

NOT ALL AFRICAN WOMEN WANT TO BE SAVED:

Examining Colonialism and Cultural Relativism in the
Female Genital Cutting Discourse Using the
Capability Approach

ABSTRACT

In this paper, I use Sen and Nussbaum's capabilities approach to examine the global female genital cutting debate. In doing so, I explore how and why African feminists protest the intrusion of Western feminism into this issue and the conflicting "facts" in this debate. I find that women who support FGC and those who oppose FGC are using the same capabilities to understand FGC but interpret these capabilities in different ways. Finally, I explore what this analysis can tell us about the dangers of universalizing Western philosophy to African contexts.

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POV 423

Introduction

To advocate for justice requires, in my view, two steps; the recognition of an injustice, and then the identification of a solution that would right this wrongdoing. In the literature produced by Western scholars on the controversial topic of female genital cutting, often referred to as female genital mutilation or female circumcision, the focus has been narrowed to the second half of this equation: the identification of a solution that would end female genital cutting. This paper seeks the answers to a different set of questions, questions that arise when one interrogates the wide set of assumptions that is fundamental to the approaches that have been taken such far. Why has female genital cutting been recognized as an injustice? What assumptions, worldviews, and philosophies have been utilized in the construction of female genital cutting as an injustice requiring a solution, and what role have colonialism and its varied legacies played in this construction?

Broadly, this paper will address the global female genital cutting debate by framing the arguments made on both sides with the capabilities approach. This is for two main reasons. The first is that translating these arguments into a common language, so to speak, will allow us to better understand how female genital cutting is conceived of by those who respect its role in African societies and those who campaign for its eradication. The second reason is to gain insight into the use or validity of applying the capabilities approach to cross culturally in the context of a world shaped by colonialism. To this end, I will be focusing on the female genital cutting debate surrounding Africa, as African feminists have been at the forefront of the critique of the universalism of Western feminism. My goal in this paper is not to draw conclusions about whether or not female genital cutting is a valid practice, or one that should be eradicated or preserved. Rather, I will explore which voices have been given precedence in this debate, from

where they draw their presumed impartiality, and what this suggests for future movement forward in the global female genital cutting debate.

Methodology

In order to accomplish this, I will first outline my theoretical framework: the capabilities approach. To do this, I will draw upon Amartya Sen, its original theorist, to outline the approach. I will also use the work of Martha Nussbaum, who has elaborated on Sen's work and encouraged a cross cultural use of capabilities theory. I will also use Nussbaum's list of Ten Central Capabilities as the common list from which I will analyze the arguments made in the female genital cutting debate.

To approach the topic of the global discourse surrounding female genital cutting as practiced in Africa, I have done a synthetic literature review of articles and campaigns formulated by both advocates for the continuation of female genital cutting and the eradication of female genital cutting. I will elaborate on the terminology I will be using throughout this capstone, especially that referring to both female genital cutting and different kinds of feminisms. Then, as an example of the role female genital cutting can play in African societies, I will look at Sudan as a case study. I will then explore the origins of the global female genital cutting debate. Here I will include sources that vary from the documents that sparked the global feminist outcry to analysis of these efforts 30 years later. Then I will transition to African women's responses to the arguments being made by Western feminists in the late 1970s and early 1980s, including my analysis of which capabilities each side of the debate felt that they were defending. Finally, I will apply this analysis to the current arguments surrounding female genital cutting debate. When choosing sources for all of these time periods, both for and against female genital cutting, I am seeking out sources from African women. While this includes some

scholarly sources, I have also chosen sources that are not from scholarly outlets. This is deliberate – many African women who have experienced FGC and who have written about their lives or who have been interviewed about their lives do not necessarily belong to academia. I feel that their voices and perspectives need to be included in my analysis of this debate.

To find scholarly articles, I have used resources provided by the Washington and Lee Library, including the stacks and online databases. To find the voices of African women in non-scholarly works, I searched for informational pieces about FGC that included the voices of African women. It is surprisingly difficult to find the stories and opinions of African women about FGC where their voices stand alone. Far more common is the news article, written in a sensationalist style, in which African women are quoted in a few lines. Interestingly, even searching for anti-FGC advocates leads to many websites in which their words seem to be grossly taken out of context; examples include articles demonizing Islam or claiming that immigrants want to practice FGC on American or British children. I found the stories, in their own words, of women who were both raised in African countries, or women who were raised in Western countries with strong ties to their parents' homeland.

Theoretical Framework: The Capabilities Approach

I will be using the capabilities approach to discuss claims made about poverty, justice, and quality of life in the global discussion surrounding female genital cutting. Amartya Sen and Martha Nussbaum's capabilities approach "can be provisionally defined as an approach to comparative quality of life assessment and to theorizing about basic social justice" (Nussbaum 2011, 18). In creating comparisons using the capabilities approach, the unit of measurement is a distinct person: what can an individual person do or be? Nussbaum stresses that the capabilities approach focuses on choice, freedom, and self-definition, noting that each person has individual

wants, needs, and desires such that one cannot say unilaterally what is good for an entire population (Nussbaum 2011).

Sen's use of the capabilities approach is concerned with comparison for quality of life assessment. He begins with the ideas of the *focal variable* and the *evaluative space*. When evaluating inequality, the focal variable is "the variable on which the analysis focuses, in comparing different people" and the evaluative space is then the grouping of focal variables relevant to the analysis (Sen 1992, 2). This serves to standardize the criteria to which each party in the analysis is being held. To ensure justice requires that something be equalized, but to equalize one variable might result in inequality in another – but the aim is to have an inequality that does not result in an injustice. For example, equalizing income might result in unequal qualities of life if some portions of the population have health problems that require that they spend a larger portion of their income (Sen 1992). The focal variables on which Sen and Nussbaum focus are functionings and capabilities. A person's functionings "represent parts of the state of a person... the various things that he or she manages to do or be in leading a life" while a capability "reflects the alternative combination of functions the person can achieve, and from which he or she can choose one collection" (Sen 1993, 31). In other words, a person's capability set is a collection of realistic possibilities, and that person's functionings are the paths that person chooses to pursue from all of their options. A capability set, in Sen's view, reflects a certain level of freedom; therefore, when capability sets are restricted, there is the possibility of injustice (Sen 1993, 33). Importantly, when comparing capability sets as freedoms, Sen does *not* believe that "freedom must be valued independently of the values and preferences of the person whose freedom is being assessed" (Sen 1993, 34). Additionally, Sen views a person's wellbeing

as being made up of a set of that person's functions, "*seen from the perspective of her own personal welfare*" (Sen 1993, 36, emphasis added).

As mentioned before, freedom and choice are seen as having intrinsic value in the capability approach. Even so, Martha Nussbaum has argued that even the freedom to choose has limits. While she does not believe that the government has a right to determine a certain type of functioning for its citizens without providing them with the choices of a capability set, "children, of course, are different; requiring certain sorts of functioning of them... is defensible as a necessary prelude to adult capability" (Nussbaum 2011, 26). The example Nussbaum uses is schooling – although others could stretch this definition to the functioning of being able to appear in society without shame. This begins to touch on which capabilities we believe are the most important - which ones should be regulated, and which should be up to the free will of the population? To begin to name important capabilities, Nussbaum has created a list of ten "Central Capabilities": (1) Life; (2) Bodily health; (3) Bodily integrity; (4) Senses, imagination, and thought; (5) Emotions; (6) Practical Reason; (7) Affiliation; (8) Other species (9) Play; and (10) Control over one's environment (Nussbaum 2011).

There are notable distinctions between Sen's conception of the capabilities approach and Nussbaum's conception of the capabilities approach (Clark 2005). Sen is more flexible when it comes to the applications of the capabilities approach; his framework "exhibits a considerable degree of internal pluralism" that allows for different applications of the approach (Clark 2005, 5). Therefore, unlike Nussbaum, Sen has not created a list of capabilities, nor does he advocate for any universalism, instead preferring that the selection and valuing of different capabilities be left to the personal judgement of the individual person (Clark 2005, 5). Of course, when advocating for the dismissal or preservation of traditional customs, there may be conflict

between the group and the individual. Sen does not see the lack of a list of capabilities as an indication of the “incompleteness” of his approach, suggesting that there are many methods for listing and ranking capabilities. Nussbaum, on the other hand, has drawn on Aristotle to create her list of ten central capabilities that she feels “should be embodied in constitutional guarantees, human rights legislation and development policy” (Clark 2005, 7).

In this paper, I do not seek to apply the capability approach with the intent of using it as a tool for cross-cultural evaluation to draw conclusions about the validity of arguments. Rather, I intend to interpret arguments made by Western and African feminists using the language of the capabilities approach, most notably which of the ten central capabilities women are prioritizing in their conceptions of the good and the just. When talking about female genital cutting, I assert that African feminists and Western feminists are failing to communicate because they are thinking and reflecting on how female genital cutting affects the same or similar capabilities but interpreting this effect in different ways.

