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**On the Political Epistemology of Female Circumcision in
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Abstract

Purpose: The sensitization which this discussion engenders, has the objective of instituting an ever more formidable resilience in the advocacy against female genital mutilation (FGM) around the globe.

Methodology: Besides the expository, analytic and evaluative character of this work, a particular effort is made to unveil the political and epistemological trappings that undergird the condemnable, but on-going practice of female genital mutilation in different parts of the world, especially in the continent of Africa.

Findings: Some people point out that the word "cutting" is less judgmental and relates better to terms used in many local languages. However, many women's health and human rights organizations use the word "mutilation," not only to describe the practice, but also to point out the violation of women's human rights.

Unique Contribution to theory, practice and policy (recommendation): Ritual circumcision of young males and females is a practice seen in many cultures across the world, including sub-Saharan and North Africa, the Muslim Middle East, the Jewish diaspora, Aboriginal Australia, the Pacific Islands, Southeast Asia, etc. This work discusses female circumcision as "female genital mutilation" and rejects the view proposed by some that its practice is culturally and ethically relative. All three terms, female genital cutting (FGC), female circumcision, or female genital mutilation (FGM) describe the procedure that cuts away part or all of the external female genitalia and are used to describe the same thing, that is, mutilation. Some people fear that parents may resent the implication that they are "mutilating" their daughters by participating in this largely cultural event, and so reject the term FGM in favour of FGC.

Keywords: *Africa, epistemology, female circumcision, female genital mutilation, female genital cutting, politics, sensitization.*

1.0 Introduction

In retrospect, largely Eurocentric discourse on Female Genital Mutilation/Cutting (FGM/C) has often framed the practice as morally unacceptable.¹ This conceptualization of FGM/C continues to thrive through dualist and positivist analyses of FGM/C, portraying human rights and culture as mutually exclusive, and separating African women's bodies from their various contexts and ignoring profound linguistic differences.² According to the World Health Organization, Female Genital Mutilation/Cutting refers to the complete or partial ablation of external female genitals, often practiced as a rite of passage to womanhood in many countries all over the world.³ Though its origins are still unclear, a few scholars believe the practice originated from ancient Egypt (current Sudan), due to the discovery of fifth century BC circumcised mummies.⁴ While scholars like Andro and Lesclingand⁵ suggest that FGM/C began in the Middle East and spread through Arab merchants, in Africa records of FGM/C can be found in European explorers' accounts such as Gollaher⁶ who presents an early seventeenth century excerpt from a German explorer's report on FGM/C: The girls also have their special circumcision; for when they reach their tenth or eleventh year, they insert a stick, to which they have attached ants, into their genitories, to bite away the flesh. Indeed, in order that all the more be bitten away, they sometimes add fresh ants. Such quintessential narratives fit in the primitive and savage picture of African people portrayed in Joseph Conrad's famous book, *Heart of Darkness*.⁷

During this period, practices such as Female Genital Cutting were portrayed as "a violation of the colonizers' notion of good Christian morals and values, contrary to progress, civilization, and modernity."⁸ It is hence fair to conclude that early ethnographies capturing FGM/C were deeply rooted in a Eurocentric, positivist epistemology. The Eurocentric framings of FGM/C continue to underpin current discourses concerning the practice. Currently, the United Nations (UN) and the African Union (AU) classify the practice as a violence against human rights, due to its "severe impact on women's reproductive health."⁹ As a matter of fact, development theorists such as

¹Asma Eldeser, *Woman, Why Do You Weep? Circumcision and Its Consequences* (London: Zed Press, 1982), p. 82

²Faye Ginsberg, "What Do Women Want?: Feminist Anthropology Confronts Clitoridectomy." *Medical Anthropology Quarterly* 5, No. 1 (March, 1991): 17—19.

³Elena Jirovsky, (2010) 'Views of women and men in Bobo-Dioulasso, Burkina Faso, on three forms of female genital modification', *Reproductive Health Matters*, 18(35), pp. 84–93. doi: 10.1016/S0968-8080(10)35513-3.

⁴Jewel Llamas (2017) 'Female Circumcision: The History, the Current Prevalence and the Lee, C. J. (2018) 'Reviewed Work(s): African Words, African Voices: Critical Practices in Oral History, by Luise White, Stephan F. Miescher and David William Cohen,' 50(3), pp. 152– 154.

⁵Courtney Smith (2011), "Who defines "mutilation"? Challenging imperialism in the discourse of female genital cutting," *TT- Feminist Formations*, 23(1), 30-33.
view_and_current_knowledge [Accessed 2 June 2020].

⁶David Gollaher (2000), *Circumcision*, (New York: Basic Books), p. 190

⁷Chinue Achebe (2010), *An Image of Africa*, (London: Penguin), p. 86

⁸Corrine Kratz (1994), *Affecting Performance* (Washington and London: Smithsonian Institution Press), p. 78

⁹Maha Ateeq Al-Refaei et al (2016), 'Socio-economic and reproductive health outcomes of

Ferguson (1990) argue that many post colonies are governed by a Western hegemonic discourse of rights, informed by a specific socioeconomic and cultural context. The overlap of this narrative with feminist discourses has led to a various kinds of disputations.

Unlike Western liberal feminists and many international organizations who contend that Female Genital Mutilation/Cutting reinforces men's power over women by controlling their sexual agency, a post-colonial feminist analysis of the issue offers a more nuanced opinion on the practice since the post-colonial analytic lens requires that African woman's rights ought to be adjusted to each specific circumstance.¹⁰ Africa that is abject and immutable. This renders the women discussed as passive subjects with no agency and this is a problematic framing. Attending to this paradox, Njambi specifically stresses that the homogeneity of FGM/C discourses characterized by the demonization of culture overshadows many African women's voices and FGM/C experiences. Some women, dwelling on their own experience, have explained that they are the ones who insisted on getting cut as they wanted to be included in the "grownups" conversations. They also recall that during their operation, their clitoris' hood was "cut through its apex, which caused the hood to split open and the clitoris to be completely exposed, an exposure that has been associated with sexual pleasure."¹¹ African feminism supports the claim that most narratives discuss the African woman's FGM/C experience whilst ignoring social locations, ethnicities, and other important variables that contribute to the intersectionality and complexity of an African woman's experience. This separation of the African woman's body and experience from its context could be due to the universalization of the female body by Western liberal feminists and international organizations.

