

Female Genital Mutilation: Successful Social Change Exemplified by Israeli Bedouin and Ethiopian Jews

R. Belmaker

Ben Gurion University of the Negev, Beersheva, Israel

Female genital mutilation (FGM) is practiced in many areas of the world including the Middle East, Africa and Australia. Although it is most common in Muslim populations it is not a dictate of Islam. It often has acute medical consequences such as bleeding and infection and later consequences in the adult female on sexual function are probable. There is great variability in the actual mutilation performed which varies from removal of the clitoris and labia minora and parts of the labia majora in the Pharaonic type; the Sunni type involving removal of the prepuce of the clitoris only. In the 1980's this practice was reported among Bedouin tribes, originally nomadic, in the southern area of Israel. A study was done to determine the type of FGM, its epidemiology and motivation. Key community women leaders reported to know about the practice were interviewed by an Arabic speaking woman. It was found that the practice was normative in six tribes in which all females were said to undergo the procedure in their teens. Motivation for the procedure was described as a method to improve "cooking" abilities of the young girl. It was always done by women. Men were not involved and change of sexual function was rarely mentioned as a motivation for the procedure. Almost all of the women interviewed intended to continue the practice by performing FGM on their daughters including educated women who were teachers, dental assistants or university students. None of the women involved in the interviews as informers or women who had had the surgery could describe what was actually done. A second study was therefore done based in the obstetrical clinic where only women from tribes reporting to undergo FGM were examined for signs of FGM by an experienced gynecologist in the presence of an Arabic speaking female nurse and translator, as part of a gynecologic examination that was indicated for other reasons. In all cases the introitus was carefully examined, the prepuce lifted, the labia separated and individually examined. In no cases was clitoridectomy or any damage to the labia found. All women had a small scar from a 1cm incision somewhere on the labia or prepuce of the clitoris. This study concluded that the importance of the ritual in this population was unrelated to its severity. The ritual had apparently become over time a small symbolic scar, even though this population continued to believe in its importance.

By contrast, a group of Ethiopian Jews who had immigrated to Israel was interviewed via an Amharic translator and examined during routine gynecological examination in the same manner as the Bedouin group above. In Ethiopia FGM is universal among Christian, Muslim and Jewish groups. All women interviewed reported that FGM was universal in Ethiopia but none intended to continue this practice with their daughters. All stated that this was a practice that would be left behind in their country of origin. On physical examination many of the women had total amputation of the clitoris. The conclusion of this study was that the severity of the operation performed had no relation to the social and cultural adherence to the operation, since the Ethiopian Jews who practiced a more severe form of the operation intended to abandon this practice while the Muslim Bedouin who had a much milder form intended to continue it.

A follow up study in 2009 of the Bedouin population of southern Israel has found that FGM had disappeared, both by self report of women under the age of 30, and by physical examination of women under the age of 30 in an obstetrical clinic. These results suggest an optimistic approach toward cultural change involving unhealthy cultural practices and emphasize the importance of cognitive approaches to cultural change.