Terminology and Technicalities

What is Female Genital Cutting?

In this paper, I will be using the term female genital cutting (FGC) because I believe it is the most neutral of the available terms for the same practice. It is descriptive but not graphic, and it is neither the term used by the most advocates of FGC nor the term used by the most opponents. The practice known most commonly as female genital mutilation (FGM) has a variety of different names all with specific and distinctive connotations and supporters. The use of FGM over female circumcision or excision is not only political but tied to social and cultural references. Female genital mutilation is a term that is deliberately provocative, with the word “mutilation” serving to shock and disgust the typically Western audiences, and it implies visceral

horror, pain, and unnatural bodies. This term can be alienating for the women and groups who practice FGC because for them, the cutting is not mutilation at all. Mutilation suggests malice, but the supporters of FGC argue that the cutting is not done to harm but done to ensure the future of a girl such that she can marry, be accepted in her community, and live a normal life.

Supporters of the term argue that it is the only term that does justice to the trauma of the practice, and that it evokes the abhorrent feelings that the practice should evoke, as well as the sense that these women or girls are being forcibly punished in some way. Other opponents of FGC use “excision” and “infibulation” which are more clinical and medical but describe very specific types of FGC.

Supporters of female genital mutilation prefer the term female circumcision; however, the use of this term had drawn heavy criticism. This criticism stems from the idea that the term draws an unwarranted comparison between male circumcision and FGC. It is argued – primarily by Westerners – that male circumcision has health benefits while FGC does not, and that male circumcision has a religious aspect that FGC lacks (Darby and Svoboda 2007). A more salient argument says that male circumcision does not lessen male sexual pleasure and once it heals, has few ill effects to the person while FGC typically removes the main organ of female sexual pleasure and can cause life-long health risks. Additionally, male circumcision, while still the medically unnecessary removal of healthy flesh for cosmetic or social purpose, is not viewed as the oppression of an entire gender in order to provide others with sexual pleasure and security in the same way FGC is framed, especially by the West. However, supporters argue that both procedures are forms of cosmetic surgery, both can be used as rites of passage for young adults, and both carry health risks and therefore the name is more accurate.

FGC describes the removal of various parts of the female genitalia for a variety of reasons. The World Health Organization (WHO) has defined four types of FGC. Despite WHO's opposition to FGC, their definitions are generally medically objective. Type 1 is the "partial or total removal of the clitoris... and in very rare cases, only the prepuce" and is medically referred to as a clitoridectomy (World Health Organization 2018). Type 2 is "the partial or total removal of the clitoris and the labia minora ... with or without excision of the labia majora," also known as excision (World Health Organization 2018). Type 3, also called infibulation, is "the narrowing of the vaginal opening through the creation of a covering seal...with or without removal of the clitoris" (World Health Organization 2018). Finally, the WHO defines Type 4 as "all other harmful procedures to the female genitalia for non-medical purposes, e.g. pricking, piercing, incising, scraping and cauterizing the genital area," which must be noted is a wide definition that is biased against FGC – but might also include the Western practice of genital piercings that would not typically be considered FGC (World Health Organization 2018).

The health risks of FGC must be addressed, but there is strong dissent between Western health professionals and some health professionals in areas where FGC is practiced. For example, some Muslim doctors in Egypt have claimed that FGC has health benefits for women that include reduction of sexual desire, 'cleaner' genitals that lower risk for cancer, AIDS, sexually transmitted diseases, microbes, and other infections (Darby and Svoboda 2007). Conversely, the WHO presents a long list of possible complications including: fever, infection, hemorrhage, severe pain, urinary problems, shock, death, vaginal infections, menstrual problems, keloids, sexual problems, increased risk of childbirth difficulty and newborn death, and further surgery (World Health Organization 2018). There is some middle ground with supporters of FGC who acknowledge that there are health risks with FGC, but they say that the benefits of the

procedure outweigh the risk of health complications, which they insist are both rare and minimal (Khazan 2015).

Finally, I would like to acknowledge that while this is the physiological description of FGC, it is not the sum or the entirety of FGC. There are deep socio-cultural meanings embedded in the practice that extend beyond physical change. For example, in Western practices, the cutting of one's hair can extend beyond the physical embodiment of the change. Haircuts and styles can be done to signal group membership and beliefs, specifically one's sexuality, religion, or even status as a neo-Nazi (Pergament 1999). The alteration of teeth through braces can also be seen as having similar meanings. Although it is 'just' a physical alternation, it carries many statements about aesthetics, wealth, and class. To limit a description of FGC to just the physical alternation is to fail to contextualize the physical change in the social or cultural milieu. To this end, there is a more nuanced discussion of the role of FGC in society to follow.

Western and African Feminisms

To analyze a debate about culture, women's issues, and choice in Africa without closely examining the tension between feminism and colonialism would be remiss. To understand contemporary constructions of gender in Africa – including which rites of passage are seen as entrances to womanhood, how sexuality is envisioned and performed, and the role of women in changing their cultures – one must examine the role of Western colonialism and modern Western action in Africa. Oyèrónké Oyěwùmí, a prominent African feminist, insists that it is necessary not only because the West shaped and controlled the formation of modern African states, but also “because of the continued dominance of the West in the production of knowledge” (Oyěwùmí 2004, 25). This is one of the key conflicts in this paper: while I do examine who has the privilege of deciding which cultural customs are harmful and which are

valuable, I also ask who has the privilege of creating the criteria by which African customs are judged. I differentiate between Western feminism and African feminisms in this paper because the idea of a universal feminism is a fundamentally white, Western feminism.

Feminism is recognized, even by African feminists, as “one of the most important approaches to the interpretation of Western society that has been developed in recent times” and invaluable to understanding both Western society and colonialism as it was practiced by the West on African societies (Oyěwùmí 2004, 25). However, the way in which white feminists from the West have attempted to make their movement into a *universal* movement and insist “that it must be adopted by all women in the world and be used to deal with their specific and concrete problems” has been dismissed by women who identify as African feminists as a form of resistance (Mangena 2003, 98). African feminists see that feminism was not a space that was created by African women or *for* African women, despite claims to universality. In fact, the push of Western feminist values by Western feminists can be seen by many African women as forms of “cultural imperialism” that is used by the West to “[undermine] the philosophical ideologies and belief system of African peoples” (Nkealah 2016, 62). In response, African feminists have set out to distinguish their study of gender in their societies.

Therefore, I use the terms “Western feminism” and “Western feminists” to refer to the “feminism that is entangled with the history and practice of European and North American imperialism and the worldwide European colonization of Africa, Asia, and the Americas.” (Oyěwùmí 2004, 3). This is a feminism that believes strongly in universal feminist values and the ability of those values (always formulated through Western philosophy) to be applicable to *all* women in *all* situations. I use “African feminisms” and “African feminists” to refer to “indigenous feminist models that aim to speak feminism from (1) an African cultural

perspective; (2) an African geopolitical location; (3) and an African ideological viewpoint” (Nkealah 2016, 62).

The Role of FGC In Sudan

Of the countries which practice FGC, Sudan is one of the few countries in which infibulation (Type 3 by the WHO definition) is the most common form of FGC. Also called Pharaonic circumcision, infibulation’s aim is smooth scar tissue and a small hole for the release of blood and urine. The small opening must be surgically widened before intercourse and before a woman gives birth, although after birth it is common in some region of Sudan for women to be re-infibulated, as they would be upon divorce or widowhood. (Hayes 1975, 620). Often, given that infibulation is done through the most extreme removal genital tissue, anti-FGC activists use infibulation as the example of how damaging and dangerous FGC can be. However, as two anthropologists, Janice Boddy and Rose Oldfield Hayes, have written, infibulation plays an important role in Sudanese culture and the ways in which Sudanese men and women relate to the world around them. Despite the practice being outlawed by the Sudanese government in 1949 (under pressure from the British), the laws have “never been internalized by the social group... the custom is still an integral, positive- functioning component of the familial complex, and so, indirectly, of the entire socio- cultural system” (Hayes 1975, 622).