There is a need for nuance in understanding what FGM/C means to different contexts and across cultures as well. The main question is how do we establish an ethical space of listening and what do we do with marginalized voices of women who are demonized for believing in the practice? On the other hand, the universalization and policing of the female body occurs on different levels. To elaborate the issue at hand, Njambi explores and criticizes the dualism between female body representations and cultural contexts by cross examining whether it can be separated from cultural context. By critically analyzing Western liberal feminisms' portrayal of the female body and culture, she concludes that the female body and culture are far from being mutually exclusive and stresses that female bodies should be represented within their cultural contexts for their heterogeneity to be understood.¹² One could argue that this separation is because of the hegemonic representations of the female body. The roots of this hegemony can be traced back to colonization and neo-colonization.¹³ Just as other cultural practices like foot binding in China, FGM/C is often

female genital mutilation,' *Archives of Iranian Medicine*, 19(11), pp. 805–811. doi: 0161911/AIM.0011

¹⁰ Muhammad Bilal Munir (2014), 'Dissecting the claims of legitimization for the ritual of female circumcision or female genital mutilation (FGM),' *International Review of Law*, 2014(2), p. 6. doi:10.5339/irl.2014.6.

¹¹ Wairimu Ngaruiya Njambi (2004), "Dualisms and female bodies in representations of African female circumcision: A feminist Critique," *Feminist Theory*, 5(3), 281–303. <https://doi.org/10.1177/1464700104040811>.

¹² Nkiru Nzegwu (2004), "Feminism and Africa: Impact and limits of the Metaphysics of Gender. In, *A companion to African philosophy*, Kwasi Wiredu (ed.) (Oxford: Blackwell), p. 77.

¹³ Courtney Smith (2011), "Who defines "mutilation"? Challenging imperialism in the discourse

judged as a violation of Western notions of good morals and values as well as a hindrance to development.

1.1 The Social and Cultural Symbolism of Circumcision in Africa

Like many rites of transition, physical separation is a central part of ritual circumcision. Seclusion in the bush and building and living in a temporary lodge, which is subsequently burned along with belongings to mark the end of seclusion and the start of a new phase in life-cycle and a new status, are central tenets in the practice.¹⁴ While circumcision involves the permanent alteration of the body, the process is also not ‘merely’ physical, involving as it does, the crucial acquisition of cultural knowledge such as instruction in courtship and marriage practices so that men and women who have experienced initiation are said to be distinguishable by their social behaviour and vocabulary.¹⁵ Medicalized simplification of the procedure calls into question what is being achieved. Moreover, the private and individualized nature of hospital circumcision removes from the practice its necessarily public dimension in which the community bears witness to the individual’s changed social and legal standing.¹⁶ John Mbiti, in his *Introduction to African Religion*, argues that initiation has a religious significance that is dependent upon the (public) shedding of blood. The blood-shed in this way, binds the person to the land and hence to the ancestors. Mbiti argues that once the individual sheds his blood he ‘joins the stream of his or her people and truly becomes one with them.’

In this sense, the scars of initiation are also scars of identity. The public ceremonies, feasting and celebration associated with initiation, serve to strengthen communal bonds and renew the vitality of a community.¹⁷ In Manding community of Senegal, Diabate’ tells about how the mother gives her ring to her child that will be circumcised to prepare him not to feel the pain of the knife of the circumciser: “Put this ring on your biggest finger... then you will put it in your mouth. And when the circumciser comes to you, bite down on the ring, with all your might. Thus, you will feel only the sting of a wasp, and I will cry in pain in your place.”¹⁸ Hospitalization is thus strongly resisted by many who see themselves as champions of threatened cultural legacies. However, in the binary of progress versus backward superstition, of life-giving western medicine versus life-threatening tradition, there is little room for maneuver. To question the medicalization of what is meant to be

of female genital cutting,” *TT- Feminist Formations*, 23(1), 25–27.

<https://doi.org/http://dx.doi.org/10.1353/ff.2011.0009>.

¹⁴Tryphosa Siweya, Tholene Sodi, and Mbuyiselo Douglas, “The Notion of Manhood Embedment in the Practice of Traditional Male Circumcision in Ngove Village, Limpopo, South Africa,” *American Journal of Men’s Health* 2018, Vol. 12(5) 1567–1569.

¹⁵ Omar Egesah, “The Relevance of Intangible Cultural Heritage in Modern Times: Evidence from Babukusu Male Circumcision,” *Sociology and Anthropology* 2(7): 2014: 273-274.

¹⁶Tryphosa Siweya, Tholene Sodi, and Mbuyiselo Douglas, “The Notion of Manhood Embedment in the Practice of Traditional Male Circumcision in Ngove Village, Limpopo, South Africa,” *American Journal of Men’s Health* 2018, Vol. 12(5) 1577–1578.

¹⁷Cheikh Ibrahima Niang and Hamadou Boirob “You Can Also Cut My Finger!: Social Construction of Male Circumcision in West Africa, A Case Study of Senegal and Guinea-Bissau,” *Reproductive Health Matters* 2007, 15(29): 22–25

¹⁸Massa Maka Diabate, (1980) *Comme une piquêre de guepe*. Paris7 E’ditions Pre’sence Africaine, p. 58

a complex and painful transition to manhood or womanhood, to emerge as a force for conservatism, hampering the dominant state-sanctioned narrative in some parts of the world.¹⁹ A recurring trope in the public conversation surrounding traditional circumcision deaths is that of ‘primitive’ and savage practices in contrast to the sanity and rationality of medical science and individual human rights. Reports of ‘car seatbelts used as bandages’ and the use of drugs and alcohol by initiation nurses abound. Layered on to this theme of savagery is a discourse of AIDS panic with government intervention in traditional schools legitimized by way of reference to unsafe practices such as the use of a single blade to circumcise large groups of boys and girls.

