LUND UNIVERSITY

Female genital mutilation in the West: traditional circumcision versus genital cosmetic surgery.

Essén, Birgitta; Johnsdotter Carlbom, Sara

Published in:
Acta Obstetricia et Gynecologica Scandinavica

DOI:
[10.1111/j.0001-6349.2004.00590.x](https://doi.org/10.1111/j.0001-6349.2004.00590.x)

2004

[Link to publication](#)

Citation for published version (APA):
Essén, B., & Johnsdotter Carlbom, S. (2004). Female genital mutilation in the West: traditional circumcision versus genital cosmetic surgery. *Acta Obstetricia et Gynecologica Scandinavica*, 83(7), 611-613.
<https://doi.org/10.1111/j.0001-6349.2004.00590.x>

Total number of authors:
2

General rights

Unless other specific re-use rights are stated the following general rights apply:
Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the public portal

Read more about Creative commons licenses: <https://creativecommons.org/licenses/>

Take down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

LUND UNIVERSITY

PO Box 117
221 00 Lund
+46 46-222 00 00

— ACTA COMMENTARY —

Female genital mutilation in the West: traditional circumcision versus genital cosmetic surgery

BIRGITTA ESSÉN¹ AND SARA JOHNSDOTTER²

From the ¹Department of Obstetrics and Gynecology, University Hospital MAS, Lund University, Malmö and
²Department of Social Anthropology, Lund University, Lund, Sweden

Acta Obstet Gynecol Scand 2004; 83: 611–613. © Acta Obstet Gynecol Scand 83 2004

This article intends to present the Scandinavian legislation on female genital mutilation and explore the implications of the laws. Juxtaposing trends of plastic genital surgery in the West with claims that female circumcision may be a practice generally abandoned in Scandinavia, we highlight the double morality inherent in current public discussions. Finally, we pose the question: Is the legal principle of equality before the law regarded when it comes to alterations of the female genitals?

Key words: female genital mutilation; genital cosmetic surgery; legalisation; Scandinavia

Submitted 11 September, 2003

Accepted 23 March, 2004

Legislation in Scandinavia

Specific legislation on female genital mutilation (FGM) exists in Norway and Sweden, while the practice is forbidden under the general penal code in Denmark. Sweden was the first western country to pass a specific law in 1982, while the Norwegian law against female circumcision was introduced in 1995 (1). In Denmark, the practice of female circumcision has been punishable according to the more general ban of violence against the body since many years. In 2003, this legal section was reformulated to more specifically outlaw female circumcision in Denmark or on Danish-African girls abroad.

The Swedish law includes a prohibition of all 'operations on the external female genital organs, which are designed to mutilate them or produce other permanent changes in them (genital mutilation)'. Such operations 'must not take place, regardless of whether consent to this operation has or has not been given' (2). In the

Norwegian law, it is stated: 'any person who intentionally performs an intervention on a woman's sexual organs, thereby damaging those organs or causing them to undergo permanent changes, shall be convicted of sexual mutilation'. It is further added; 'consent shall not be a ground for exemptions from sanctions' (2). The relevant Danish legislation states: 'Any person who violates the integrity of another person's body with or without the consent of the other person, and cut or in another way remove the female external genitals completely or only partial, shall be liable to imprisonment for any term not exceeding six years' (3). What is obvious reading these laws is that age, ethnic background, and consent are irrelevant factors in a legal perspective. Hence, any change of the female genitals, which is not medically motivated, ought to be punishable. The laws were formulated to defend African women and girls from a harmful traditional practice (4–6), but legislation must be applicable to all citizens to meet with the legal principle of all citizens' equality before the law.

Abbreviations: FGM; female genital mutilation

Genital cosmetic surgery

The motives for genital cosmetic surgery among westerners are probably heterogeneous. Purely cosmetic surgery is defined in opposition to other forms of surgery, in that it supposes to change only the appearance of the patient (7). Mental and physical wellbeing seems to be prominent reasons for individual women. For the trend in general, it seems that ideals influenced by pornography play some role. The authors have found no systematic study on this issue in the Scandinavian countries, but evidence of a growing trend in the mass media (8–12). The procedures presented in the media include, e.g. reduction of the labia minora and tightening of the vaginal opening. In the mass medial accounts, these operations are presented as trends with beneficial outcomes when it comes to esthetics and sexuality.

Internationally, the issue of genital cosmetic surgery in relation to legislation has been highlighted (7,13). Allotey et al. (14) claim that the general acceptance of cosmetic labio plasty for nonmedical reasons, while society rejects the possibility of re-infibulation after delivery, is a sign of institutionalized racism in Australian society. So far, cosmetic surgery has traditionally remained a matter of little concern to the criminal law in Scandinavia.