Boddy’s ethnography describes the forms and expectations of gender in Sudan, specifically the Northern Arabic-speaking Muslim Sudanese populations in the late 1980s. The village Boddy stayed in, Hofriyat, allowed Boddy to observe their practices, but Boddy also explored the idioms and metaphors used in Hofriyat as a way of understanding the underlying and reoccurring themes and motifs in their cultural framework, particularly concerning gender. To be male is to be open, not only to be allowed to leave the enclosed home, but to venture out

into the world and return, to participate in the local or global economy, and to be involved in politics (Boddy 1988, 5-6). To be female is to be enclosed – in obscuring clothing, in the home surrounded by mud walls, and to be focused inward: on the family, on fertility, and on controlling one's own sexuality. Male children are circumcised at around the same age female children are cut: the “veil” of the penis must be removed to open male children, and the genitals of the female children must be excised and then infibulated to close them and transform them into women (Boddy 1988, 5). It is only after these operations that male and female children are considered gendered by society, as “prepubescent circumcision accomplishes the social definition of a child's sex by removing physical traits deemed appropriate to his or her opposite” leaving only the male or the female genitalia behind (Boddy 1988, 5). A penis enclosed by the foreskin is too feminine, and open labia are considered too masculine; before the procedure, a child is ambiguously gendered (Boddy 1988). After genital surgery, male and female children are allowed to perform their genders in ways they could not before, completing gender-specific tasks and being increasingly segregated by gender (Boddy 1988, 5).

The FGC practiced in Sudan is done without a doubt to restrict a woman's sexuality, but this should not be interpreted as done *by men* to restrict a woman's sexuality. Returning to cultural conceptions of womanhood, the cutting has deeper meanings that resonate with women as well as with men. FGC creates the woman out of the child; without it, she would be unmarriageable, unclean, impure, and infertile (Boddy 1988, 6). The disposition toward being clean and pure, Boddy argues, is physically embedded in the bodies of young women by the procedure whilst it is simultaneously being cognitively and emotionally embedded in their minds through meanings built “through metaphors and associations that operate implicitly and overtly to establish an identification of circumcised women with morally appropriate fertility” (Boddy

1988, 6). For example, pigeons are considered clean and associated with fertility and purity. Women who have undergone FGC are frequently compared to pigeons, especially when they are unmarried, and even their traditional dance at weddings is compared to the movements of pigeons (Boddy 1988, 6). Eating pigeon meat is thought to “bring blood,” the essence of a woman’s fertility – it is with blood that men’s sperm mixes to create life – and FGC is partially done in an attempt to keep life-giving blood inside (Boddy 1988, 7).

Women are “enclosed” through FGC, and the motif of enclosure extends to foods that are regarded as valuable and pure: tinned foods and fruit with peels, such as watermelon, bananas, and oranges. Foods that are enclosed are therefore safe from dirt, disease, and dryness – a woman who is not infibulated is referred to as dry or infertile, because there is nothing enclosing the life-giving water and blood in her womb (Boddy 1988, 7). Even daily activities such as making bread carry these metaphors of male and female. Making bread is almost a metaphor for carrying a child. There is a combination of things from the male realm, the outdoors – flour – and the woman’s realm – eggs – and then moisture, something that is feminine. Only women who have been infibulated can make bread, and they are the ones who mix all of the ingredients together. Then the bread is baked in the oven, an enclosed space that does not let the heat escape and changes the mixture into something new and vital, the staple of the local diet. If the oven was open, the bread would not bake; if women were open, they would be infertile. Thus, Boddy argues that the practice of FGC is part of the fabric of social life such that opening a tin of food or making bread are all actions “resonant with implicit meanings” (Boddy 1988, 8).

In Sudan, FGC cannot be ended without changing many of the fundamental associations about what it is to be a woman, to be clean, or to be pure. That is not to say that traditions cannot change. When Hayes interviewed 86 Sudanese informants in 1970, ranging from rural villagers

to the educated elite at the university, all but one of the women had been infibulated (Hayes 1975, 618). However, forty percent of the informants who had completed a secondary level of education stated that they would rather their daughters receive a clitoridectomy rather than be fully infibulated (Hayes 1975, 618). Sudan is not a singular example – in every society in which FGC is practiced, there are reasons why this institution has been practiced for hundreds of years, reasons that tie into cultural touchstones and conceptions of womanhood. For some, it is even an affirmation of their status as African women in particular – for example, in Mali the memories of French colonialism are very much involved in the debate over FGC, and some see the decision to cut or not to cut as a sign of allegiance, and practicing FGC is a way of celebrating African womanhood and specific social traditions (Gosselin 2000, 53). In this example, FGC is not only tied to traditional or cultural touchstones, but to current discourse surrounding the impact of globalization and colonialization.

In the language of the capabilities approach, FGC in Sudan is *necessary* for other capabilities to fall into place. Without FGC, a girl does not have the central capabilities of practical reason, affiliation, or control over one's environment. Practical reason, "being able to form a conception of the good and to engage in critical reflection about the planning of one's life" is heavily influenced by culture (Nussbaum 2011, 34). If, for a Sudanese girl, her conception of the good involves a worldview in which gendered structures demand infibulation for purity, infibulation might be part of the imagining of the good life. In a society in which infibulation is a required prerequisite to marriage and childbearing, part of the planning of one's life is evaluating the social and personal consequences of refusing to fulfill the role expected of an adult woman in society. Not being infibulated would come with serious ramifications for the capability of affiliation: being constantly regarded as an impure child would damage a girl's

ability to “engage in various forms of social interaction” and have “the social basis of self-respect and nonhumiliation” or be “able to be treated as a dignified being whose worth is equal to that of others” (Nussbaum 2011, 34). Nussbaum has written that in some cases, parents can override the autonomy of children for the purpose of securing adult capabilities – in Sudan, some parents would argue that FGC is an example of such an act (Nussbaum 2011).

Origins of the Global FGC Debate

The feminist gaze fell upon FGC at a time when the Western feminist movement was characterized by a predisposition toward universalisms, particularly that all women were united by their experiences as subject to the patriarchy (Wade 2012). The idea of global sisterhood pressed Western feminists to search for common ground with their ‘sisters’ in ‘Africa’ and advocate for African women. Fran Hosken, the woman who coined the term ‘female genital mutilation’ in 1976, was inspired by this idea of global sisterhood and called upon her fellow Western feminists to raise awareness about FGC (Wade 2012, 27). Hosken’s writings about FGC characterized the practice as brutal, oppressive, and primitive, often featuring detailed descriptions of callous adults holding down terrified young girls being mutilated without anesthetics in unsanitary conditions while their unlucky peers die of blood loss around them (Njambi 2016, 285). These stories are meant to cause a visceral reaction in their (Western) audiences that will stir them to action. Hosken and other vocal opponents of FGC portrayed the African women as being “victims of their own ignorance” and “prisoners of ritual” and African men as cruel patriarchs subjecting women to FGC for their own sexual pleasure and peace of mind about the purity of their daughters (Njambi 2016, 286). Early Western feminist responses struggled to fit FGC into a patriarchal mold, considering that the practice was performed on girls by other women. “A state of *false consciousness* [was] ascribed to the female actors” and African

women who practiced FGC were described as “mentally castrated” or having been forced by men “in Black Africa...to become their own torturers, to butcher each other” (Johnsdotter 2012, 99; Daly 1979, 164; Thiam 1986 [1978], 75). Unsurprisingly, the Western audiences reacted with horror and outrage, determined to stamp out FGC to protect the women of Africa.

When examining the language Western feminists used to speak about FGC and the horror stories they used as evidence of its barbarity, it is clear that in the language of the capabilities approach FGC was seen as infringing on the Central Capability of life. Nussbaum defines the Central Capability of life as “being able to live to the end of a human life of normal length; not dying prematurely, or before one’s life is so reduced as to be not worth living” (Nussbaum 2011, 33). Following the arguments presented by these feminists, FGC cuts short a woman’s right to life by exposing her to a dangerous practice that could result in death during the cutting, or later during childbirth. Terming FGC “female genital mutilation” clearly shows the Western idea that FGC violated the central capabilities of bodily health and bodily integrity. However, this analysis also includes practical reason, “being able to form a conception of the good and to engage in critical reflection about the planning of one’s life” as something that is infringed upon not through FGC alone but also the idea that African men force a certain conception of the good on to African women (Nussbaum 2011, 34). In connecting FGC and infantilization of African women to practical reason, these feminists are subtly aligning practical reason with a specific plan of one’s life – a plan that aligns with Western values.

African Feminist Response to the FGC Debate

African feminists and scholars reacted to the global outcry against FGC in a variety of ways. African scholars and scholars who study African cultures have written about their experiences with audiences preoccupied with FGC in the 1980s. Some described feeling as if

their work was being eclipsed by the shocking scandal of FGC, or that any suggestion that African women could be “far ahead of US women” was immediately dismissed because they practiced FGC (Wade 2012, 28). At the 1980 conference of the United Nations Decade For Women, FGC was chosen as the number one problem for African women – despite the African delegates who insisted that clean water and adequate food should take precedence (Oyewumi 2003, 32). Many African scholars worried that discussions around FGC had become “such a powerful symbol of patriarchy that their presence often eclipsed complex evaluations of societies in favor of an outright condemnation” that was closely tied to Western conceptions of good vs evil dichotomies (Wade 2012, 28). Njambi argues that discourse around FGC played into these dichotomies perfectly, a list which includes: “science/superstition; medical knowledge/tradition; healthy bodies/unhealthy bodies; normal sexuality/abnormal sexuality; civilized/barbaric; modernity/backwardness; expert/non-expert; educated/ignorant” (Njambi 2016, 283). Africa as a monolith was poised as a foil to the West; the dark continent in which women were at risk of bodily harm was compared to a global West cast into the savior’s role, a juxtaposition that many felt was an all-too-familiar reflection of the unforgotten colonial past. Some African women argued that there was only one perspective on FGC being promoted in the international discussion about women’s rights in Africa, and that the diverse voices and opinions of other African women were (and are) not being acknowledged by the rest of the world.