1.2 Female Genital Mutilation: Pros and Cons

All three terms: female genital cutting (FGC), female circumcision, or female genital mutilation (FGM) describe the procedure that cuts away part or all of the external female genitalia and will be used to describe the same thing, that is, mutilation. Some people fear that parents may resent the implication that they are "mutilating" their daughters by participating in this largely cultural event, and so reject the term FGM in favor of FGC.²⁰ Some people point out that the word "cutting" is less judgmental and relates better to terms used in many local languages. However, many women's health and human rights organizations use the word "mutilation" not only to describe the practice, but also to point out the violation of women's human rights.²¹ Previously, some referred to the practice as "circumcision" to link FGC to male circumcision. However, this word can hide the serious physical and psychological effects of cutting women's genital. It also fails to show differences between the different types of cutting. Female genital mutilation is classified into four major types:²²

- (1) Clitoridectomy: The partial or total removal of the clitoris (a small, sensitive and erectile part of the female genitals) and, in very rare cases, only the prepuce (the fold of skin surrounding the clitoris).
- (2) Excision: partial or total removal of the clitoris and the *labia minora*, with or without excision of the *labia majora* (the labia are "the lips" that surround the vagina).
- 3) Infibulation: narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the inner, or outer, labia, with or without removal of the clitoris.²³
- (4) The World Health Organization describes this fourth type as “all other harmful procedures to

¹⁹Oyeronke Oyewumi, (1997) *The Invention of Women: Making an African Sense of Western Gender Discourses*, (Minneapolis: University of Minnesota Press), p. 67

²⁰ Frank Chinedu Akpuaka, “Vulva adhesions following female circumcision in Nigeria,” *Postgraduate Doctor, Africa*. 1998; 13(4):98-99.

²¹ <http://www.womenshealth.gov/publications/our-publications/fact-sheet/female-egenital-cutting.cfm> (11 Dec. 2012)

²²Daphne Williams Ntiri, (1993) "Circumcision and Health among Rural Women of Southern Somalia as Part of a Family Life Survey," *Health Care for Women International* Vol. 14, No. 3 (May—June): 215—16.

²³ Nancy Scheper-Hughes, (1991) “Virgin Territory: The Male Discovery of the Clitoris,” *Medical Anthropology Quarterly* 5, No. 1 (March): 25—28.

the female genitalia for non-medical purposes” and includes practices including pricking, piercing, incising, scraping, and cauterizing the genital area.”²⁴

1.2.1 Female Circumcision and Health Implications

FGM has no health benefits, and it harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and interferes with the natural functions of girls' and women's bodies. Immediate complications can include severe pain, shock, hemorrhage (bleeding), tetanus or sepsis (bacterial infection), urine retention, open sores in the genital region and injury to nearby genital tissue.²⁵ Long-term consequences can include: recurrent bladder and urinary tract infections, cysts, infertility, an increased risk of childbirth complications and newborn deaths, the need for later surgeries.²⁶ For example, the FGM procedure that seals or narrows a vaginal opening needs to be cut open later to allow for sexual intercourse and childbirth. Sometimes it is stitched again several times, including after childbirth, hence the woman goes through repeated opening and closing procedures, further increasing and repeating both immediate and long-term risks.²⁷

1.2.2 Female Circumcision and Religious Beliefs

Although many people believe that FGC is associated with Islam, it is not. FGC is not supported by any religion and is condemned by many religious leaders. The practice crosses religious barriers. Muslims, Christians, and Jews have been known to support FGC on their girls. However, no religious text requires or even supports the cutting female genitals. In fact, Islamic Shari'a protects children and protects their rights.²⁸ From a Christian perspective, FGC has no religious grounds. In fact, research shows that the relationship between religion and FGC is significantly inconsistent, to say the least. Female genital mutilation (FGM) comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. The practice is mostly carried out by traditional circumcisers, who often play other central roles in communities, such as attending childbirths.²⁹

1.2.3 Female Circumcision and Human Rights Abuse

FGM is recognized internationally as a violation of the human rights of girls and women. It reflects deep-rooted inequality between the sexes, and constitutes an extreme form of discrimination

²⁴ Sunday O. Onuh, Gabriel O. Igberase, et al., “Female Genital Mutilation: Knowledge, Attitude and Practice among Nurses,” in *Journal of the National Medical Association*, Vol. 98. No. 3, March 2006: 409-410.

²⁵ Hamid Rushwab, *African Journal of Urology*, Volume 19, Issue 3, September 2013: 30-133

²⁶ Lawrence M. Iregbulem, “Post-circumcision vulva adhesion in Nigeria” *British Journal of Plastic Surgeons*, (1980), Vol. 33: 83-85.

²⁷ June Thompson, (1989) "Torture by Tradition." *Nursing Times* 85, no. 15: 17-18.

²⁸ Raqiya Haji Dualeh Abdalla, *Sisters in Affliction: Circumcision and Infibulation of Women in Africa*, (London: Zed Press), pp. 13-17, 72-75.

²⁹ Lars Almroth, Hibba Bedri, Susan El Musharaf1, Alia Satti, et al (2005). “Urogenital Complications among Girls with Genital Mutilation: A Hospital-Based Study” in *Khartoum, African Journal of Reproductive Health*, 9(2): 118-119.

against women.³⁰ It is nearly always carried out on minors and is a violation of the rights of children. The practice also violates a person's rights to health, security and physical integrity, the right to be free from torture and cruel, inhuman or degrading treatment, and the right to life when the procedure results in death.³¹ The WHO and the United Nations Commission on Human Rights, along with several African and Asian nations, have called for an end to the practice of FGC. The WHO views the practice as a violent act against a girl that causes her serious lifetime problems.³² The American Medical Association (AMA) also rejects FGC and supports laws against it. There is also growing international support for condemning FGC and a call for severe penalties given to those who practice it.³³

Some cultures that practice FGC view it as their right.³⁴ FGC supporters say that the Western practice of making breasts bigger and other plastic surgery is comparable to FGC. From a universalistic standpoint, the reasons proposed by proponents of cultural rights are nothing but excuses for committing acts of violence against women.³⁵ The universalist claims are strongly rendered in Ashley Montagu's "Mutilated Humanity": "I think it would be greatly to our advantage if instead of calling ourselves *Homo Sapiens*, we called ourselves *Homo Mutilans*, the mutilating species, the species that mutilates both mind and body, often in the name of reason, of religion, tradition, custom, morality, and, law. Were we to adopt such a name for our species, it might focus our attention upon what is wrong with us and where we might begin setting ourselves right." For him, circumcision, is an archaic ritual mutilation that has no justification whatever and no place in a civilized society."³⁶ From this standpoint, female circumcision is seen as a form of violence against women, indistinguishable from murder, rape, trafficking, forced prostitution, physical and emotional abuse, stalking, and sexual harassment. Proponents argue that female circumcision infringes upon human rights conventions that protect and defend women and children from violence and aggression.³⁷ Seven conventions are cited in support of the argument that this

³⁰ Leonard Kouba & Judith Muasher, "Female Circumcision: An Overview," 28 *Afr. Stud. Rev.* 95 (1985): 22-23.

