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**Borders of the Mind: The Profound Paradox of female Genital Mutilation**  
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The last two months have seen developments on both sides of the Atlantic around the vexed topic of Female Genital Mutilation (FGM), which involves the mutilation of the genitalia of young women and girls for non-medical reasons. In Scotland the BBC [reported](#) that there was an increase in the number of women who had suffered FGM. Indeed, amid reports that girls were being brought to Scotland to be mutilated not only from the rest of the UK but also from mainland Europe, the NGO, [The Agency for Culture and Change Management](#), described the country as being regarded as a 'soft touch' by adherents of FGM. Although a crime since 1985, there have been no successful prosecutions in the UK of anyone involved in genitally mutilating young women and girls. This state of affairs has provoked growing consternation among human rights organisation, children's charities and women's groups, and [has resulted in a Parliamentary Enquiry due to be conducted by the Home Affairs Select Committee](#) early in 2014.

At the same time in the United States, a [report](#) by the gender violence research organisation Sanctuary for Families indicated that FGM is also on the increase on the western side of the Atlantic. Partly these rises are attributable to migration from Africa and the Middle East: they are a function of population mobility. Moreover, the elusively mobile nature of the crime is complicated by another aspect: during long holidays girls are often taken in the opposite direction, from their Western homes back to the lands of their family's origin to be mutilated – a practice known as 'vacation cutting'. Thus FGM is a crime that transcends borders. It is a transnational problem that so far has failed to receive the transnational solutions that might begin to combat it. But FGM also raises the question of borders in another way. For it engages not only physical and geographical borders, but borders of the mind. Indeed the profound paradox of the genital mutilation inflicted on females is that while a mobile crime, it very severely restricts the social mobility of women.

Since the practice principally affects marginalised and migrant communities, as a criminal justice and child safeguarding issue it has also tended to be marginalised. This has certainly been the British experience up until this point. A report by an intercollegiate group of Royal Colleges predicts that 24,000 girls in the UK under the age of 15 are at serious risk or will in fact be mutilated this year. It is difficult to grasp what this actually means. If one were to imagine the Royal Albert Hall, the venue of London's Promenade concerts, filled six times, that is how many girls from the UK face the prospect of genital mutilation in a single year.

The physical harm of the mutilation, beyond the intense pain (often the cutting is performed without anaesthetic) extends to number of serious side effects, such as tetanus, sepsis and infertility. Further, [the level of trauma inflicted](#) creates PTSD levels equivalent to those suffered from childhood abuse. With this array of pernicious consequences, why has the practice been sustained?

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The cultural myths justifying FGM vary among the 28 or so countries where FGM is practised. In some communities it is said that the mutilation cleans and purifies the girl; in others that it is cosmetically desirable. In still others lurid myths circulate about risks to the baby in childbirth from contact with the clitoris; elsewhere it is suggested that the clitoris may continue growing and become deformed. But stripped of pseudo-anatomical grotesquerie, FGM is ultimately and essentially a form of social control.

Within the practising cultures, stigma can attach to young women who have not been cut. For the procedure is designed to remove sexual pleasure from the woman, with a view to reducing the chances of promiscuity. Objectively it may actually be true that sexual desire is diminished or eradicated: many women report severe pain during subsequent intercourse. But the result of all this disfigurement and degradation is a measure of reassurance to a future husband of continuing spousal fidelity. This subjugation is achieved through two linked mechanisms.

First, there is coercion. Very often girls, who frequently (but not exclusively) are pre-pubescent, have little understanding of what is actually going to happen to them. They are taken, held down by a number of people, mutilated. In the most severe form of FGM (WHO '[Type III](#)') they are then stitched, leaving only a small hole for urination and blood, their legs strapped together for several weeks to prevent the reopening of wounds.

Second, and perhaps counter-intuitively given the intrinsic violence of the practice, there is a gentler mode of allurements. It is what Mary Jackman in the *Velvet Glove* called the '[coercive gleam of persuasion](#)' - a kind of suffocating surface benevolence. The cutting is claimed to be motivated by a genuine desire to do what is 'best' for the girl, so she retains her modesty, social status, marriage prospects. It must be remembered that although this practice operates in the interests of men, very often women participate in it. Either as 'cutters' who perform the mutilation or as mothers sending daughters to be cut. However, it must also be recognised that resistance to FGM has been triggered by organisations such as [Daughters of Eve](#) and the [Desert Flower Foundation](#), which have been propelled by the determination and agency of survivors of mutilation.

From a social theory perspective, of course, the work of French sociologist Pierre Bourdieu is of direct and immediate relevance to these forms of social control. In Bourdieusian terms, this practice can be viewed as the imposition of male domination with the cooption of older women. Its ostensible motivation - the wish to do what's 'best' for the girl - is for Bourdieu a '[misrecognition](#)' of her welfare. The inculcation of mindsets that operate to safeguard the victim's social capital – and very importantly that of the immediate clan - is ultimately a form of symbolic violence. As Bourdieu puts it, this is 'a gentle violence, imperceptible even to its victims'. It is vital to appreciate that Bourdieu's intention is not to 'blame' women, but to dissect the dynamics of their domination.

Therefore through the act of genital mutilation and its attendant rituals, the young girl not only has her future 'secured', but her position of subordination in the social structure

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cemented, her docility deepened, her subservience to her husband confirmed, her sexual desire removed. Socially, she is immobilised.

This means that, while the consistent and resolute enforcement of the criminal law is a necessary step in combating FGM, there is also the need to contest the cultural practices that endorse it. To get past what Virginia Woolf calls the '[hypnotic power of domination](#)', awareness of the lasting and devastating consequences of the practice needs to be raised. In fact a concerted and systematic campaign in the UK, akin to those on domestic violence and HIV, was [recommended by the intercollegiate group](#). Overseas, the UK government will [invest up to £35 million](#) in the next five years to raise awareness in ten 'priority' African countries which have high levels of mutilation. While welcome, the effectiveness of such interventions will be very carefully scrutinised. Such approaches must be part of the solution, however. Since for there to be a dramatic and lasting impact on the incidence of genital mutilation, change must come from within practising communities rather than being coerced by the threat of criminal sanctions.

Thus the real challenge is to assist adherents of FGM see past the traditional fortifications of culture, deeply grooved by the passing of centuries, and view FGM for what it is: the infliction of unnecessary physical and psychological gender violence. The desire to be sensitive to cultural 'traditions' must never come at the cost of being insensitive to the suffering and abuse of young women and girls. The argument must be forcefully made that this is not the imperialistic imposition of external values, but the protection of universally valid human rights.

But for meaningful change to occur there is unquestionably the need to recalibrate the intrinsic worth of young women in the affected communities, to appreciate their value irrespective of docility and marriage suitability. For the protection of [24,000 young women and girls in the UK and 3 million worldwide annually](#), we need to find ways to facilitate a departure from these historical pathways, to see beyond these borders of the mind.

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- The NSPCC's free 24-hour FGM helpline can be contacted at 0800 028 3550.
- The intercollegiate group of Royal Colleges report Tackling FGM in the UK can be found [here](#).
- The government multi-agency FGM practice guidelines can be found [here](#).

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