is a sort of severe, painful stress, and that denial of this fact represents a social bias and discrimination against children.

In my research (Abd el Salam, 2000), the respondents' testimonies show a relation between age and rank and denial of circumcision hazards. The more senior respondents - in terms of age, or social, or profession-

al ranks – expressed more denial to the fact that male circumcision is painful and unnecessary. This attitude is an additional evidence of the relation between circumcision and patriarchal gender power politics. In patriarchal social organization, aging and possession of leadership offices or ranks imply possession of power. Such powerful individuals usually sympathize with the weak within limits that do not threaten their status as people responsible for social control (Janeway, 1980).

The age factor as a function of power may explain the contradictory statements of some doctors who justified their performance of MGM without anesthesia by the fact that the prepuce has no nerves; nonetheless, they observed that children suffer pain on circumcision. The feminist scholar Nancy Scheper-Hughes described three levels in dealing with the human body that start from the concrete to the abstract. The first and the most concrete level is the individual body. On this level, the body is treated as a human body that feels pain and pleasure. This is the level on which the individual is able to experience and respond to subjective concrete sensations. The second level is the social body, on which the body is treated as an abstract object without any individual attributes. On this level, society can inscribe its symbols on the body through concrete acts, such as circumcision. The third level is the body politics, on which society interferes to define and control the limits of what an individual can do with his/her body and what is forbidden (Scheper-Hughes, 1987). I suggest that in the case of the above-mentioned doctors, their observation and interpretation of the children's reaction to circumcision originate from two different social positions. Observation occurs at the level of the individual body and from the position of an individual relationship between the adult doctor and the child. Hence, the child's agony is acknowledged. On the other hand, interpretation occurs at the level of the symbolic social body, which is too abstract to experience concrete sensations and from the position of a communal relationship between senior adults and junior children. At that level, both doctors and children are representatives of abstract social categories rather than actual concrete individuals. Hence, the powerful party can comfortably deny the weaker party's sufferings.

Body Symbolism

In my field research, the respondents rarely acknowledged the fact that FGM and MGM imply loss of extremely sensitive tissues, and that both procedures violate bodily integrity. They often took erection as their point of reference as regards their beliefs about the male prepuce. Some respondents expressed their belief that the male prepuce hinders erection or at least

makes the penis look feeble. For example, one of them said: "the prepuce is nothing but a soft and dangling piece of skin", "hitta medaldela mortakheya". Such beliefs imply a deep conviction that the male prepuce is symbolic of femininity and hence its retention compromises a man's masculinity. This analysis is augmented by the respondents' perception of masculinity. Most of them stated that masculinity equals virility and both are reduced to erection. This perception is shared by both MGM proponents and opponents. MGM proponents said that the prepuce hinders erection, so, its removal is a prerequisite to fulfill complete masculinity, while MGM opponents said that the prepuce does not prevent erection, hence, circumcision is not necessary for full masculinity. This mode of reasoning reflects an adherence to the patriarchal thought that privileges erection as a symbol of sexual potency, and hence of political power (Paige, 1978). I argue also that this is the basis of the belief that FGM is more severe than MGM because FGM implies removal of an erectable organ. Some feminists also adopt this patriarchal belief that acknowledges erection while it neglects the fact that both FGM and MGM imply loss of extremely sensitive tissues, and that both procedures violate bodily integrity, and the human right to determine what is to be done with one's own body.

So, male and female circumcision do not serve men, women, or children as social categories. It rather serves the persistence of patriarchal gender power balance that presupposes a peculiar symbolic formation of the body to establish a clear gender differentiation. Accordingly, circumcision removes the delicate, protective, wet, and sensitive (all feminine characteristics) part from the male genitalia; and the strong, hard, active (all masculine characteristics) part from the female genitalia. Because circumcision results into useless unnecessary pain and harm for the individual, it is not a health procedure. It is a practice with symbolic and political connotations. Its hygienic justifications are nothing but a tool to motivate people to put such social body politics into action.