³¹ Daphne Williams Ntiri, (1993) "Circumcision and Health among Rural Women of Southern Somalia as Part of a Family Life Survey," *Health Care for Women International* Vol. 14, No. 3 (May—June): 217—218.

³² Adeyinka M. Akinsulure-Smith, Tracy Chu, Ludmila N. Krivitsky, (2018) "West African Immigrant Perspectives on Female Genital Cutting: Experiences, Attitudes, and Implications for Mental Health Service Providers," *Journal of International Migration and Integration* 19 (2), pp. 259–260.

³³ Adeyinka M. Akinsulure-Smith, Tracy Chu, Ludmila N. Krivitsky (2018) "West African Immigrant perspectives on Female Genital Cutting: Experiences, Attitudes, and Implications for Mental Health Service Providers," p. 263

³⁴ Hanny Lightfoot-Klein, (1989) *Prisoners of Ritual: An Odyssey into Female Genital Circumcision in Africa* (New York: Harrington), pp. 179-181

³⁵ Sunday O. Onuh, et al., "Female Genital Mutilation: Knowledge, Attitude and Practice among Nurses," in *Journal of the National Medical Association*, Vol. 98. No. 3, March 2006: 411-412

³⁶ Ashiey Montagu, "Mutilated Humanity," (Presented at *The Second International Symposium on Circumcision*, (San Francisco, California), April 30-May 3, 1991), pp. 29-32

³⁷ Akin-Tunde A. Odugogbe, Bosede B. Afolabi, Oluwasomidoyin O. Bello, Ayodeji S. Adeyanju, "Female genital mutilation/cutting in Africa," *Translational Andrology and Urology*,

constitutes a human rights violation: The Universal Declaration of Human Rights (1948); The United Nations Convention on the Rights of the Child (1959); The African Charter on Rights and Welfare of the Child (1990); The United Nations Convention on the Elimination of All Forms of Discrimination Against Women (1992); The United Nations Declaration on Violence Against Women (1993); The World Conference on Human Rights Declaration and Programme of Action, Vienna (1993); and The United Nations High Commission on Refugees Statement Against Gender-Based Violence (1996). In light of the issues asserted at conventions, the practice is considered as a case of human rights violation because it transgresses three primary accepted protections: the right to health, the rights of the child, and the right to bodily integrity.³⁸

1.2.4 Female Circumcision and Ethical Relativism

Female circumcision/genital mutilation serves as a test case for some versions of ethical relativism because the practice has widespread approval within the cultures where it is practiced and widespread disapproval outside those cultures. Relativism, however, means different things to different "academic cultures." Indeed one of the most striking things about the term relativism is that it is used in so many different ways, in the Encyclopedia of Philosophy, Richard D. Brandt writes, "Contemporary philosophers generally apply the term (ethical relativism) to some position they disagree with or consider absurd, seldom to their own views; social scientists, however, often classify themselves as relativists."³⁹ Philosophers and those in religious studies often distinguish two ways to understand relativism: one is controversial, and the other is not. The noncontroversial, descriptive version, often called descriptive relativism, is the view that people from different cultures do act differently and have distinct norms. Social scientists often work as descriptive relativists: they try to understand cultural differences and look for any underlying similarities.

Those studying or criticizing female circumcision/genital mutilation, of course, recognize that we do act differently and have different values. The controversial position of ethical relativism, is that an action is right if it is approved in a person's culture and wrong if it is disapproved.⁴⁰ Another version of this controversial view is that to say something is right means it has cultural approval; to say something is wrong means it has cultural disapproval. According to this view, which some call cultural relativism, there is no way to evaluate moral claims across cultures; positions taken by international groups like the World Health Organization merely express a cluster of particular societal opinions and have no moral standing in other cultures.⁴¹ On this view it is incoherent to claim that something is wrong in a culture yet approved, or right yet disapproved; people can express moral judgments about things done in their own or other cultures, but they are expressing only their cultural point of view, not one that has moral authority in another culture. Many social scientists and some philosophers defend ethical relativism. For example, philosopher Bernard

Vol. 6, No. 2 April, 2017: 139-141.

³⁸ Alice Behrendt, Stephan Moritz, "Posttraumatic stress disorder and memory problems after female genital mutilation" *American Journal of Psychiatry*, 2005;162(5):1000- 1002

³⁹ Richard Shweder, (1990), "Ethical Relativism: Is There a Defensible Version?" *Ethos* 18: 205-207.

⁴⁰ Nader Tobia, "Female circumcision as a public health issue." *North England Journal of Medicine* 1994; 331: 712-716.

⁴¹ Robert L. Holmes, (1993) *Basic Moral Philosophy*, (Belmont, California: Wadsworth Publishing), p. 57

Williams argues that moral knowledge is inherited by people within particular cultural traditions and has objectivity only within those cultures.⁴² Anthropologists Faye Ginsberg and Nancy Scheper-Hughes point out that ethical relativism has held an important place in anthropology despite the uncomfortable consequence that acceptance of that position means that practices like female circumcision are right within the cultures where they are approved. Anthropologists by their own admission, however, do not use the terms cultural relativism or ethical relativism consistently.⁴³ Often relativism is presented as the only alternative to clearly implausible views such as absolutism or cultural imperialism; sometimes it is used to stress the obvious points that different rankings and interpretations of moral values or rules by different groups may be justifiable, or employed to highlight the indisputable influence of culture on moral development, reasoning, norms, and decisions. It may also be used to show that decisions about what we ought to do depend on the situation for example, that it may not be wrong to lie in some cases. These points are not in dispute herein or even controversial, so comments do not apply to these versions of relativism. The criticisms offered herein does necessarily challenge relativists who agree that cross-cultural moral judgments sometimes have moral force.⁴⁴