These African feminists, before they even started to argue about the cultural significance of FGC, were concerned about the implications of not only a universal feminism being imposed upon African women, but also a universal set of cultural values. Nussbaum’s arguments in the 1990s about the ethics of using the capabilities approach did not hold true for these women – they did not view FGC as a cultural tradition that should have been left to history, and they did

think that the application of Western norms was paternalistic and therefore contestable. These feminists were aware that the arguments being made against FGC were from a Western value system, no matter how fervently anti-FGC activists insisted that their values were not Western, but universal. FGC became yet another example of the failure of Western feminism to be translated into a universal movement for women's issues around the world. These feminists could not formulate a conception of the good that sprang from an African framework instead of a Western framework.

Arguments Against FGC

The most comprehensive general arguments made about FGC concerns Nussbaum's top three central capabilities of life, bodily health, and bodily integrity. Almost every story about FGC from anti-FGC activists mentions the excruciating pain of FGC. Often, this description of pain is from their own experiences. Women describe being held down, feeling like they were being crushed, the pain of the procedure, and then how painful it was to heal from the injuries. "I was engulfed in pain from head to toe – like fireworks going off everywhere and you don't know how to stop them," wrote Hibo Wardere about her experience undergoing FGC (Wardere n.d.). Lingering pain from FGC is also frequently written about: "Sex is painful, and I hate, hate, hate it. I hate being touched. It feels like rape every time. I cry inside, I cry out loud, and my husband does not care. It does not hurt him," said one woman to *Cosmopolitan* magazine (Rudolph 2014). Statements about the health risks are also used by African women in anti-FGC writings:

"Being a Maasai woman who knows the effects of FGM, I feel obliged to tell about the harm that is brought to the girl. Excessive bleeding can occur during the practice and can lead to death. Today, because the procedure often has to take place in hiding, female circumcision is mostly performed using shared and unsterilized objects, which can lead to HIV/AIDS and tetanus, and damage organs including the vaginal walls. Inflammation of the cells around the circumcision area also occurs shortly after the operation. The long-term effects of FGM include chronic infections of the reproductive parts, pain during sexual intercourse, and difficulties in childbirth" (Olekina, et al. 2004).

A common fear is the communicable diseases that could be spread by using the same instruments on many girls, including AIDS, and there are many activists who believe that the fear of these diseases will help convince families to stop practicing FGC on their daughters.

However, the most prominent personal arguments about FGC are those that address the feelings of betrayal, lack of choice, and reasons for the procedure. In the language of the capabilities approach, this can be seen as the capabilities of bodily integrity, emotion, and practical reason. This is especially prominent in the stories of women who were raised in Western countries and were sent to their parents' hometowns in Africa, without being told that they were to undergo FGC. Many of these women are vocal advocates against FGC, especially because they were not aware of FGC or its cultural significance before undergoing the procedure. One woman who was sent to Guinea from the United States over her summer vacation wrote "I didn't know it was going to happen, and I was never warned. It felt like the biggest betrayal and deceit" (Rudolph 2014). One argument against FGC is that the violation of the girl's body will create distrust and animosity between her and her parents, who arranged the procedure. These accounts of being betrayed also include the women who were raised in African countries and knew, generally or vaguely – about the procedure. Wardere remembers that growing up in Somalia, she asked her mother when she could be cut because she was teased about being unclean (Wardere n.d.). Because she was a little girl – only six years old – after the procedure Wardere felt that her mother had done her wrong by giving in to the unknowing wishes of a child (Wardere n.d.). She writes that "the emotional impact it had on me was huge – I couldn't look at my mother anymore. All I could see was my hatred and despair. I kept asking my mother why I had been subjected to such brutality, but she never answered" (Wardere n.d.).

These women view FGC as a human rights violation, because often it is done without the informed consent of the person being cut, who is often a child. They argue that it is a permanent bodily modification that is done for non-medical reasons which include the male desire for a wife who is virginal and not sexually promiscuous. “When someone’s body parts are being removed, as far as I’m concerned, it’s abuse. It’s violence, full stop,” says Leyla Hussein, an anti-FGC activist in an interview (Higa 2016). Many anti-FGC activists argue that causing bodily injury to a child is never permissible and reject compromises that suggest medicalizing FGC or making a symbolic nick on the genitals of child without removing any flesh. They feel that these actions also fall under harming a child for a non-medical reason, and because it would continue to normalize the idea that women’s genitals need to be modified in some way (Higa 2016).

African women who protest against FGC also reject claims that FGC is similar to male circumcision that is practiced throughout the West, saying that this comparison is not medically equivalent because FGC is more similar to removing the whole of the penis (Higa 2016). These arguments often circle back to what anti-FGC activists view as the most prominent reason for FGC: male sexual desire. Very few anti-FGC activists focus on the idea of culture and tradition and instead reiterate reasons pertaining to male sexual pleasure or the restriction to female sexual pleasure as the latent function of FGC.

The African women who speak out about FGC receive support and platforms through Western media and organizations. However, many of these organizations are not run by African women, especially those in Western Europe, Australia, and the United States. In these organizations the stories and photographs of African women who have undergone FGC are used as promotional material, while all the spokespeople for the organizations are also not African women. Therefore, one obstacle to privileging the voices of African women speaking out against

FGC because their words are so often altered and edited to go on these websites and in these newspaper articles.

These feminists, African and Western, argue that FGC causes immediate and long-lasting pain, as well as immediate and long-lasting risk of further injury or death. Therefore, FGC is inexcusable because it jeopardizes the capabilities of life, bodily health, bodily integrity, emotion, and practical reason. I was surprised to find that many of the arguments against FGC involved the capability of emotion. The opponents of FGC, especially in non-academic material intended to reach a larger Western audience, focused heavily on feelings of betrayal, and suggested that FGC impeded the ability “to love, to grieve, to experience longing, gratitude, and justified anger” (Nussbaum 2011, 33). FGC in these circles is viewed as something that not only harms the body, but fundamentally reshapes the inner life of the human experience. The examples of girls who were not able to sustain marriages, have children, or trust their relatives were not only meant to tug at heartstrings, but also to suggest a second level of horror associated with FGC. They suggest that the first (connected to life, bodily health, and bodily integrity) level of horror is the physical damage, the second level is emotional damage. Expanding outward once more, the last harm that FGC does relates not only to how a person interacts with their self, but also with their communities and the world around them, the assaults on practical reason.

Arguments in Support of FGC

There is a small number of African women who have written scholarly work in defense of FGC. Beyond women who have published their thoughts in support of the practice, the resistance to change in many African countries is a clear sign that there are African women who still practice FGC today who are continuing the practice for their own reasons. While these reasons are typically dismissed as primitive and ‘cultural’ by the West, there are some African

scholars who have published extensive criticism of Western arguments against FGC and offered their own positive experiences with FGC as examples of different narratives around the procedure. These opinions object to the infantilizing and demeaning language used in anti-FGC discourse to describe women who participate in FGC, express concern that only one narrative is being offered as if it was the experiences of all women who have undergone FGC and cast doubt on the supposed medical literature about the negative health effects of FGC. Furthermore, these women offer a post-colonial critique of anti-FGC discourse and argue that the way in which Western countries have gotten involved in attempting to eradicate the practice perpetuates colonial oppression through universalizing the Western feminine experience and demeaning African cultures and conceptions of healthy female bodies. I find that these arguments tend to focus on the capabilities of bodily health, practical reason, affiliation, and control over one's environment.