Language

The language that is used in the social event of MGM indicates its role as a tool to separate the male child from women and attach him to men. In my above-mentioned research (Abd el Salam, 2000), all respondents stated that they perceived male circumcision as a sort of rite of passage into manhood, and that a usual phrase of congratulation to the newly circumcised boy, whatever his age, is: 'Now you have become a man' (*Maborouk Ba'ait Ragel*).

Language shows also how circumcision is meant to establish an aggressive male figure who is superior to women. One respondent recalled that she heard a sig-

nificant congratulation phrase after her son's circumcision. She said: "My cousin congratulated the newly circumcised baby by saying, 'Never mind, this is the only time you will be hurt, after that you will hurt others.' *"ma'alihsh, el marra di inta 'illi ha tit'awwar, ba'd kida inta 'illi hat 'awwar"*. She added that she was really surprised by this comment, and that she felt that her cousin was dealing with the circumcised boy as if he was a man although he was still a baby. This mother got the impression that her cousin wishes that the baby would have the upper hand and that he was going to be a man and injure women. She found that it was an audacious statement. Why should he injure women? Although this cousin was implying something sexual, the statement did not give the impression that that was all to it. It made the mother feel that she wishes he would have the upper hand in everything (Abd el Salam, 2000).

The experience of this Egyptian mother matches an interpretation of the high prevalence of MGM in the USA in that American men are socialized to be aggressive and violent. MGM reproduces the imbalanced gender power politics because adult men will do to the society what was done to them in their infancy and childhood. The American psychologist Roland Goldman argues that violence against women is a consequence of MGM. Because MGM is done to baby boys before they acquire the spoken language, as adults, they cannot express it in language. Thus, their early trauma finds expression in a behavior that is traumatic to others (Goldman, 1997).

Language is suggestive of power politics in FGM as well. In Egypt, people who observe traditional female circumcision call the clitoris *zanbour*, i.e. wasp. They think that an intact girl is aggressive because of the retention of this active organ. In order to render her docile, and hence marriageable, they remove it. The newly circumcised girl is called *al aousa*, i.e., the bride. The whole linguistic vocabulary used in MGM and FGM establish an aggressive male/submissive female relationship.

Women's Participation in Genital Mutilations

Gender politics are operated in another way through genital mutilations. The respondents stated that women played an active role in the implementation of circumcision. Female nurses suggested circumcision of the baby to one of the respondents when she showed

some tendency to postpone it. Another respondent mentioned that the female members of his family used to hold boys tightly in order to fix them for circumcision. This last means of female involvement in MGM suggests that MGM is a rite of separation of the male child from his mother and female kins, who submit the child by themselves to society.

This is the case also with FGM. Many mothers would like to spare their daughters the suffering of FGM, but they cannot face the society. Thus, if the case is that when a father leaves the decision of FGM or MGM to the mother it means that he leaves it to society's opinion. In other words, she has actually no personal say in the matter, even if it appears on the surface that she is the decision maker as regards her children's circumcision. Mothers feel worried and sad for their children's sufferings, but they submit both of their sons and daughters to the knives of circumcisors because they cannot face the society if they did not. Thus, women contribute by their silence to the continuity of the already established gender power politics.

*Women have
to submit to
female genital
mutilation
if they wish to
be socially accepted*

Not only do women willingly offer their children to the patriarchal society as a sign of their acceptance of submission to patriarchal gender power politics, they are also not free to take decisions about their children. In patriarchal societies, women and children from both sexes have lower social status because of their economic dependence (Lerner, 1986). In such conditions, women are unable to make independent decisions. One of the women respondents stated

that leaving the son's circumcision decision to the mother means leaving it to the social opinion, not to her free choice for the baby. This situation perpetuates female inferiority because one of the signs of superior status is that the individual can control the products of his/her labor (Moore, 1988). Children are the most accepted and valued products of women by virtue of traditional patriarchal gender division of labor. However, children are not attributed to mothers and therefore do not belong to her but to their father and his kins after a period of maternal care. Thus, women are aware that they are not free to control what should be done to their children's bodies although most respondents who are mothers expressed worry and sadness for their sons' circumcision, exactly as many mothers feel towards their daughters' circumcision. By feeling obliged to act in this way, women, even the feminists among them, retain the feeling that they are

delegated by the society to implement the muted gender issues. Delegating women to reproduce and guard patriarchal norms and gender power balance is part of the traditional gender power politics (Janeway, 1980).