Generally they wish to accent the role of culture in shaping our moral judgments, showing why it is dangerous to impose external cultural judgments hastily or stressing that there is often a link between established moral systems and oppression. For example, moral philosopher Susan Sherwin maintains that "normative conclusions reached by traditional theorists generally support the mechanism of oppression; for example, by promoting subservience among women" and concludes, "Feminist moral relativism remains absolutist on the question of the moral wrong of oppression but is relativist on other moral matters."⁴⁵ She uses this form of relativism to argue that female circumcision is wrong. In contrast, the distinctive feature of the version of ethical relativism criticized herein is its defense of the skeptical position that one can never make a sound cross-cultural moral judgment, that is, one that has moral force outside one's culture. This version of ethical relativism is false if people from one culture can sometimes make judgments that have moral authority about actions in another society. Its defenders regard their view to be the consequence of a proper understanding of the limits of knowledge.⁴⁶

1.2.5 Females Circumcision and Cross-Cultural Ethical Similarities

From observation, we seem to share methods of discovery, evaluation, negotiation, and explanation that can be used to help assess moral judgments. For example, we agree how to evaluate methods and research in science, engineering, and medicine, and on how to translate,

⁴²Bernard Williams, *Ethics and the Limits of Philosophy* (Cambridge: Harvard University Press, 1985), p. 77

⁴³Richard Shweder, (1990) "Ethical Relativism: Is There a Defensible Version?" *Ethos* 18: 205-207

⁴⁴John A. Lucy, (1992) "Development of the linguistic relativity hypothesis in America: Boas and Sapir," in *Language Diversity and Thought: A Reformulation of the Linguistic Relativity Hypothesis*, (Cambridge: Cambridge University Press), pp. 81-82.

⁴⁵Susan Sherwin, (1992) *No Longer Patient: Feminist Ethics and Health Care*. (Philadelphia: Temple University Press), p. 76

⁴⁶Faye Ginsberg, (1991) "What Do Women Want?: Feminist Anthropology Confronts Clitoridectomy," in *Medical Anthropology Quarterly* 5, No. 1 (March): 17-19.

debate, deliberate, criticize, negotiate, and use technology. To do these things, however, we must first have agreed to some extent on how to distinguish good and bad methods and research in science, engineering, and medicine, and what constitutes a good or bad translation, debate, deliberation, criticism, negotiation, or use of technology. These shared methods can be used to help evaluate moral judgments from one culture to another in a way that sometimes has moral authority. An example of a belief that could be evaluated by stable medical evidence is the assertion by people in some regions that the infant's "death could result if, during delivery, the baby's head touches the clitoris".⁴⁷

We need not rank values similarly with people in another culture, or our own, to have coherent discussions about their consistency, consequences, or factual presuppositions. That is, even if some moral or ethical (the terms are used interchangeably) judgments express unique cultural norms, they may still be morally evaluated by another culture on the basis of their logical consistency and their coherence with stable and cross-culturally accepted empirical information. In addition, we seem to share some moral values, goals, and judgments such as those about the evils of unnecessary suffering and lost opportunities, the need for food and shelter, the duty to help children, and the goods of promoting public health and personal well-being.⁴⁸ Let us consider, therefore, the reasons given by men and women who practice female circumcision/genital mutilation in their communities. The information presented herein is based upon studies done by investigators who come from these cultures, some of whom had this ritual surgery as children. We can examine whether these reasons allow people from other cultures any way of entering the debate based upon such considerations as consistency or stable medical findings.

A careful scrutiny of the debate concerning female circumcision suggests several conclusions about the extent to which people from outside a culture can understand or contribute to moral debates within it in a way that has moral force. First, the fact that a culture's moral and religious views are often intertwined with beliefs that are open to rational and empirical evaluation can be a basis of cross-cultural examination and intercultural moral criticism.⁴⁹ Defenders of female circumcision/genital mutilation do not claim that this practice is a moral or religious requirement and end the discussion; they are willing to give and defend reasons for their views. For example, advocates of female circumcision/genital mutilation claim that it benefits women's health and well-being. Such claims are open to cross-cultural examination because information is available to determine whether the practice promotes health or causes morbidity or mortality.⁵⁰ Beliefs that the practice enhances fertility and promotes health, that women cannot have orgasms, and that allowing the baby's head to touch the clitoris during delivery causes death to the baby are incompatible with stable medical data.⁵¹ Thus an opening is allowed for genuine cross-cultural

⁴⁷Olayinka Koso-Thomas, *The Circumcision of Women*. (London: Zed Press. 1987) p. 10

⁴⁸Stuart Hampshire, *Innocence and Experience*. (Cambridge: Harvard University Press, 1989), p.83

⁴⁹Renford Bambrough, *Moral Skepticism and Moral Knowledge*. (London: Routledge and Kegan Paul, 1979), p. 88

⁵⁰ Nancy Scheper-Hughes, (1991) "Virgin Territory: The Male Discovery of the Clitoris," *Medical Anthropology Quarterly* 5, No. 1 (March): 28-29.

⁵¹Daphne Williams Ntiri, (1993) "Circumcision and Health among Rural Women of Southern

discussion or criticism of the practice. Some claims about female circumcision/genital mutilation, however, are not as easily open to cross-cultural understanding. For example, cultures practicing infibulation, believe that it makes women more beautiful. For those who are not from these cultures, this belief is difficult to understand, especially when surveys show that many women in these cultures, when interviewed, attribute to infibulation their keloid scars, urine retention, pelvic infections, puerperal sepsis, and obstetrical problems." Koso-Thomas writes: "None of the reasons put forward in favor of circumcision have any real scientific or logical basis. It is surprising that aesthetics and the maintenance of cleanliness are advanced as grounds for female circumcision. The scars could hardly be thought of as contributing to beauty. The hardened scar and stump usually seen where the clitoris should be, or in the case of the infibulated vulva, taut skin with an ugly long scar down the middle, present a horrifying picture".⁵² Thus, not everyone in these cultures believes that these rituals enhance beauty; some find such claims difficult to understand. Second, the debate over female circumcision/genital mutilation illustrates another difficulty for defenders of this version of ethical relativism concerning the problem of differentiating cultures.

