

Chapter 30

In this chapter:

Types of Female Genital Cutting.....	460
Health Problems Caused by Female Genital Cutting.....	460
What To Do for Health Problems	461
Heavy bleeding and shock	461
Infection	461
Urine problems.....	462
Problems with menstrual periods.....	463
Problems with sex and sexual health.....	463
Problems with birth.....	464
Leaking urine and stool	465
Infertility.....	465
Mental health problems.....	466
The medicalization of female genital cutting.....	466
Working for Change	466
Female genital cutting, human rights, and the law.....	467

This chapter was originally written by women living and working in communities where female genital cutting is practiced, and has been updated by Hesperian.

Female Genital Cutting



Throughout history, customs that harm women's health have been practiced in order to make women seem more attractive or likely to marry. For example, in some European communities, a woman was thought to be more beautiful if she had a very small waist. So starting as girls, women were forced to wear a band of stiff cloth called a "corset" tied so tightly around the waist and hips it sometimes broke their ribs and often prevented healthy breathing and eating. Corsets made it difficult to do anything but sit still or walk slowly.

In parts of China, women with very tiny feet had higher status. Some young girls had their feet tightly bound and their foot bones broken to make them stay small. As women, they could only walk slowly and were often confined at home.

These customs have been stopped, but in some parts of the world, other customs continue. Female genital cutting is one of them. Originally practiced in some communities in Africa, the Middle East, and Southeast Asia, it now also happens throughout the world where people from these communities have migrated.

Female genital cutting involves cutting part of the *vulva* (see page 44). It is practiced for a variety of reasons, most of them based on culture and tradition. It has often been an occasion for celebration in the community.

Female genital cutting does not affect moral behavior or change someone's need for love and companionship. But it does interfere with body functions, and can harm a person's relationship with their sexual partners. Female genital cutting also causes many health problems, and some of these can lead to lasting harm or death.

► In some communities, a girl must be cut before she can become a wife and mother and, in some cases, to own property.

Types of Female Genital Cutting

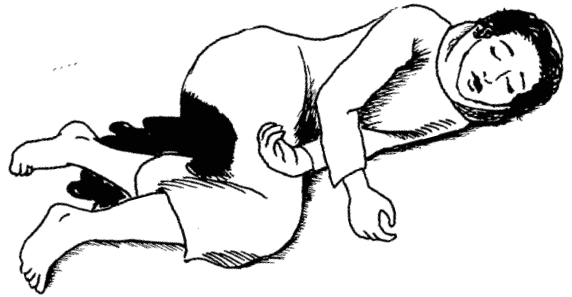
There are 4 types of female genital cutting. All can cause pain, bleeding, infection, and sometimes death.

1. The outer *clitoris* and skin around it is partly or completely removed.
2. The clitoris and *inner folds* of the *genitals*, and sometimes the *outer folds*, are partly or completely removed. This is called *excision*.
3. The outside genitals are cut away, and the opening to the *vagina* is sewn almost closed. This is called *infibulation*. A small hole is left for *urine* and menstrual blood to flow out. This type of cutting is the most dangerous and causes the most serious health problems.
4. Other forms of genital cutting include piercing, pricking, scraping, and cauterizing (cutting and then burning).

The way a girl is cut varies in different places, but cutting is almost always treated as a ceremony marking the passage of a girl from childhood into adulthood.

These problems may happen right away or in the first weeks:

- heavy bleeding
- *infection*
- *shock* from severe pain, bleeding, or infection
- problems with passing urine



These are dangerous problems. Get help right away.

These problems may happen later and can last for many years:

- problems with *menstrual periods*
- problems with sex
- problems feeling sexual pleasure
- problems during and after birth
- leaking urine and *stool*
- being unable to get pregnant (*infertility*)
- pain that does not go away
- mental health problems

Health Problems Caused by Female Genital Cutting



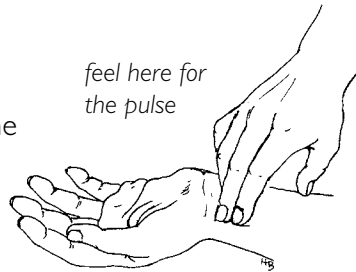
shock

HEAVY BLEEDING AND SHOCK

Heavy bleeding from a deep cut or tear can happen quickly and is very dangerous. Someone who loses too much blood can go into shock and die.