Who Really Imposes it: Men or Women?

Another evidence of the gender power political significance of genital mutilation is the difference between the reaction of men and women respondents towards it. Analysis of the responses of interviewees who were parents show that mothers were more expressive of their perception of their sons' sufferings from circumcision than fathers. Mothers were also more hesitant to allow circumcision than fathers. Following is an example of the difference between the reactions of a mother and a father to their son's circumcision. Both of them are intellectuals who support gender and reproductive rights and fight FGM on these basis. The father said:

She [the mother of the child] asked why we had to circumcise him? I told her, 'Because everybody has to be circumcised.' It never occurred to me to ask that same question. I added, 'He will be odd if he isn't.' She answered, 'Of course not. Who told you everybody is circumcised?' she was very nervous and anxious for her son. She used gender rights to support her argument. I told her that even all our Coptic friends were circumcised so why should we be the odd ones out? I couldn't keep him uncircumcised in a society in which everybody is.

While the mother said:

I asked the doctor before doing anything, 'Must boys be circumcised?' I was serious because I had no pre-established ideas. I didn't know why, but I found myself saying that there was no reason for male circumcision although I had no idea where I had got this information from. It just came to my mind by chance. Maybe because I was worried about my son. He said, 'Some people say it's not necessary.' I was surprised because the doctor was a man who observed religious rituals, such as prayers. I told him, 'Well, let's not do it.' I was about to take the boy and go home but his father insisted, 'It is over. We are here now'.

Another mother stated: "Although I did not refuse, it was his father who made the decision."

This is also the case with FGM. Although it is said that FGM is a procedure done by women to women with no male intervention, many women stated that they have to circumcise their daughters to ensure their chastity as girls and marriageability as young women, because men refuse to marry an intact girl. Even some

of them said that a husband may return a bride to her family if she is not circumcised. Thus, men play a role in both FGM and MGM. This role is sometimes implicit and sometimes explicit, but it always exists.

Medical Justifications as a Gender Power Game

Male and female genital mutilations were introduced to modern medicine in nineteenth century Victorian England, and spread from there to medical schools in the colonies and English speaking countries (Wallerstein, 1980). Medical justifications play a minor role in FGM now, but it still does in MGM. I argue that the justification of MGM by its being a preventive measure against cancer cervix in women is of a specific significance in the use of MGM as a patriarchal game. It is part of the social politics that serve to define each gender as dangerous to the other, and hence help to perpetuate tension between men and women. Patriarchal society teaches men and women to take their guard from the other gender. Thus, each gender considers the other dangerous. Hence, it is easy for women to extend their inherited biases to imagine that the male prepuce is among the masculine dangers. Baby boys are a good medium to achieve this objective because a baby boy is both male and young; hence, he is an appropriate and pliable object to fulfill the gender political objective of this symbolic wound. If males are left intact till adulthood, they are less likely to submit to the belief that their intact bodies are dangerous to women, or allow any doctor to "protect" women from cancer through male circumcision. Empirical evidence shows that the whole preventive argument is false. Intact males mount to 80% of the human males all over the globe, as MGM is practiced by about 20% only of humans. Where MGM is not a cultural tradition, neither women get more cancer cervix nor require their male partners to be circumcised to "protect" themselves from it. Thus, when women present their male children to the surgeon's scalpel to eliminate the assumed "danger" of cancer cervix, they implicitly collaborate in the replication of a tool of gender power politics by establishing the male body as dangerous to females. Now, with the defeat of the false hygienic justifications for male circumcision, its ugly and unfair face is revealed: a blood and flesh sacrifice presented to the patriarchal society.