People who brought the practice of female circumcision/genital mutilation with them when they moved to another nation still claim to be a distinct cultural group. Some who moved to Britain, for example, resent the interference in their culture represented by laws that condemn the practice as child abuse." If ethical relativists are to appeal to cultural approval in making the final determination of what is good or bad, right or wrong, they must tell us how to distinguish one culture from another. How exactly do we count or separate cultures? A society is not a nation-state, because some social groups have distinctive identities within nations. If we do not define societies as nations, however, how do we distinguish among cultural groups, for example, well enough to say that an action is child abuse in one culture but not in another? Subcultures in nations typically overlap and have many variations.⁵³ Even if we could count cultural groups well enough to say exactly how to distinguish one culture from another, how and when would this be relevant? How big or old or vital must a culture, subculture, group, or cult be in order to be recognized as a society whose moral distinctions are self-contained and self-justifying? A related problem is that there can be passionate disagreement, ambivalence, or rapid changes within a culture or group over what is approved or disapproved. According to ethical relativism, where there is significant disagreement within a culture there is no way to determine what is right or wrong. But what disagreement is significant? Some people in these cultures, often those with higher education, strongly disapprove of female circumcision/genital mutilation and work to stop it.⁵⁴ Are they in the same culture as their friends and relatives who approve of these rituals? It seems more accurate to say that people may belong to various groups that overlap and have many variations. This description, however, makes it difficult for ethical relativism to be regarded as a helpful theory for determining what is right or wrong. To say that something is right when it has cultural approval is

Somalia as Part of a Family Life Survey," *Health Care for Women International*, 14, No. 3 (May-June): 216-218.

⁵²Koso-Thomas Olayinka, (1987) *The Circumcision of Women* (London: Zed Press), p. 45

⁵³ Hanks, W. F. and Severi, C. (2014) 'Translating worlds: The epistemological space of translation,' *HAU: Journal of Ethnographic Theory*, 4 (2): 4-6

⁵⁴Asma El Dareer, (1983) "Attitudes of Sudanese People to the Practice of Female Circumcision," in *International Journal of Epidemiology*, 12: 138- 139.

useless if we cannot identify the relevant culture.

Moreover, even where people agree about the rightness of certain practices, such as these rituals, they can sometimes be inconsistent. For example, in reviewing reasons given within cultures where female circumcision/genital mutilation is practiced, we saw that there was some inconsistency concerning whether women needed this surgery to control their sexual appetites, to make them more beautiful, or to prevent morbidity or mortality.⁵⁵ Ethical relativists thus have extraordinary problems offering a useful account of what counts as a culture and establishes cultural approval or disapproval. Third, despite some clear disagreement such as that over the rightness of female circumcision/genital mutilation, people from different parts of the world share common goals like the desirability of promoting people's health, happiness, opportunities, and cooperation, and the wisdom of stopping war, pollution, oppression, torture, and exploitation.

These common goals make us a world community, and using shared methods of reasoning and evaluation, we can discuss how they are understood or how well they are implemented in different parts of our world community.⁵⁶ We can use these shared goals to assess whether female circumcision/genital mutilation is more like respect or oppression, more like enhancement or diminishment of opportunities, or more like pleasure or torture.⁵⁷ While there are, of course, genuine differences between citizens of the world, it is difficult to comprehend how they could be identified unless we could pick them out against a background of our similarities. Highlighting our differences, however useful for some purposes, should not eclipse the truth that we share many goals and values and are similar enough that we can assess each other's views as rational beings in a way that has moral force. Another way to express this is to say that we should recognize universal human rights or be respectful of each other as persons capable of reasoned discourse.⁵⁸ Fourth, this version of ethical relativism, if consistently held, leads to the abhorrent conclusion that we cannot make intercultural judgments with moral force about societies that start wars, practice torture, or exploit and oppress other groups; as long as these activities are approved in the society that does them, they are allegedly right. Yet the world community believed that it was making a cross-cultural judgment with moral force when it criticized the Communist Chinese government for crushing a pro-democracy student protest rally, the South Africans for upholding apartheid, the Soviets for using psychiatry to suppress dissent, and the Bosnian Serbs for carrying out the siege of Sarajevo.⁵⁹ And the judgment was expressed without anyone's ascertaining whether the respective actions had wide-spread approval in those countries. In each case, representatives from the criticized society usually claimed that others, who do not belong to their respective cultures,

⁵⁵Daphne Williams Ntiri, (1993) "Circumcision and Health among Rural Women of Southern Somalia as Part of a Family Life Survey," *Health Care for Women International*, 14, No. 3 (May-June): 222-223.

⁵⁶ Mary Knight, (2001) 'Curing cut or ritual mutilation? Some remarks on the practice of female and male circumcision in Graeco-Roman Egypt,' *Isis, An international review devoted to the history of science and its cultural influences* Vol. 92, 2 (2001): 317-318.

⁵⁷ Isabel Ross, (1931) "Female circumcision," *Lancet*, Vol. 218, Issue 5650:1323-1324.

⁵⁸ James H. Sequeira, (1931) "Female circumcision and Infibulation," *Lancet*, Vol. 218, Issue 5645: 1054-1056.

⁵⁹John Dommissee, (1985) "Apartheid as a Public Mental Health Issue," *International Journal of Health Services*, 15(3): 501-503.

may not understand such actions may be morally justified in some cultures, but rejected in others.

If ethical relativism were convincing, these responses ought to be as well. Relativists who want to defend sound social cross-cultural and moral judgments about the value of freedom and human rights in other cultures seem to have two choices.⁶⁰ On the one hand, if they agree that some cross-cultural norms have moral authority, they should also agree that some intercultural judgments about female circumcision/genital mutilation may have moral authority. Some relativists take this route, thereby abandoning the version of ethical relativism being criticized herein. On the other hand, if they defend this version of ethical relativism yet make cross-cultural moral judgments about the importance of values like tolerance, group benefit, and the survival of cultures, they will have to admit to an inconsistency in their arguments. For example, anthropologist Scheper-Hughes advocates tolerance of other cultural value systems.⁶¹ She fails to see that she is saying that tolerance between cultures is right and that this is a cross-cultural moral judgment using a moral norm (tolerance).