Wairimu Ngaruiya Njambi is one of the most famous African academic supporters of FGC because of the academic work she has done on the subject, including defenses of her own experience with FGC. She views the Western efforts to halt FGC as “a powerful discourse intertwining feminist politics and scientific and medical knowledge in pursuit of the common goal of protecting ‘female bodies’ from ‘harm’” (Njambi 2016, 281). However, this portrayal is not sufficiently nuanced enough to capture the perspective of African women, such as Njambi, who view FGC as an integral part of their culture and an important part of their lives (Njambi 2016, 281). Njambi first begins to problematize the language of FGC discourse. “Female Genital Mutilation” implies harm done, “female circumcision” is a construct of the West that “implies that cultural practices that involve female genital modifications in Africa have no unique histories and meanings of their own, outside of what is already understood in the west to be male

circumcision” and even using “western” to refer to anti-FGM discourse continues the linguistic and historic divide of the West and the Other who is non-Western (Njambi 2016, 282). Njambi calls attention to the constructs of natural and unnatural that are implicitly at play in the discourse, arguing that the “natural” female genitalia are just as much of a construction as cut genitals (Njambi 2016, 284). This is an interesting shift in the conception of bodily health: what might be considered healthy genitals to one society could be seen as unhealthy genitals in another society. Most significantly, Njambi makes a neo-colonial critique of the fight against FGC as a civilizing mission in which Africans as a monolith are portrayed as savage and barbaric and there are glorious white saviors trying desperately to save the Africans from themselves (Njambi 2016, 285). The West is once again give free reign to interfere in the genitals of African women – and here Njambi reminds her readers of the fate of Sarah Baartman’s genitals¹ – and judge their culture, something that would be unthinkable in the reverse (Njambi 2016, 285).

Furthermore, the way the West views FGC is through the lens of science and universal feminism, as well as a universal value system through which even non-Western societies can be judged. The female body is a biological entity completely separate from its cultural context in anti-FGC discourse, an entity that is perfect at birth and must not be changed in any way (Njambi 2016, 290). However, scholars who provide favorable opinions on FGC suggest that this rhetoric of the perfect-from-birth female body is not practiced as it is preached in the West: medically unnecessary cosmetic genital surgery for women’s genitals are not condemned as disfiguring or ruining a woman’s body in the West (Wade 2012, 33). Cosmetic procedures on female genitalia such as vaginoplasties and labiaplasties are perfectly legal in the West, but all forms of FGC, including symbolic nicks, are illegal, leading “to a legally complex situation in some

¹ Sarah Baartman, an indigenous South African woman who was displayed in Europe, had her genitals removed without her consent from her dead body to be pickled and left on display in a French museum until 2002.

Western countries: a minor genital operation on an adult African woman is considered a criminal act, while rather extensive genital operations for non-therapeutic reasons among the majority populations are accepted” (Johnsdotter 2012, 108). While the West is allowed to express revulsion at the cut genitals of African women, African women’s revulsion at the uncut genitals of Western women is not granted the same legitimacy. While some anti-FGC activists acknowledge that there is a cultural element in one’s perception of what is natural and what is unnatural, Njambi takes issue with the reversion back to the “objective” scientific judgement that female body must not be cut – by Africans, at least (Njambi 2016, 291). Other supporters of FGC have also referenced this argument, saying that male circumcision in the West is accepted and there is no similar uproar over the thought of altering the male body as it is at birth, and if the argument is that female children have a right to “intact” genitals, there should not be a double standard for male children (Darby and Svoboda 2007, 301). Further comparison to male circumcision questions the West’s amenability to performing a medically unnecessary removal of genital flesh such that the male child will look like his father and his peers “in the locker room,” but when this argument is applied to African women who may want their daughters to look like their mothers or peers it is unacceptable (Njambi 2016, 292).

Njambi also writes “as a Gĩkũyũ woman from Kenya who underwent irua ria atumia, the circumcision ritual that marks the passage to womanhood” and who staunchly defends her FGC procedure (Njambi 2016, 293). Njambi’s experience was the opposite of the stories normally told in Western media: her parents did not want her to have the procedure, but Njambi begged her parents to allow her to undergo FGC because she felt like it was important for her socially and culturally (Njambi 2016, 294). She made the argument that for her, part of the capability of practical reason was being able to form a conception of the good that celebrated FGC, and then

that the capability of affiliation was being infringed upon through not allowing her to participate in the world in the way she saw fit. The social repercussions of having not undergone FGC were described as the following:

Prior to my circumcision, my circumcised age-mates still considered me (16, at the time) a child. With their newly acquired ‘womanhood’, they wore a new ‘no nonsense’ attitude that demanded the attention of most adults around. I was not allowed to join the more serious conversations about topics such as menstrual cycles, pregnancy, and sexual fantasies. I could not talk to other adults without having to worry about the words I chose to employ, without having to worry about interrupting someone. I was required, with all the other little kids (!), to cover my ears with my hands whenever grown-ups made sexual jokes with one another that children were not allowed to hear. All the uncircumcised girls (Irīgũ) and boys (Ihĩĩ), seen as childish and immature, were required to respect and to give up their seats when requested. In fact, the most profoundly humiliating insult that one can level at a Gikũyũ adult is to accuse them of acting like an ‘uncircumcised’ boy or girl (Njambi 2016, 295).

For Njambi, the procedure was important socially, because it both marked her as an adult and a member of her ethnic group. It was carried out in a clinic with a sterile scalpel by a trained nurse (Njambi 2016, 294).² Njambi ends her paper arguing for safe and legal FGC procedures, saying the argument is similar to that for safe and legal abortions in that women should both have control over their bodies and that if FGC is made illegal, it will happen in more hidden and therefore dangerous and unsanitary conditions (Njambi 2016, 299). Still, Njambi concedes that she does not have an answer to the FGC debate and rather than asking for outsiders and social change agents to drop the issue altogether, she asks that they consider the imperialist histories that give the West permission to interfere with and judge the cultural practices of African societies while also paying close attention to the voices of the people they are trying to help (Njambi 2016, 300).

²It must be noted that the Njambi’s FGC procedure was the least severe of the many types of FGC. The hood of her clitoris was slit, exposing more of the clitoris. Her clitoris was not removed, and her labia were not removed. Therefore, her dismissal of medical or sexual problems resulting from FGC is not translatable to women who experienced more severe types of FGC, such as infibulation. This is not to dismiss the claims that Njambi makes, but rather to contextualize them.

To put her argument in the language of the capabilities approach, Njambi very much views FGC as *creating* rather than *hindering* capabilities, specifically the capability of affiliation. Nussbaum defines affiliation as not only “being able to live with and toward others” but also as “having the social bases of self-respect and nonhumiliation, [and] being able to be treated as a dignified being whose worth is equal to that of others” (Nussbaum 2011, 34). Given the role of FGC in many African society, including that of the Gikūyū, FGC is a requirement for nonhumiliation, for being able to be seen and respected as an adult in society. Here we must ask at what point is FGC actually an irredeemable infringement on life, and at what point – as Nussbaum has said – adults can make decisions for children that are in their best interests for carrying out a full and complex adult life.

Fuambai Ahmadu is another African scholar who has willingly participated in a FGC ritual with her family’s ethnic group, the Kono of Sierra Leone (Ahmadu and Shweder 2009, 14). Ahmadu speaks openly about her support of FGC and its ritual meaning for the Kono. For Ahmadu and the Kono, FGC “is synonymous with women's power, their political, economic, reproductive and ritual spheres of influence. Excision, or removal of the external clitoral glans and labia minora, in initiation is a symbolic representation of matriarchal power” (Ahmadu and Shweder 2009, 14). Ahmadu explains that for the Kono, FGC is not done to suppress or restrict a woman’s sexuality, but to make a woman’s sexuality accessible to her (Ahmadu and Shweder 2009, 14). This is fascinating, because for the Kono, FGC is a way to secure the capability of bodily integrity, specifically “having opportunities for sexual satisfaction” (Nussbaum 2011, 33). Ahmadu also notes that this is the experience for the Kono, and that it is not necessarily the case with every region or ethnic group in which FGC is practiced and therefore her views on the subject are limited to her own experiences (Ahmadu and Shweder 2009, 14).