Gender-Based Chauvinism

It is known that FGM is an evidence of male chauvinism because it establishes a submissive female versus an aggressive male sexuality (Abd el Salam, 1998; Toubia, 1993). FGM proponents believe that such carved femininity is more satisfactory to men, and assume that it does not imply a significant loss to women. Similarly, many respondents who declare that they are feminists or pro-women negate any relation

between MGM and male sexual problems. They say that unlike FGM, men do not complain from MGM. They add that even if men have complaints, they have to raise their issues by themselves. Such feminist respondents say that they are ready to stand against any harmful practice for women because women as a social category do not find sufficient social care, but are not ready to do the same for men. This attitude implies gender segregation at the political level because it treats the issue of genital integrity differently on basis of gender.

Such feminist respondents added that they are reluctant to raise the issue of male genital integrity because men are freer to express their sexual problems than women. This attitude implies female acquired feeling of helplessness which is dominant in traditional patriarchal society, and which is anti-hypothetical to women's emancipation and empowerment and gender equality. Thus, female chauvinism does not ensure stonger position for women.

Many feminist respondents consider gender issues in general, and the issue of genital mutilation in particular as issues of conflict between men and women in the first place, and not as issues of men's and women's equal rights. Such respondents who expressed their reluctance to raise the issue of MGM justified their attitude by saying that advocacy against FGM will bring a change in the social politics in the interest of women. MGM eradication will not bring such a change. This justification means that such feminists deal with a male child as symbolic of men who control women, hence they do not sympathize with him, which implies negligence of their own children's sufferings.

Feminist respondents stated that they are ready to fight against MGM if men explicitly pronounce that they have sexual problems because of MGM. This attitude implies indirect pressure on men. Men, like women, are besieged by a barrier of silence about genital mutilation. Women kept silent for a long period about FGM. They did not talk except when they were encouraged to do so. I suggest that men equally need public and social encouragement to declare their sufferings. Denying them such support is a function of female chauvenism, which is not analogous to feminism.

Control of Sexuality

One of the differences by which the respondents justified that MGM is not to be considered a gender issue is

that MGM is not part of the social politics that control sexual behavior. Some respondents noticed, through their fieldwork, that the majority of people intend to remind females of the pain that goes with circumcision as one of the tools of social control. Whereas males do not have to remember such a traumatic experience because it is not meant to impose such control on them. That is why FGM is delayed to a later age. MGM is not meant to intimidate boys regarding sex or guarantee their chastity, as is the case with females. That is why a girl is not circumcised when she is an infant because this would not teach her virtue, which means virginity. And in their opinion, also, this aspect of circumcision conveys a painful social message to females, as one of the respondents maintained: "When a female is hurt in this place and is conscious of it, she will be afraid; but,

if this happens when she is an infant, she will not associate this painful experience with any disciplining lesson." The respondents considered that this message does not apply to males, even if they are circumcised between the ages of 7-12, since their circumcision is accompanied with celebration, and they are taught that this procedure is a beautification procedure that prepares them for masculinity, reinforces their sexual potency, and keeps them healthy. This is different from the situation in female circumcision that is followed by restriction of the girl's mobility in the public space, pre-

vention from mixing with the other sex, affirmation of sexual taboos and prohibitions and stressing that circumcision is done to her to preserve the family honor.