Warning signs of shock (one or more of the following):

- severe thirst
- pale, cold, and damp skin
- weak and fast *pulse* (more than 100 beats per minute for someone over age 10, or more than 140 beats per minute for a child 2 to 10 years old)
- fast breathing (more than 30 breaths per minute)
- confusion or *loss of consciousness* (*fainting*)



What to do:

- Get help immediately. **Shock is an emergency.**
- Press firmly on the bleeding spot right away. Use a clean, small cloth that will not soak up a lot of blood. Keep the person lying down while you take them to medical help.
- Help them drink as much as they can.
- If the person is unconscious and you live far from health services, give rectal fluids before going for help.

INFECTION

If a cutting tool is not cleaned properly (*sterile*) before each use, *germs* can cause an infection such as *tetanus*, *HIV*, or *hepatitis*.

Signs:

- **of wound infection:** *fever*, swelling in the genitals, *pus* or a bad smell from the wound, pain that gets worse.
- **of tetanus:** tight jaw, stiff neck and body muscles, difficulty swallowing, and *convulsions*.
- **of shock** (see above).
- **of an infection in the blood** (*sepsis*): fever and other signs of infection, confusion, and shock.

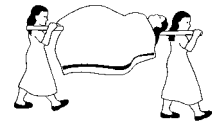
For signs of HIV or hepatitis, see Chapter 17, "HIV" and Chapter 16, "Sexually Transmitted Infections."

IMPORTANT *If anyone begins to show signs of tetanus, shock, or sepsis, take them to medical help right away.*

What To Do for Health Problems



shock



TRANSPORT!



rectal fluids



cleaning, disinfecting, and sterilizing tools

► *Signs of infection can begin any time during the first 2 weeks after the cutting.*



infection



TRANSPORT!



cephalexin, 494
dicloxacillin, 498
doxycycline, 499
erythromycin, 501

What to do for infection:

- Give an *antibiotic*, such as cephalexin, dicloxacillin, doxycycline, or erythromycin.
- Keep watching for warning signs of tetanus, sepsis, and shock. **If they have not yet had a tetanus vaccination, they should get one immediately.**
- Give modern or traditional medicines for pain.
- Keep the genitals very clean. Wash them with water that has been boiled and cooled and has a little salt in it.



Cutting is even more dangerous for girls who have not had a tetanus vaccination. All children should be vaccinated.

URINE PROBLEMS

Female genital cutting increases the chances a person will have frequent *bladder* or *kidney* infections. And because cutting often causes severe pain when passing urine, some girls try to hold their urine back, another cause of infection and damage to the urine tubes, bladder, and kidneys. Holding back urine frequently can cause stones to form in the bladder.

What to do:

- Run clean water over the genitals when passing urine. Drinking more liquids will also help. This makes the urine less acid, so it causes less pain.
- Pour water into a bucket or pan. The sound of running water sometimes helps the person start to pass urine.
- Put a towel soaked in warm water on the genitals to lessen pain.
- Watch for signs of bladder and kidney infection.

If a girl has not been able to pass urine for more than a day or night, and her lower belly feels tight and full over the bladder, it is an emergency. Go to a trained health worker immediately who can put a tube (a catheter) into the bladder to drain the urine. Do not give her more liquid to drink, because this will put more pressure on the bladder and kidneys.



366
bladder and kidney infection



373
how to put in a catheter



TRANSPORT!

PROBLEMS WITH MENSTRUAL PERIODS

If the vaginal hole that is left after infibulation is too small, or if it is blocked by scarring inside the body, the flow of menstrual bleeding can be blocked. This can cause:

- very painful menstrual periods.
- long periods, lasting 10 to 15 days.
- no menstrual bleeding because the vaginal opening is blocked and the blood cannot get out.
- trapped blood that can lead to *pelvic inflammatory disease (PID)* and scarring in the womb and tubes. This can cause infertility.

What to do:

- Put a towel soaked in hot water on the lower *abdomen* to relieve pain. (Not so hot as to burn the skin.)
- It may help to walk around and do light work or exercise.

If the problems are severe, the vaginal opening may need to be made larger. This should be done by a skilled health worker to prevent harm to the reproductive parts inside.

PROBLEMS WITH SEX AND SEXUAL HEALTH

If someone who has had their genitals cut has none of the health problems described in this chapter, they may be able to enjoy sex. But many women who have been cut, especially those who have been infibulated, find sex difficult.

In some communities, young women have their genitals cut and are married on the same day. Or a woman who has had her genitals cut at a young age may have her vaginal opening made larger just before the first time she has penis-in-vagina sex in marriage. If she is expected to have sex before the wound has healed, sex will be very painful and dangerous, and the wound may take longer to heal. Open wounds also increase her risk of getting HIV and other *sexually transmitted infections (STIs)*.