Ahmadu is also highly critical of the Western scholarship on FGC, especially since she feels that it presents an inaccurate picture of both the procedure itself and the women who choose FGC for themselves or their daughters (Ahmadu and Shweder 2009). For example, the *Lancet* report by the WHO Study Group on FGM was widely published and received high press coverage with their results which claimed that infant and maternal mortality rose in hospitals. However, Ahmadu notes that other researchers found these claims to be largely exaggerated in the press, with FGC ranking behind maternal smoking in comparative pregnancy risk factors, and the study itself poorly reported and with obscured methodology (Ahmadu and Shweder 2009, 15). Ahmadu claims that the study did not display the results for the individual nations (6 of which were studied) such that the results could be replicated, they did not control for the quality of healthcare available to women who had undergone FGC versus those who had not, and that the sample was unrepresentative of the population (Ahmadu and Shweder 2009). Therefore, she concludes the resulting demand for eradication of FGC was overly dramatic. This is an interesting refutation of the anti-FGC argument that FGC limits the capabilities of life and bodily health. In response, Ahmadu presents studies that give a different perspective on FGC. She cites Carla Obermeyer, whose comprehensive literature review found that medical complications resulting from FGC were the exception to the rule (Ahmadu and Shweder 2009, 15). Additionally, Linda Morison et al. (2001) studied health consequences of FGC in The Gambia with what Ahmadu calls “the most systematic, comprehensive and controlled investigation... yet to be conducted” in which many of the most frequently referenced morbidities with FGC – including infertility, tumors, menstrual problems, and endogenous infections – were not more present in women who had been cut than in women who had not (Ahmadu and Shweder 2009, 15). The infertility rate especially was indistinguishable, at 10% for both groups, and the authors

remarked that the women they were studying had expressed “high levels of support for the practice” (Ahmadu and Shweder 2009, 15). A study run by a Swedish obstetrician found that women who had undergone FGC were “at a lower risk of prolonged labour as compared with uncircumcised Swedish women” (Ahmadu and Shweder 2009, 15). Ahmadu also notes that perhaps the reason that women who have undergone FGC face increased risk of birthing difficulties in Western countries is that they delay seeking prenatal care or a biomedical labor because they fear stigmatization by self-righteous healthcare workers (Ahmadu and Shweder 2009, 15).

Beyond concerns about healthcare, many feminists protest FGC on the grounds that it controls the sexual pleasure of women and that the removal of the clitoris is akin to castration. Again, Ahmadu presents research done by other scholars which offers the dissenting opinion that while there is not much research on the subject, the information available would not suggest that FGC and sexual enjoyment are mutually exclusive, and that therefore FGC does *not* infringe upon the capability of bodily integrity (Ahmadu and Shweder 2009, 15). Even one of the most vocal opponents of FGC, Hanny Lightfoot-Klein, found that Sudanese women who have undergone infibulation, commonly regarded as the most severe form of FGC, report having sex three to four times a week, with 94% of infibulated women reporting sexual satisfaction and orgasm (Ahmadu and Shweder 2009, 15). In the West as well, an Italian OBGYN named Lucrezia Catania published a report finding that of the Somali women who frequented her clinic, most did not suffer from long-term complications, enjoyed sex and, compared to an Italian control group, reported more frequent orgasms (Ahmadu and Shweder 2009, 16). Ahmadu’s own research explored cultural scripts around sex among the Kono, in which the removal of the clitoris allows for orgasms through vaginal simulation. Men are taught how to give pleasure to

women who have undergone FGC, and the Kono believe that both male sexuality and female sexuality are enhanced by the removal of the distracting (and unsightly) clitoris (Ahmadu and Shweder 2009, 16). Ahmadu reports that of her friends and family who have undergone FGC, many of them spoke of enjoying sex and having orgasms despite no longer having a clitoris.

Ahmadu does not protest against African women who campaign against FGC because they were forced to undergo the practice and did not give their full consent. In the words of capability language, in those cases bring forced to undergo FGC would violate bodily integrity because the girl would not have been “secure against violent assault” (Nussbaum 2011, 33). However, Ahmadu is concerned about the potential for psychosocial and psychological damage stemming from anti-FGM campaigns that demonize the practice and the women who choose it. A GoFundMe page has been started by Ahmadu and her sister to fund research into these potential negative effects. On that site, she writes that anti-FGM campaigns spread “negative messages [that] foster low self-esteem, feelings of racial and gender inferiority as well as sexual anxieties among affected adolescent girls and young women” who have undergone FGC (Ahmadu 2016). Additionally, she wants to study the connections between anti-FGM campaigns and reluctance among cut women to seek gynecological care or prenatal care due to fear of being stigmatized. Ahmadu suggests that the narrative around FGC is being shaped by the West, and therefore contains only negative viewpoints, whereas in the past the narrative around FGC would have been only positive. In other words, if a girl is told that without a clitoris she is not a proper woman, she will feel shame and disgust about her FGC. In terms of capabilities, this would fall under “having one’s emotional development blighted by fear and anxiety” and therefore impeded the capability of emotions (Nussbaum 2011, 33-34).

It is interesting to note that while most anti-FGC activists, African or Western, have many excuses for not entertaining the words of the other side – they are mired in tradition, they just have not been educated, they do not know what they are talking about – most of the African women who support continuing the practice of FGC allow that their opinions are not those of all, and that they do not question the women who feel traumatized by the procedure. Ahmadu writes that she does not feel that the supporters of FGC are given the same respect from anti-FGC activists. The stigma around supporting FGC is intense, even in African academic and medical circles, such that people who are not necessarily against FGC fear voicing their thoughts. Some have told Ahmadu they keep silent to avoid becoming a target of ridicule or professional censure, especially considering that for scholars, being known as an FGC supporter would deny access to Western grant money because FGC is so high on the Western agenda (Ahmadu 2007, 305).

Analysis

Although the sources I have analyzed did not originally put their arguments into the words of the capability approach, doing so has allowed me to evaluate the normative frameworks each side of this debate have used to formulate their positions. Even when using the same capabilities to justify their arguments, anti-FGC advocates and pro-FGC advocates disagree on the ways in which FGC interacts with and informs these capabilities. Putting these arguments for and against FGC in the language of the capabilities approach reveals that while Western feminists believe there is a universal “practical reason” or “bodily integrity,” those values are interpreted differently by African feminists. I suggest that part of the reason why FGC has become the subject of such intense debate is that Western feminists cannot accept that there may be other conceptions of the good. In a world shaped by forced acceptance of Western values

through colonialism, Western feminists fail to understand that different is not necessarily inferior. The problem is that this assumed inferiority is not simply believed – it is acted upon. The West has used its superior political power and resources to eradicate practices that do not fall into Western conceptions of the good, and therefore it is understandable that African feminists protest the imposition of yet another set of normative Western frameworks upon their lives and bodies. While the arguments made by the West insist that there is a universal conception of the good and that there is a universally understood “natural” female body, these arguments fail to see that they are conflating universality with Western-ness.

For the activists who want to eradicate FGC there is little to no recognition of the role FGC plays in African societies beyond “controlling women’s sexuality.” In viewing the procedure as something that is valued only by men and forced upon women by the patriarchy (or by women brainwashed by the patriarchy), these Western feminists lose sight of the possibility that FGC could hold personal value to an individual woman. In the few cases in which these feminists admit that some women do want to undergo FGC, it is interpreted as having been overly influenced by culture or as failing to see the potential damage that FGC could do. This is seen as a failure of practical reason, as girls never having the chance to develop a conception of the good and right that does not involve FGC. These arguments are from a Western-centric perspective that cannot conceive of an alternative worldview in which FGC is valued and desired. I believe this is also partially influenced by the ways in which the Western world is exposed to FGC. Because the West is primarily shown examples of the most severe types of FGC and rarely shown examples of the less invasive types, it is difficult to understand why someone might want to undergo FGC.

For the African women who are defending FGC, there is often a clear frustration in their writing. Why is their conception of the good always questioned? Why are the alternations they make to their bodies deemed mutilations, while alternations made to Western bodies are deemed cosmetic? Why are African women being patronizingly viewed as subservient to the African man? I find it interesting that they focus on the capabilities of practical reason, affiliation, and control over one's environment. This is the kind of intersectionality that African feminisms are known for: addressing women's issues with an eye to the experience of colonialism and the difficulty of defending an African conception of the good, affiliation on African terms, and the ability to control one's environment after decades of being unable to do so. African feminists who protest the eradication of FGC notably do not question women who do *not* want to undergo FGC, but only protest attempts to make FGC inaccessible to everyone. They believe that it should be a choice that is still on the table for women who wish to connect with their culture and their gender through a ritual process they believe is significant.

This analysis, I believe, can also give us insight into the use of the capabilities approach cross-culturally. This is an undeniably fraught idea, as we saw in the earlier discussion about Martha Nussbaum's assumptions about the cross-cultural use of the capabilities approach. While I believe that the capabilities approach in its broadest sense can be used cross-culturally, there are important distinctions between Sen's conception of the capabilities approach and Nussbaum's conception of the capabilities approach.

Nussbaum asserts that the capabilities approach is one that can and should be used for issues of social justice, and has written about the application of the capabilities approach to women's equality in developing countries. This process is controversial, with many scholars and activists asking if a single normative framework can be applied to "cultures that have

traditionally used different normative categories” without it being “merely an exercise of colonial power” (Nussbaum 1999, 228). Still, Nussbaum defends the goal of creating cross-cultural objectives, arguing that is the point of critical social theory to systematically and critically investigate “intentions that in daily life are often unexamined” that lead to “abuses that otherwise might lurk nameless in the background” (Nussbaum 1999, 228-229). Although she recognizes that this use of critical social theory can become problematic when the foundational concepts used to develop this theory are from a country that has colonized another and then wishes to change their social structure, Nussbaum still justifies her confrontation of three arguments against the use of the capabilities approach in advocating for women’s rights.