The tradition of FGM among the Somalis in the Scandinavian countries

About 14 000 persons born in Somalia live in Sweden (15). Several thousands more were born in Sweden with at least one parent born in Somalia. 13 000 Somali citizens live in Denmark (16), while more than 11 000 Somalis have Norway as their new home country (17). Traditionally, a majority of the Somali girls go through infibulation before entrance to puberty, which involves excision of parts of the labias, clitoris, and stitching of the vulvo-vaginal opening. The primary motives for female circumcision in Somalia are that the practice is experienced as a religious duty and a prerequisite for marriage (18). Recent research shows the tendency of a general abandonment of this tradition when Somalis have come to live in countries in the western world (18–20). A qualitative thematic in-depth interview study with Somali immigrants in Sweden during 2000 indicates that Somali families in exile abandon the tradition of circumcision as the 'normality' of the state becomes questioned living in exile. The main motive power behind change is an internal debate within the Somali community on an Islamic view, ending up in a general conviction that Islam forbids any harm inflicted on God's creation (21).

There is also a fear of Swedish social authorities and an awareness of the risk of losing custody of the children, in contrast to the situation in Africa's Horn where the communities support the practice of FGM. The possibility of a drastic abandonment of 'deeply rooted' traditions is proven by the example of how abruptly foot-binding of small girls in China was left behind: a thousand-year-old tradition was abandoned within one generation (22). A drastic abandonment of female circumcision in connection to migration has also been evident among other ethnic groups than the Somali, like the Ethiopian Jews who have migrated to Israel (23) and Sudanese living in Cairo (24).

None of the Scandinavian countries has any documentation of cases of unlawful FGM among African exiled groups (1,25). In fact, France is so far the only western country where cases of illegal female circumcision have been brought to court. Since 1978, at least 25 prosecutions of West Africans circumcisers and parents have taken place (2). These law cases have concerned only West Africans. Studies conducted by Morison et al. (26) and Dorkenoo (27) suggest that there have been incidents of circumcision of British-African girls. No figures are given though. The study by Morison et al. shows that the longer a Somali immigrant lives in exile, the more likely it is that he or she abandons the tradition of female circumcision. In Denmark, a heated debate on female circumcision has led journalists to scrutinize the empiric evidence of female circumcision taking place in Denmark. Interviews with physicians at Danish schools, where in some places screening of all children, who start attending school take place, have led to the conclusion that the practice of female circumcision is a nonexistent phenomenon in Denmark (28).

The claims of a general abandonment of female circumcision in Scandinavia should not be confused with the fact that there are many Scandinavian-African women who are circumcised and need special attention when provided care (29–31).

Activists and officials have launched campaigns in Scandinavia with the objective to eradicate the practice of FGM in African exile groups. At the same time, there is a growing occurrence of genital cosmetic surgery, in the UK and US called 'designer vaginas', among members of the majority populations in the West. How does this phenomenon fit with the laws against FGM?

Concluding commentary

There is a generally accepted understanding that female circumcision is a practice widely upheld by

Africans in exile, despite the lack of documented cases (25). No authority in Scandinavia or in any other of the European countries has so far, to our knowledge, revised the clinical acts among plastic surgeons and gynecologists regarding cosmetic genital surgery. Many of these operations, which permanently change the external genitals, are probably performed in the lack of physical or psychiatric motives and should therefore be regarded as violations of the laws on FGM.

The aim of this article is not to argue that traditional female circumcision ought to be legalized, but to highlight the double standard of morality in this field. Scandinavian-Africans are tacitly accused of being trapped in primitive culture and pictured as potential 'mutilators' in public discussions, while evidence is weak or nonexistent. At the same time, genital alterations in non-African women seem to be widely accepted. As long as the legislation does not make distinction between adults or minor nor motives, the official stand in the Scandinavian countries violates the legal principle of all citizens' equality before the law. Blur in the legal field produces uncertainty in decision-making: who is to decide, and on what grounds, what is to be categorized as FGM, and what is to be categorized as plastic genital surgery when it comes to, e.g. and adult black woman raised in Sweden?

A revision of the range of relevant legislation as well as a revision of practice of genital cosmetic surgery ought to be carried out by the Scandinavian board of health and welfare, as FGM as well as genital cosmetic surgery cause permanent injury. In the future, clearer guidelines for gynecologists and plastic surgeons may be helpful in clinical work. Clinicians are facing not only African immigrant women, but also women from the majority populations who may have low self-esteem due to trend-based ideas about what is normal and what is beautiful in the genital area. The relation of legislation to different changes of the female genitals needs to be sorted out, for a general application of the law including all patients – regardless of their ethnic background.