Accordingly, some feminist men and women respondents thought that MGM is not so significant as FGM because it does not imply curbing and controlling of male sexuality. Nevertheless, circumcision was used as a social tool to control male sexuality throughout history. MGM proponent doctors were aware that it curbs male sexuality. Moses Maimonides, a Jewish physician who lived in the thirteenth century, recommended male circumcision to weaken men's sexual power and pleasure in order to improve their morals and guarantee their chastity (Aldeeb Abu-Sahlieh, 2000). Similarly, Victorian British doctors introduced male and female circumcision to the medical practice in the nineteenth century to "prevent" and "treat" masturbation (Wallerstein, 1980). Other respondents expressed implied perception of the element of social control in MGM, and even insisted that such control should persist on the assumption that it is sacred. An outstanding example of this attitude is a respondent

*Feminism is not
for women only,
it is there to build
new and fairer
social politics for
both genders*

medical doctor who said that circumcision is God's will at the philosophical level, and the father's will at the operational level. This view mixes God with father, and tries to give social control a sacred and philosophical nature. This respondent described circumcision as "tahzeeb," a term that means discipline, trimming and taming of the wild nature. He added that the objective of religion is to realize submission to social customs "inseia' lil 'urf." Of course, taming and submission apply to the weak party, the son by the father. This view identifies the father, who is the lord of the family, with the Lord of heaven, and makes the father the Lord's delegate who implements circumcision/control.

Genital Mutilations and General Power Politics

Genital Mutilations and the Spirit of Capitalism

In the age of capitalist transformation, dominant power politics have defined acceptable sexual behavior and even what should be written or said or not said about sex. Since production is the most important capitalist objective, expression of sexuality was restricted to what helps the achievement of that goal. An acceptable sexual relationship was only that which is between a married couple for the sake of reproduction of labor force. Any other forms of expression of sexuality was socially unacceptable. Both religious and medical institutions did not hesitate to interfere to impose control over sexuality since it was considered a chaotic situation if left without rules to regulate it socially. (Foucault, 1984) When added together - social alienation that is one of the characteristics of capitalist relations of production and the patriarchal biases against women and children - it is not strange that the society practices its control over bodies of individuals in every possible way so as not to allow any diversion from the main capitalist objective, which is production of commodities in factories and children in families (Trask, 1986). This explains the masturbation mania of the nineteenth century in the west that resulted in the medicalization of MGM and FGM.

Conformity

The essential reason for the Egyptian intellectuals' insistence on circumcizing their sons is their fear of difference. Significantly enough, there is no standard degree of circumcision to make all circumcised men look similar. The respondents described different degrees of their sons' circumcision. Some children have loose and others have tight cuts. Even some children are left with scars with irregular edges. This is evidence that the only common aspect among circumcised males is that they experienced genital cut. This fact defeats the myth of the necessity of morphological correspondence between the child and other men members of the community, especially his

father. However, MGM ensures that all people similarly submit their children to pain and cut. Thus, I suggest that MGM has a new function: its use as a tool to control any tendency towards rebellion or non-conformity. I perceive conformity to the tradition of MGM as a vestige of tribal social organization, where similarity between the community member is imposed and highly valued. In such mode of "mechanical solidarity", any disobedience, tendency towards individuality, or transgression of the similarity is considered destructive chaos that deserves severe punishment (Durkheim (1893, 1984). The age factor has a peculiar significance in terms of general and gender power politics. Tolerance of MGM, as a type of age discrimination, socializes people into submission to hurting their own children. Such submission curbs the development of critical thinking, which is a threat to despotic ruling system at the family and state levels, given that male children are particularly valued by the patriarchal family system. In other words, MGM is significant in that it replicates the terms of the patriarchal hierarchy, which requires submission of the lower to the higher rank age and/or gender groups. Thus, MGM has a significance in terms of the politics of social control. The element of conformity exists also in FGM, though for different reasons. Morphological similarity is rarely mentioned as a justificatoin of FGM.

However, conformity to the traditoinal honour/shame code comes to the forefront as regards FGM. It is assumed that FGM helps to guard the virginity of girls and the fidelity of married women; that is why women have to submit to FGM if they wish to be socially accepted.