During sex, a person who has had their clitoris removed may find it difficult to feel pleasure and become aroused.



► All wounds should be completely healed before having sex.

If you live where infibulation is practiced, help men to understand that the vaginal opening should be safely and gently made larger. Opening should be done long before the first time a woman has sex, to allow time for complete healing. Opening should be done by a health worker who uses sterile cutting tools, and who knows how to care for the wound afterward to prevent infection.

► Encourage couples to talk about how female genital cutting affects having sex together.



What to do for problems with sex:

You can talk with your partner about finding ways to become more sexually aroused, and you can explain that you may need more time to get sexually excited.

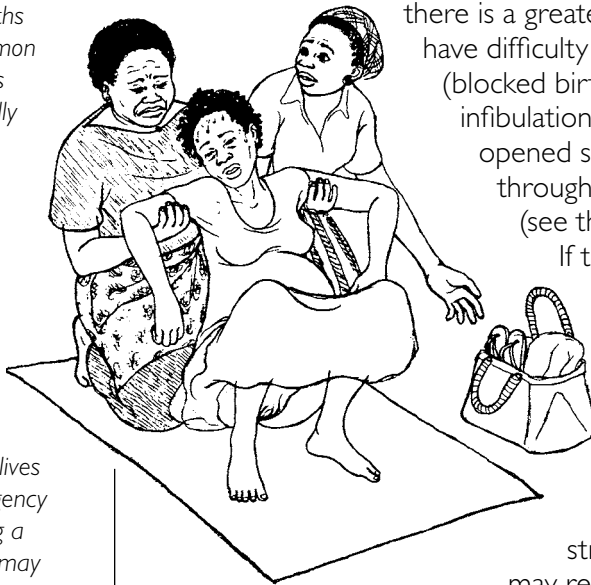
Also talk about ways to make sex less painful. Having enough wetness (*lubrication*) can make sex safer and hurt less.

Getting reproductive health care

If an infibulated vaginal opening is not large enough, it is impossible to have a *pelvic exam* or a *Pap test* for cancer (see page 378). This means someone has fewer choices for protecting against pregnancy, cancer, and STIs.

PROBLEMS WITH BIRTH

► Blocked births are more common in young bodies that are not fully grown.



With some types of female genital cutting, there is a greater risk that the baby will have difficulty getting out of the vagina (blocked birth). If the hole left after infibulation is very small, it must be opened so the baby's head can pass through. This is called "deinfibulation" (see the box on the next page).

If the person who does the opening is not skilled, it can cause other complications.

Scarring from female genital cutting can also cause the genitals to tear more during birth, since scarred skin does not stretch easily. Heavy bleeding may result.

► If someone lives far from emergency services, having a baby at home may be dangerous—especially if they have been infibulated.

► Some traditional midwives have had special training for helping women who have had their genitals cut have safe births, and for problems from infibulation.

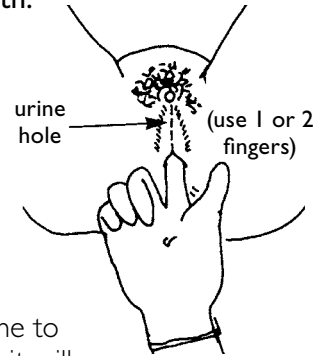
What to do:

Plan in advance for birth. By the second half of pregnancy, try to see a trained midwife or other health worker trained in helping those who have had their genitals cut give birth. The midwife can tell you what the risks are of complications or if the vaginal opening should be made larger. If there are risks, make plans ahead of time to have skilled help during the birth.

Emergency: If someone who has been infibulated is giving birth and the baby will not come out (a blocked birth), the scars must be cut so the baby can be born. If possible, this should be done by a trained health worker. But if there is no health worker nearby, wash your hands well with soap and clean water before you begin, and wear clean rubber or plastic gloves or bags on your hands. The cutting tool must be cleaned and sterilized first (see page 526). **If you have to cut someone, get them to a health worker who knows how to repair the cut right after the birth.**

To cut the scars open (deinfibulation):

1. Put 1 or 2 fingers under the band of scar tissue.
2. Inject local *anesthesia* if you know how.
3. Cut the old scar open by snipping the bands of scar tissue until you can see the urine hole. The vagina will probably now stretch enough to let the baby come out.
4. After birth, the opening will need repair. This is a good time to explain that it would be safer not to be infibulated again—it will cause more scarring and can block the urine tube and vagina. A trained health worker can repair the genitals without closing the opening.
5. To prevent infection, give erythromycin, 500 mg 4 times a day for 7 days.