The first of these arguments, the “argument from culture,” states that different cultures have different norms for what it means to be a woman and what a woman’s life should look like; just because the norms are different from Western norms does not mean that women in these cultures cannot be happy and content with their lives. Nussbaum presents several norms which she feels these “traditional cultures” emphasize – “female modesty, deference, obedience, and self-sacrifice” – and the “Western” norms presented by feminists, deemed Western by traditional societies supposedly “because they involve an emphasis on choice and opportunity” (Nussbaum 1999, 229). Nussbaum rejects what she sees as a focus on tradition (and therefore keeping “traditional” practices such as cultural norms that devalue women), arguing instead that “cultures are the scenes of debate and contestation” and that women’s voices should be listened to when cultures are shaping their own futures (Nussbaum 1999, 229). Despite writing earlier in this article that a focus on choices and opportunities is considered by traditional societies as being “a Western political agenda,” Nussbaum suggests that cultures she views as “traditional” should not hesitate to adopt an emphasis on choices and opportunities because *she* views these values as

fundamentally human, not “Western” at all (Nussbaum 1999, 229). Nussbaum ends her response to the argument from culture in saying that as cultures debate, people begin to question cultural traditions. Nussbaum offers the capabilities approach as a cross-cultural lens through which people can develop answers to questions about their cultural traditions, forgetting that perhaps people would rather seek those answers in values that may be unique to their own cultures.

However, I think that Nussbaum presents two arguments as one within her rebuttal. The first statement is that traditional cultures have norms that Nussbaum feels are repressive toward women, and that the norms she feels would liberate these women (choices and economic opportunity) are considered Western by these societies and are therefore unacceptable to them. Nussbaum then claims that although these arguments stem from Western thought and theory, they should not be considered Western, but considered universal norms that progress liberty. However, this neglects the fact that whether or not these ideas are indeed neutral and not Western, that they are associated with Western-ness and Westerners asking people to change their culture. Debating the true origin of an emphasis on choice and economic opportunity is not helpful when legacies of colonialism have made certain communities wary of outside forces demanding change. What matters is not that Nussbaum believes that choice and economic opportunity are universal, but that the people being asked to accept these values as universal reject that claim.

The second argument Nussbaum makes is that as cultures choose their forward paths, women should be able to participate in these discussions and debates. The problem here is that both of these arguments are dependent upon a universal normative claim: tradition is something both easily rejectable and easily changed, and that all people deserve a voice in their society. Among some people, tradition is not something easily deviated from at all; such deviations could

result in severe social, political, economic, interpersonal, or spiritual consequences. Furthermore, for Westerners to argue that all people deserve a voice in society stems from argument still being made within Western philosophy and political thought; there was certainly a large period of time when not everyone in Western societies were allowed decision making power in their own countries, and it could certainly be argued that this is still a reality in many Western countries. Just because the West is addressing what it perceives as inequalities in its societies with a focus on choice and economic opportunity does not mean that this is a solution that is therefore universally applicable. I argue that in different societies, with different philosophical, cultural, and political frameworks, *it could be otherwise*. Cultures and communities should not be subject to the imposition of “universal” human values and philosophies aimed at correcting what is seen as “traditional” behavior. Especially when these universalisms are directed at formerly colonized countries from the countries that colonized them, the former colonies have reason to be especially wary of what they view as Western values. When one group has imposed their values on another group via immense interpersonal and structural violence, their claim to offer their values as ways of restructuring “traditional” values to improve the lives of people who are still marginalized due to their previous actions is far weaker.

The second argument Nussbaum contests is the “argument from the good of diversity” which advocates for preserving different norms because decreasing the diversity of cultural norms would be a loss of human expression in the same way a loss of a language would be a loss of human expression (Nussbaum 1999, 230). However, Nussbaum rejects this argument because “the trouble with the analogy is that languages do not harm people whereas cultural practices frequently do” (Nussbaum 1999, 230). She then goes on to draw an analogy between domestic violence and “harmful” cultural practices, and writes that neither are “worth preserving simply

because [they are] there and very old” (Nussbaum 1999, 230). A cross-cultural framework could then, therefore, be used to assess which cultural practices should be discarded and which should remain. Again, these arguments run into trouble with when we examine what should and should not be considered a harmful cultural practice. Whose framework is used to decide what is harmful and what is not? Whose framework decides which cultural practices are simply “there and very old,” and which old practices persist because they have rich cultural value? When approaching these questions from different cultural perspectives, there may not be a cross-cultural norm that would produce the same answer from both sides. This is consistent with Sen’s envisioning of the capabilities approach (where each person determines their functions from the perspective of their own personal welfare), but this is not consistent with the application of Nussbaum’s Ten Central Capabilities. When there are conflicting answers *and* an unequal power dynamic between cultures and countries, the choice is not neutral. Given that these “cross cultural frameworks” are firmly located in Western values and histories, they cannot be applied to non-Western societies as if they were truly culturally neutral.

The final argument, the “argument from paternalism” places respect for people as agents over respect for cross-cultural norms, saying that the best judge of what is right for an individual is that individual themselves, and that it is paternalistic to treat others like children and say certain choices are not good enough (Nussbaum 1999, 230). Nussbaum says that this is not at odds with cross-cultural frameworks, because the argument from paternalism actually contains certain cross-cultural values, such as “political liberties and other opportunities for choice” (Nussbaum 1999, 230). While I agree with this because the valuation of choice is not a universal human value, Nussbaum then goes on to make a complicated argument. First, she establishes that many “existing value systems” that display paternalism toward women (Nussbaum 1999, 230).

She agrees that “it is one sense paternalistic” to address these value systems to say “sorry, that is unacceptable under the universal norms of equality and liberty that we would like to defend” (Nussbaum 1999, 230). However, Nussbaum then immediately compares this kind of paternalism to the paternalism inherent in government, writing that “in that way, any bill of rights is ‘paternalistic’ vis a vis families, or groups, or practices or even pieces of legislation, that treat people with insufficient or unequal respect” (Nussbaum 1999, 231). She argues that “we dislike paternalism because there is something else we like, namely liberty of choice in fundamental matters” and therefore “it is fully consistent to reject some forms of paternalism while supporting those that underwrite these basic values” (Nussbaum 1999, 231).

This sets up a false equivalency between the consenting bond between a democratic government and its people and the history of cultural oppression between a former colony and its colonizer. One is an existing value system deciding to uphold norms of equality and liberty, and one is a body with disproportionate forms of social and political power deciding for a less powerful body that these are norms that they *should* uphold. Equality and liberty are not cross-cultural norms. Nussbaum suggests that those who advocate for cross-cultural norms should focus on providing choices and then allow people to choose for themselves among the options presented. Frustratingly, Nussbaum’s arguments for the application of cross-cultural values all rely on the sacredness of choice, and this argument about paternalism makes it clear that perhaps what is meant by “everyone should be able to choose” is “everyone should be able to choose *from the right options.*” In other words, the choice to follow traditional culture is not a choice that is good enough, because she sees that choice as contributing to injustice. Of course, all of this is also predicated upon the assumption that traditional cultures

This all culminates Nussbaum's advocacy for the usage of the capabilities approach to address the question of cross-cultural norms. Because the capabilities approach focuses on choices, the sum of what a person is able to *choose* to do and be, they can transcend culture to address issues of human dignity. Nussbaum asserts that "a life has been so impoverished that it is not worth of the dignity of the human being" when one is not "able to develop and exercise one's human powers" (Nussbaum 1999, 234). In Nussbaum's ideal world, "the core idea is that of the human being as a dignified free being who shapes his or her own life, rather than being passively shaped or pushed around by the world in a manner of a flock or herd animal" (Nussbaum 1999, 234). Given that most of the article has been written against the practices traditional societies, this also reads as Nussbaum's evaluation of the deficiency of traditional societies.

However, I feel that there is an important distinction to be made between the ways in which Nussbaum sees the capabilities approach in application cross-culturally and how Sen would apply his approach. The essence of the capabilities approach is *not* to dictate which liberties are necessary for a happy and healthy life lived without any form of poverty. The use of the capabilities approach, especially when reading Sen, is to have a framework within which the individual person can express dissatisfactions or disadvantages unique to them. It is incredibly personal, and therefore *anti-universalist*. While Sen does in a variety of his works discuss the importance of freedom to the capabilities approach, at its most fundamental sense, the capabilities approach can avoid most of the arguments against the universalizing of Western theory because at its core it argues for allowing the individual to determine which capabilities or functions they desire or lack.