Reproduction of Hierarchical Relations

In addition to its role in gender power politics, genital mutilation of both sexes establishes hierarchical power relationships at different levels of social organization. It encourages conformity to old traditions for no other reason than their antiquity; discourages taking any initiative towards change; and requires repression of any sympathy with individual sufferings if such sympathy challenges a tradition. Thus, continuation of FGM and MGM establishes a model of behavior characterized by absolute submission to the orders of seniors and an inclination to keep the status quo.

A study of 23 local communities that practiced circumcision found that a male member was not circumcised for his own good but for the sake of the leaders of the family or the tribe. These leaders used to force the father to circumcise his son without hesitating. The father's submission to the leaders of the tribe was considered a sign of loyalty to the patriarchal society. The ritual that expressed this loyalty was done by amputat-

ing part of the penis and not the ear for example, because it was the penis that was responsible for reproduction. Hence its relevance to the group's interests, since the departure of a senior male with his sons would weaken the power of the group that in turn would create a political and economic threat to the tribe. Interpretations of the Genesis story of circumcision in sociological terms shows that it represents conflicts within the tribe that increased in number and needed more males to defend it. That is why Jews identified circumcision in the Old Testament as a political agreement between God and Abraham, without giving it any medical or health explanation, as is the case with Jewish doctors and those who were convinced of their opinions today (Paige, 1978).

No matter what the cultural origin of circumcision, humans inflicted it on children as a tradition with the same motive: the predominance of senior males, and their superior social status over females and children. Therefore, circumcision sets the rule that states that it is naturally the powerful who have the upper hand, and make it an established part of social reality. (Montagu, 1991)

The same motive persists until now. The origin of social pressure to circumcise children is evidence of the role of genital mutilation in the reproduction of a hierarchical society. Senior kin and in-laws usually pressurize young parents to circumcise their children.

In my field research, respondents who are parents of male children did not think that they gain any personal benefit by circumcising their sons. They suffered because of their children's sufferings. However, they circumcised them because they were afraid to obey reason and challenge a conservative tradition. Acting like this, these intellectual respondents who used to lecture against FGM on a "rational basis" behaved exactly like grassroots people who circumcise their daughters. Analysis of the respondents' experience with their own sons' circumcision revealed that it is not in the child's best interest. They reported memories of bleeding, stress, pain, urinary tract infection, and behavioral changes after male circumcision, exactly like the women who recall the memories of their own and daughters' ccircumcision. Even the only respondent who could trespass the shock of his circumcision because he got a lot of psychological support and social compensation during and after his ritual circumcision ceremony said that other boys who were circumcised along with him were really shocked in spite of the supporting ceremony. Some of his peers resisted, tried to escape, and expressed verbal and non-verbal protest against circumcision. Nonetheless, when all of these respondents grew into senior men, they circumcised their sons. Thus, senior/junior heirarchy is always preserved and reproduced.

Genital Mutilatons and Social Order

To put patriarchal society in order, gender lines of demarcation should be clearly defined. Genital mutilation is one way of fulfilling such demarcation, even though on a symbolic level. For example, in some African tribes, circumcision could be explained by its being a symbol of the sexual duality of creation. According to this belief, a human individual is born with both feminine and masculine attributes since femininity is inherent in the male prepuce in the same manner that masculinity exists in the clitoris. Accordingly, circumcision is considered a purification of the male from the female characteristics. The female spirit is considered something that prevents the male from the ability of rational thinking, and so, a non-circumcised male is considered socially inept. Masculinity and femininity are both socially constructed in their relation to each other. A male is considered a man as long as he is able to penetrate a woman. According to the traditional belief, he is able to do so only after removal of the feminine part of his body through circumcision.

Moreover, by circumcision, the male loses his individuality and becomes a social being. Circumcision is considered a severing of the unity of the human being when the feminine part of the body is cut off; therefore, the male searches for a reunion that can only take place through marriage. Therefore, it is an essential motive for marriage. Also, the female who has been robbed of the male characteristics by circumcision accepts it when she searches for a husband. Accordingly, this makes the procedure of circumcision a procedure that turns the individual into a social being, seeking continuation through marriage and child birth. (Montagu, 1991). Field observations in Egypt suggest that MGM and FGM still have this function. People report that circumcison of both sexes is meant to ensure men's masculinity and women's femininity "tikhalli el ragel ragel wi el sitt sitt". There is even a widespread belief that a non circumcised man will never be able to penetrate a woman in copulation, hence, humanity will vanish if men are not circumcised.