LEAKING URINE AND STOOL

During a blocked birth, the vagina, bladder, or *rectum* can be injured, forming a *fistula* and causing urine or stool to leak out of the vagina.

Leaking urine and stool are terrible problems to live with. Many women have been rejected by their partners because of the smell and because they cannot control the leaking. Seek medical help as soon as the problem is discovered.

INFERTILITY

Infection can cause scarring of the womb and tubes, which make it difficult to get pregnant. If you think there are problems with scarring in the womb or tubes from blocked flow of menstrual blood, see a trained health worker about making the vaginal opening larger.





MENTAL HEALTH PROBLEMS

Someone who had female genital cutting done to them can become overwhelmed with pain, *anxiety*, sadness, or anger. When done in the presence of trusted family or others, it may destroy the ability to ever trust anyone. It can be worse if someone is cut against their will or with no preparation.

Chronic (ongoing) pain and suffering can cause other lasting mental health problems, such as deep sadness, *flashbacks*, feelings of helplessness and worthlessness, and isolation. Pain with sex and other problems can also cause severe strain between partners.

What to do:

- Encourage the person to talk about how they feel.
- If someone seems withdrawn and unable to do daily activities, see pages 418 and 430.

THE MEDICALIZATION OF FEMALE GENITAL CUTTING

Doctors and nurses who serve immigrants from places where female genital cutting happens can earn a lot of money by continuing this harmful practice in the cities or new countries where people have settled. Because they have medical education and access to safe tools and medicines, they claim no one will die or be injured by the cutting. But there is no medical reason for this practice, and these people still harm the bodies and minds of those they cut. Health workers should not participate in female genital cutting.

Working for Change

After all the problems my wife and I had with sex and birth, I will not let my 2 daughters have their genitals cut.



If you are not sure how you feel about female genital cutting, weigh the risks to help you decide. Are the benefits of cutting worth the problems? Culture is always changing to meet new needs. Why not change this practice?

What you can do:

- Help everyone in your community feel valued whether they are cut or not.
- Encourage your daughters to continue their education and make their own decisions about their lives. Every child has the right to good health, education, and to decide what happens to their body.



ALTERNATIVE RITES OF PASSAGE

In many communities, mothers, midwives, and community leaders have adapted traditions to mark the passage of a girl to womanhood. In some places, the several-days-long ritual happens exactly as before, but with a new practice in place of female genital cutting. For example, a girl will have milk poured over her genitals to symbolize fertility. In other places, educational camps that last many days train girls in “family life skills.” Then there is a feast given by the families or a public ceremony to recognize the girls’ transition to adulthood, depending on local customs.

- Encourage health workers to explain the risks of female genital cutting, promote alternatives, and get training on what to do for health problems caused by cutting.
- Educate your community about the health problems caused by female genital cutting. Find out what women’s organizations in your region are doing. Together you can work for change.
- Discuss cutting with traditional and religious leaders. Religion does not support female genital cutting, but this is not always well understood.
- Transform rituals that mark the passage from childhood to adulthood so they do not include female genital cutting, but still include prayers, songs, and practices that do not harm women.
- Recognize how important traditional birth attendants are to community health. Since they often perform female genital cutting, educate them about its harms. Replace the recognition they get for cutting ceremonies with their participation in rituals that do not include cutting.

► *For real change to happen in your community, people must work together to end this harmful practice.*



FEMALE GENITAL CUTTING, HUMAN RIGHTS, AND THE LAW

Even if no health problems occur, a girl who has had her genitals cut has still been harmed in a way that will affect her future. Female genital cutting is done to girls who, by law, are not old enough to make their own decisions. Although parents may believe cutting will help improve a girl’s social status, in fact it hurts her emotionally, physically, and sexually. That is why the United Nations, the World Health Organization, and UNICEF have declared female genital cutting a violation of girls’ human rights.

In Africa, 18 countries, including Burkina Faso, Egypt, Ethiopia, Guinea, and Senegal, as well as 12 countries in the Global North, including the United States, Australia, and some European countries, have passed laws against female genital cutting. And importantly, countries are beginning to enforce these laws. Often this change is being led by groups of doctors, nurses, and health workers who oppose cutting the genitals of girls. Together with lawyers, teachers, and others, they are working to stop this painful and unnecessary practice and defend the rights of young girls to stay healthy by keeping their bodies uncut.