Still, this discussion allows us to tease out some of the complexities in Nussbaum's attempt to universalize an understanding of concepts such as "practical reason" or "bodily

health.” As Oyěwùmí wrote, “*when we are busy arguing about the questions that appear within a certain frame, the frame itself becomes invisible; we become enframed within it*” (Oyěwùmí 2005, 13 [emphasis original]). To argue about FGC from a Western context frames the Western context as inevitable when this is certainly not the case. Western-ness and whiteness are not the natural or normal states of being, however much they may be portrayed as such. Western philosophy is *Western* philosophy, not merely philosophy. As an example, Oyěwùmí has written extensively about the difference in the way that Western society and Yoruba society have conceptualized the world. “Relative to Yoruba society, the body has an exaggerated presence in the Western conceptualization of society,” and other cultures may privilege senses other than sight (Oyěwùmí 2005, 4). Just because a dualism between body and mind appeared in Western philosophy does not mean that this is how other philosophies developed. There are different ways of living and being and thinking about the world, and to impose Western philosophies upon African peoples is yet another way of extending Western hegemony into academia, practice, and understandings of the world. To refute this hegemony through the use of African feminist or philosophical perspectives can be instrumental in making these Western frames visible – and therefore beginning to reconceptualize what it means to be an African woman not only in the present, but when examining the past as well.

Conclusion

I am not writing to pass judgement on FGC itself, but rather to examine how the feminist debate surrounding FGC has been complicated by issues of colonialism and the assumed universality of Western values. I originally assumed that translating the arguments for and against the eradication of FGC into the language of the capabilities approach would reveal that Western feminists and African feminists prioritized different capabilities. However, I found that

both Western feminists and African feminists saw FGC as impacting the same capabilities but interpreted those interactions in different ways according to different frameworks. I end with a simple suggestion: the voices of more African women need to be heard in the FGC debate. At the moment, Western feminists are overly involved in attempting to end FGC on the African continent. Given that the history of colonialism still hangs over interactions between the West and Africa, especially when the West attempts to control or alter the behavior of Africans, I believe that there needs to be serious reflection on the part of Western activists on whether or not their opinions should have a place at the table. Instead, there should be more room for African women – both those who oppose FGC and those who support FGC – to determine what they want for their bodies, their cultures, and their place in society.

Therefore, I question in what ways the voices of African women be privileged in this discussion considering that it has become largely international issue? From what I have seen with this research thus far, it seems like two things must change with representation of perspectives. First, the stories and opinions of African women who are against FGC must be allowed to stand alone *without editing* by Western figures. Their voices and their choice of language must be represented as they wish, and their choice to assign or to withhold condemnation of FGC must be respected. The Western media is the gatekeeper for the stories about FGC that research the greater Western audience, and this is significant because of the aforementioned flow of money from the West to Africa: this audience has the privilege of making decisions about what issues are given importance in African countries. I found that in the stories that were presented as they were written or spoken by African women – even women who condemned FGC on the whole – a more nuanced view of FGC was projected. There were overall more explanations of the cultural significance and an understanding of why their families and communities would support FGC.

The second action that I believe should be taken is an opening in Western media for the stories of African women who are not against FGC. When beginning this project, I was enormously surprised to find the amount of conflicting research contesting the “common knowledge” that FGC is an entirely negative practice. The labeling of African women who support FGC as ignorant, primitive, childlike, foolish, demonic, or barbaric is disrespectful and imperialist. These women should be accorded more respect as human beings with intelligence and goodwill, with greater opportunities to defend their cultural practices, and less condescension in general from Western audiences. However, our knowledge of histories and system of power and oppression can spur Western feminists to acknowledge their positionality in these global discussions and empower African feminists by relinquishing their hold on the metaphorical microphone.

Works Cited

- Ahmadu, Fuambai S. 2007. "'Ain't I a Woman Too?': Challenging Myths of Sexual Dysfunction in Circumcised Women." In *Transcultural Bodies: Female Genital Cutting in Global Context*, by Hernlund Ylva and Bettina Shell-Duncan, 278-310. New Brunswick; New Jersey; London: Rutgers University Press.
- . 2016. *Ain't I A Woman Too?* March 5. Accessed 4 2017, April.
<https://www.gofundme.com/7jsnenf8>.
- Ahmadu, Fuambai S., and Richard A. Shweder. 2009. "Disputing the Myth of Sexual Dysfunction of Circumcised Women: An Interview with Fuambai S. Ahmadu by Richard A. Shweder." *Anthropology Today* 25 (6): 14-17.
- Boddy, Janice. 1988. "Spirits and Selves in Northern Sudan: The Cultural Therapeutics of Possession and Trance." *American Ethnologist* 15 (1): 4-27.
- Clark, David, A. 2005. *The Capability Approach: Its Development, Critiques and Recent Advances*. Global Poverty Research Group.
- Daly, Mary. 1979. *Gyn/Ecology: The Metaethics of Radical Feminism*. Boston, London: The Women's Press.
- Darby, Robert, and J. Steven Svoboda. 2007. "A Rose by Any Other Name? Rethinking the Similarities and Differences between Male and Female Genital Cutting." *Medical Anthropology Quarterly* (Wiley) 21 (3): 301-323.
- Gosselin, Claudie. 2000. "Feminism, Anthropology and the Politics of Excision in Mali: Global and Local Debates in a Postcolonial World." *Anthropologica* 42 (1): 43-60.

- Hayes, Rose Oldfield. 1975. "Female Genital Mutilation, Fertility Control, Women's Roles, and the Patrilineage in Modern Sudan: A Functional Analysis." *American Ethnologist* 2 (4): 617-633.
- Higa, Liriel. 2016. "It's Genital Genocide." *The New York Times*, February 4.
- Johnsdotter, Sara. 2012. "Projected Cultural Histories of the Cutting of Female Genitalia: A Poor Reflection as in a Mirror." *History and Anthropology* (Routledge) 23 (1): 91-114.
- Khazan, Olga. 2015. "Why Some Women Choose to Get Circumcised." *The Atlantic*, April 8.
- Mangena, Oshadi. 2003. "Feminism (Singular), African Feminisms (Plural) and the African Diaspora." *Agenda: Empowering Women for Gender Equity* 98-100.
- Njambi, Wairimũ Ngaruiya. 2016. "Dualisms and Female Bodies in Representations of African Female Circumcision: A Feminist Critique." *Feminist Theory* 5 (3): 281-303.
- Nkealah, Naomi. 2016. "(West) African Feminisms and Their Challenges." *Journal of Literary Studies* 61-74.
- Nussbaum, Martha. 2011. *Creating Capabilities: The Human Development Approach*. Cambridge; London: The Belknap Press of Harvard University Press.
- Nussbaum, Martha. 1999. "Women and Equality: The Capabilities Approach." *International Labour Review* 138 (3): 227-245.
- Olekina, Ledama, Agnes Kainett Kisai, Eunice Sitatian Kaelo, Evelyn Nashipae Nkadori, and Phideline Nasieku. 2004. *FGM: Maasai Women Speak Out*. December. Accessed April 2, 2017. <https://www.culturalsurvival.org/publications/cultural-survival-quarterly/fgm-maasai-women-speak-out>.
- Oyèwùmí, Oyèrónké. 2004. *African Women and Feminism: Reflecting on the Politics of Sisterhood*. Trenton: Africa World Press.

- Oyewumi, Oyeronke. 2003. "The White Woman's Burden: African Women in Western Feminist Discourse." In *African Women and Feminism*, by Oyeronke Oyewumi, 25-44. Trenton: Africa World Press.
- Pergament, Deborah. 1999. "It's Not Just Hair: Historical and Cultural Considerations for an Emerging Technology." *Chicago-Kent Law Review* 41-59.
- Rudulph, Heather Wood. 2014. *3 Survivors Reveal the Brutal Reality of Female Genital Mutilation*. April 25. Accessed April 2, 2017. <http://www.cosmopolitan.com/lifestyle/advice/a6504/female-genital-mutilation-survivor-stories/>.
- Sen, Amartya. 1993. "Capabilities and Well-Being." In *The Quality of Life*, by Martha Nussbaum and Amartya Sen, 30-53. Oxford: Clarendon Press.
- . 1992. *Inequality Reexamined*. Cambridge: Harvard University Press.
- Thiam, Awa. 1986[1978]. *Black Sisters, Speak Out: Feminism and Oppression in Black Africa*. London: Pluto Press.
- Wade, Lisa. 2012. "Learning From Female Genital Mutilation: 30 Years of Academic Discourse." *Ethnicities* 12 (1): 26-49.
- Wardere, Hibo. n.d. *Hibo Wardere: FGM is a Life Sentence*. Accessed April 2, 2017. <https://www.malanational.org/hibo-wardere-fgm-is-a-life-sentence/>.
- World Health Organization. 2018. *Female Genital Mutilation*. January. Accessed January 28, 2018. <http://www.who.int/mediacentre/factsheets/fs241/en/>.