References

- Essen B, Wilken-Jensen C. How to deal with female circumcision as a health issue in the Nordic countries. *Acta Obstet Gynecol Scand* 2003; 82: 683–6.
- Rahman A, Toubia N. *Female Genital Mutilation: A Guide to Laws and Policies Worldwide*. London: Zed Books, 2000.
- Danish Penal Code, Section 245a.
- Svenska regeringens proposition om förbud mot omskärelse av kvinnor. Proposition 1981/82:172. (Governmental bill on prohibition of circumcision of women).
- Norske Barne-og Familjdepartementet. *Handlingsplan mot kjønnslemlestelse*. (Governmental Action Plan against Female Genital Mutilation), 2001.

- Undervisningsministeriet, Denmark. Vi har alle et ansvar. (We all have a responsibility), 2003.
- Sheldon S, Wilkinson S. Female genital mutilation and cosmetic surgery: regulating non-therapeutic body modification. *Bioethics* 1998; 12: 263–85.
- Amelia, May 2002 (Magazine, in Swedish).
- Silikon, March 2002 (Magazine, in Swedish).
- Aftonbladet, 4 August 2002 (Magazine, in Swedish).
- Tara, December 2002 (Magazine, in Swedish).
- Verdens Gang, 24 March 2000 (Newspaper, in Norwegian).
- Mason C. Exorcising excision: medico-legal issues arising from male and female genital surgery in Australia. *J Law Med* 2001; 9: 58–67.
- Allotey P, Manderson L, Grover S. The politics of female genital surgery in displaced communities. *Crit Public Health* 2001; 11: 189–201.
- Statistiska Centralbyrån 2002 (Statistics Sweden).
- Danmarks Statistik 2003 (Statbank, Denmark).
- Statbank Norge 2002 (StatBank, Norway).
- Johnsdotter S. Somali women in western exile: reassessing female circumcision in the light of Islamic teaching. *J Muslim Minority Affairs* 2003; 23: 361–73.
- Talle A. Om kvinneleg omsjering: Debatt og erfaring (in Norwegian). *Det Norske Samlaget* 2003, Oslo 2003.
- McGown R. *Muslims in the Diaspora: The Somali Communities of London and Toronto*, 1999. Toronto: University of Toronto Press, 1999.
- Johnsdotter S. *Created by God: How Somalis in Swedish Exile Reassess the Practice of Female Circumcision*. Lund: Lund University, 2002 [Dissertation].
- Mackie G. Ending footbinding and infibulation: a convention account. *Am Sociol Rev* 1996; 61: 999–1017.
- Grisaru N, Lezer S, Belmaker RH. Ritual female genital surgery among Ethiopian Jews. *Arch Sex Behav* 1997; 26: 211–5.
- Fåbos Häusermann A. *Embodying Transition: FGC, Displacement, and Gender-making or Sudanese in Cairo*. In: *Feminist Review*: Routledge, 2001: 90–110.
- Johnsdotter S. FGM in Sweden: Swedish legislation regarding 'female genital mutilation and implementation of the law'. EC-Daphne project. Lund: Lund University, Research Report in Sociology, Department of Sociology, January 2004.
- Morison L, Dirir S, Warsame J, Dirir A, Elmi S. *Experiences, Attitudes and Views of Young, Single Somalis Living in London, on Female Circumcision. A Collaborative Project Between the London Black Women's Health Project and the London School of Hygiene and Tropical Medicine*. London: London School of Hygiene and Tropical Medicine, 1998.
- Dorkenoo E. *Cutting the Rose: Female Genital Mutilation: The Practice and its Prevention*. London: Minority Rights Production, 1994.
- Berlingske Tidene, 31 January 2003.
- Kangoum AA, Flodin U, Hammar M, Sydsjö G. Prevalence of female genital mutilation among African women resident in the Swedish county of Östergötland. *Acta Obstet Gynecol Scand* 2004; 83: 187–90.
- Essen B, Bodker B, Sjöberg NO, Gudmundsson S, Östergren PO, Langhoff-Roos J. Is there an association between female circumcision and perinatal death? *Bull World Health Organ* 2002; 80: 629: 32.
- Essen B, Bodker B, Sjöberg NO, Langhoff-Roos J, Greisen G, Gudmundsson S et al. Are some perinatal deaths in immigrant groups linked to suboptimal perinatal care services? *BJOG* 2002; 109: 677–82.

Address for correspondence:

Birgitta Essén
Department of Obstetrics and Gynecology
University Hospital MAS
SE-205 02 Malmö
Sweden
e-mail: birgitta.essen@obst.mas.lu.se