How to Get Out of this Dilemma?

The Significance of the Intactivism Movement to Social Change

Intactivist movement is a worldwide action carried out by persons who advocate the right of bodily integrity for all people, hence, they act against both male and female circumcision, and consider them equally as genital mutilatons. Many feminists share in this movement. Feminism is different from female chauvinism, since it has an objective of bringing about social change and a more fair society for the weak and vulnerable social groups (Lennon and Whitford, 1994). The feminist point of view sees that

such social change should serve women in the first place, taking their ethnic and class specificity into consideration. However, all social groups that are marginalized and denied their full rights under patriarchy are meant to benefit from social change. Such groups include children of both sexes (Sacks, 1989). Feminism is not for women only, it is there to build new and fairer social politics for both genders, especially children.

The well established feminist notion “The Personal is Political” applies not only to women, but also to all inferior social categories, whose priorities are usually pushed to the end of the agenda within patriarchal power politics.

To end the social bias against women and children, we cannot disregard or marginalize gender issues on the assumption that they are trivial and that the first priority should be given to issues of economic growth in developing societies. This rationale is an over-simplification since it disregards the patriarchal social power politics. Therefore, development cannot be complete without taking gender issues into consideration (Hatem, 1986). Exposure of social traditions in relation to sexuality enhances social change for the benefit of the weak (Foucault, 1984). This analysis applies to children of both sexes as well as women. Therefore, it is not good for women to keep silent when it comes to issues that harm their children with the excuse that it is not one of the priorities in improving women’s social situation. When women revise their attitude, they will win the direct personal benefit of protecting their own children from a useless, hazardous, and maybe fatal injury. Second, they will get a general benefit, because their new attitude will prove that the women’s rights movement is useful to women, men, and the society as a whole. When women acknowledge that gender issues include men’s rights as well, more open-minded men will support women’s rights.

Egyptian women in particular should always remember that the first advocates against FGM in Egypt

since the 1920s were male doctors. These pioneers availed their knowledge to the whole society. Knowledge in itself is power, but also the right to attain it is controlled by a network of decision makers that have the power to provide individuals and communities with information or deprive them from it. Thus, it is not appropriate for women to hide any knowledge from the public on the assumption that such knowledge is about male bodily integrity, which is not their priority or concern. Women who do so play the same oppressive role which was long played against them, and which is antihypothetical to their full emancipation.

Thus, women are recommended to combine forces against both FGM and MGM. They should take the initiative to encourage men to break the barrier of silence about MGM, to support them, and show understanding when some of them show resistance or denial. Bringing an end to the silence that surrounded such a taboo issue for thousands of years needs patience and persistent efforts to move MGM from the arena of political and ideological conflict to that of the right of bodily integrity for all as a basic human right. Women’s defense of men’s right to bodily integrity and their work against MGM will not have a negative impact on their struggle against FGM. On the contrary, work against MGM will defeat the argument that is used by some doctors that they can perform a minor sort of FGM analogous to male circumcision, on the assumption that the latter is a simple “beautification” and non-harmful procedure.

In case of gender issues, cultural carving of the feminine and masculine bodies are two faces of the same coin. Coining new gender power politics needs consistent critical thinking versus sanctification of old beliefs; confrontation of the biases of power holders versus conformity; siding with the weak and voiceless versus fear of the strong; promotion of social change versus fixation of the status quo; and above all, ensuring male and female children’s right to bodily integrity as an absolute priority.

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* This study was sponsored by a post-masters grant from the sociology/anthropology department of the American University in Cairo.