Similarly, relativists who say it is wrong to eliminate rituals that give meaning to other cultures are also inconsistent in making a judgment that presumes to have genuine cross-cultural moral authority. Even the sayings sometimes used by defenders of ethical relativism such as "When in Rome, do as the Romans" means it is morally permissible to adopt all the cultural norms in operation wherever one finds oneself. Thus it is not consistent for defenders of this version of ethical relativism to make intercultural moral judgments about tolerance, group benefit, inter-societal respect, or cultural diversity.⁶² The burden of proof, then, is upon defenders of this version of ethical relativism to show why we cannot do something we think we sometimes do very well, namely, engage in intercultural moral discussion, cooperation, or criticism and give support to people whose welfare or rights are in jeopardy in other cultures. In addition, defenders of ethical relativism need to explain how we can justify the actions of international professional societies that take moral stands in adopting policy.⁶³ For example, international groups may take moral stands that advocate fighting pandemics, stopping wars, halting oppression, promoting health education, or eliminating poverty, and they seem to have moral authority in some cases. Some might respond that our professional groups are themselves cultures of a sort. But this response raises the already discussed problem of how to individuate a culture or society.⁶⁴

Admittedly, there are compelling reasons, therefore, to conclude that these rituals of female circumcision/genital mutilation are wrong. However, to say they are wrong does not mean that they are disapproved by most people in my culture but wrong for reasons similar to those given by activists within these cultures who are working to stop these practices. They are wrong because

⁶⁰Richard Brandt, (1967) "Ethical relativism," in Paul Edwards (ed.), *The Encyclopedia of Philosophy* (New York: Macmillan), pp. 46-47

⁶¹ Nancy Scheper-Hughes, (1991) "Virgin Territory: The Male Discovery of the Clitoris," *Medical Anthropology Quarterly* 5, No. 1 (March): 29-30.

⁶² Paul W. Taylor, (1954) "Four types of Ethical Relativism," *Philosophical Review* 63 (4): 500-503.

⁶³ Shia Moser, (1962) "Some remarks about relativism and pseudo-relativism in ethics," 1962 - *Inquiry: An Interdisciplinary Journal of Philosophy* 5 (1-4): 295-297.

⁶⁴ Tomislav Bracanovic, (2011) "Respect for Cultural Diversity in Bioethics. Empirical, Conceptual and Normative Constraints," *Medicine, Health Care and Philosophy* 14 (3): 229-231.

the usual forms of the surgery deny women orgasms and because they cause medical complications and even death.⁶⁵ It is one thing to say that these practices are wrong and that activists should be supported in their efforts to stop them; it is another matter to determine how to do this effectively. All agree that education may be the most important means to stop these practices. Some activists in these cultures want an immediate ban. Other activists in these cultures, encourage pricking or removing the clitoral hood in order to "wean" people away from infibulations.⁶⁶

Removing the clitoral hood has the least association with morbidity or mortality and, if there are no complications, does not preclude sexual orgasms in later life. The chance of success through this tactic is more promising and realistic, they hold, than what an outright ban would achieve; and people could continue many of their traditions and rituals of welcome without causing so much harm. Other activists in these countries, such as Raquiya Abdalla, object to equating removal of the clitoral hood female with male circumcision: "To me and to many others, the aim and results of any form of circumcision of women are quite different from those applying to the circumcision of men."⁶⁷ Because of the hazards of even removing the clitoral hood, especially for infants, I agree with the World Health Organization and the American Medical Association that it would be best to stop all forms of ritual genital surgery on women. Bans have proven ineffective: this still-popular practice has been illegal in most countries for many years. Other proposals by activists focus on education, fines, and carefully crafted legislation.⁶⁸ The critique of the reasons given to support female circumcision/genital mutilation in cultures where it is practiced shows us how to engage ourselves in discussions, disputes, or assessments in ways that can have moral authority. We share common needs, goals, and methods of reasoning and evaluation. Together they enable us to evaluate many claims across cultures and sometimes to regard ourselves as part of a world community with interests in promoting people's health, happiness, empathy, and opportunities as well as desires to stop war, torture, pandemics, pollution, oppression, and injustice.⁶⁹

Thus, ethical relativism the view that to say something is right means it has cultural approval and to say it is wrong means it has cultural disapproval is implausible as a useful theory, definition, or account of the meaning of moral judgments. The burden of proof therefore falls upon upholders of

⁶⁵ Nafissatou J. Diop, Amodou Moreau, Helene Benga, (2008) "Evaluation of the Long-term Impact of the TOSTAN Programme on the Abandonment of FGM/C and Early Marriage: Results from a qualitative study in Senegal Population Council." Available at: https://www.researchgate.net/publication/267779056_Evaluation_of_the_Long-term_Impact_of_the_TOSTAN_Programme_on_the_Abandonment_of_FGMC_and_Early_Marriage_Results_from_a_qualitative_study_in_Senegal_Population_Council. Accessed on the 27th of June, 2022, pp. 23-26

⁶⁶ United Nations (2003) "International Day of Zero Tolerance to Female Genital Mutilation," Retrieved from: <http://www.un.org/en/events/femalegenitalmutilationday/>. Accessed on the 27th of June, 2022.

⁶⁷ Raquiya Haji Duale Abdalla, (1982) *Sisters in Affliction: Circumcision and Infibulation of Women in Africa* (London: Zed Press), p. 45

⁶⁸ Nahid. F. Toubia, Eh Sharief Din (2003) "Female Genital Mutilation: Have we made Progress?" *International Journal of Gynaecology and Obstetrics*, Vol. 82, Issue 3: 254–257.

⁶⁹ Katinka J. P. Quintelier & Daniel M. T. Fessler, (2012) "Biology and Philosophy," 27 (1): 95-97.

this version of ethical relativism to show why criticisms of other cultures always lack moral authority.⁷⁰ Although many values are culturally determined and we should not impose moral judgments across cultures hastily, we sometimes know enough to condemn practices approved in other cultures.⁷¹ For example, we can understand enough of the debate about female circumcision/genital mutilation to draw some conclusions: it is wrong, oppressive, and not a voluntary practice in the sense that the people doing it comprehend information relevant to their decision. Moreover, it is a ritual, however well-meant, that violates justifiable and universal human rights or values supported in the human community, and we should promote international moral support for advocates working to stop the practice, wherever it is carried out.⁷²

2.0 What is Political Epistemology?

Political epistemology is a newly thriving field, but it has old roots. In the *Republic*, Plato attacked the epistemic merits of democracy in favor of ‘epistocracy,’ or rule by the knowers. Hannon and Eddenberg capture its main thrust as follows:

Political epistemology is a newly flourishing area of philosophy. While scholars have been interested in topics at the intersection of political philosophy and epistemology at least since Plato, the past few years have witnessed an outpouring of new research in this area. For example, new work has been published on propaganda, fake news, political disagreement, conspiracy theories, the epistemic merits of (and challenges to) democracy, voter ignorance, climate change skepticism, the epistemic harms of echo chambers, and intellectual virtues and vices in politics. Despite this surge of interest, there is no comprehensive overview to this burgeoning field. There is a need to map out the terrain of political epistemology, highlight some of the key questions and topics of this field, draw connections across seemingly disparate areas of work, and briefly situate this field within its historical and contemporary contexts. While political epistemology includes a diverse range of topics, it is important to put some structure on the terrain by grouping these topics into six sections: (i) The Epistemology of Democracy, (ii) Voter Ignorance and Irrationality, (iii) Political Disagreement and Polarization, (iv) Post-truth, Fake News, and Misinformation, (v) Trust, Doubt, and Expertise, and (vi) Epistemic Virtues and Vices in Politics. These categories are not exhaustive but they do cover a large amount of work in the emerging field of political epistemology. By carving up the field in this way, we hope to give some meaningful shape to this broad and rich area of scholarship.⁷³

⁷⁰ Hugh LaFollette, (1991) “The Truth in Ethical Relativism,” *Journal of Social Philosophy*, 22 (1): 146-148.

⁷¹ Catherine N. Axinn, Elizabeth M. Blair, Alla Heorhiadi & Sharon V. Thach (2004), “Comparing Ethical Ideologies Across Cultures,” *Journal of Business Ethics* 54 (2): 103 – 105.

⁷² Carla Maklouf Obermeyer, “The consequences of female circumcision for health and sexuality: an update on the evidence.” *Cult Health Sex*. 2005; 7: 443–435.

⁷³ Michael Hannon and Elizabeth Eddenberg, (2020) “A Guide to Political Epistemology,” in *Oxford Handbook of Social Epistemology*, Edited by Aidan McGlynn and Jennifer Lackey, (New York: Routledge), p. 77.

Political epistemology implies the study of political ideas and knowledge, as variables that affect political action, as objects of political disputation, and as products of political behavior and institutions. Political epistemology is a research project about how politics frames the questions of knowledge. An important area of political epistemology concerns the connections between structural and political features of how knowledge is produced and recognized, as well as how different social positions contribute to the social knowledge of a political community.⁷⁴ Of course, epistemology can provide the much-needed support for democracy at those times when we confront the depth of the moral disagreements amongst us, and are unable, as Rawls had hoped, to resolve those disagreements through a shared conception of justice.

Political epistemology lies at the intersection of political philosophy and epistemology. Put broadly, political epistemologists investigate the ways in which epistemological issues are at the center of our political lives. For example, they explore how claims of knowledge, truth, and expertise impact political decisions and forms of legitimate authority. Research in this domain ranges from asking questions about whether (and to what extent) legitimate authority hinges on epistemic evaluation of the process or outcome of political decisions to questions about epistemic virtues and vices of individuals in their role as political agents. Political epistemologists ask questions such as: which forms of government can leverage the collective wisdom of the public and to what extent does ignorance, propaganda, or misinformation undermine the legitimacy of collective decisions? What role should disagreement play in our political lives and how does disagreement impact society (i.e. does it lead to polarization or can it be productively leveraged to reveal blind spots based on different perspectives)?⁷⁵ In what ways are socially and politically marginalized groups in a position of epistemic privilege vis-à-vis social structures? While the term ‘political epistemology’ is fairly new, scholars have been interested in topics at the intersection of political philosophy and epistemology at least since Plato. Until recently, however, the literature in both political philosophy and epistemology proceeded largely in their own siloes, without explicit reference to (or common framing of) the questions.⁷⁶ This newer reframing of the subfield of political epistemology explicitly draws on the insights from both areas of philosophy (as well as cognate areas like political science and social psychology). As a result, the past few years have witnessed an outpouring of new research that draws important and tighter connections between epistemology (especially social epistemology) and political philosophy.

Political epistemology is now a flourishing area of philosophy.⁷⁷ If epistemic agency is to shore up faith in democracy, it is essential that epistemic agency, and the norms and interests associated with it, apply to people with widely differing moral and political beliefs and interests. Thus,

⁷⁴ Thomas Grundmann, (2022) “The Epistemology of Fake News,” forthcoming in Sven Bernecker, Amy Flowerree & Thomas Grundmann (eds.), *Facing Epistemic Authorities: Where Democratic Ideals and Critical Thinking Mislead Cognition* (Oxford: Oxford University Press), p. 78.

⁷⁵ Nora Berenstain, Kristie Dotson, Julieta Paredes, Elena Ruíz & Noenoe K. Silva, (2022) “Epistemic Oppression, Resistance, and Resurgence,” in *Contemporary Political Theory* 21 (2): 283-285.

⁷⁶ Megan Fritts & Frank Cabrera (2022) “Online Misinformation and ‘Phantom Patterns’: Epistemic Exploitation in the Era of Big Data,” *Southern Journal of Philosophy*, Vol. 60, Issue 1: 57-59.

⁷⁷ Adam Gibbons (2022) “Is Epistocracy Irrational?” *Journal of Ethics and Social Philosophy*, Vol. 21, No. 2: 256-258.

democratic pluralism seems to depend on some rather specific epistemic premises about the nature and limits of reason and its distribution across human agents. In traditional culture, many discourses are interchangeable, since their encounter simply represents an epistemic difference.⁷⁸

2.1 The Politics and Epistemology of Female Circumcision

It seems obvious that fallible, ideationally heterogeneous creatures will sometimes be unable to think of accurate explanations for the behavior of other such creatures. However homogeneous we are in our emotional and cognitive architecture, the beliefs populating that architecture are likely to vary, to some extent, from person to person. Because these beliefs, as mental phenomena, are inaccessible to observers, I may be unable to put myself into your shoes in a particular case. That, however, does not justify assuming that you have no reasons for your beliefs, rather than allowing that I am simply ignorant of what they are. The problem of naïve realism, leading to intellectually uncharitable attributions of knowledge to others, and to unjustified attributions of irrationality to them when they disagree with us, is ubiquitous not just in political culture but academic psychology and other disciplines. Concerted efforts should be made about African women's FGM/C experiences, not in a manner that romanticizes, or exoticizes otherness, but in an authentic way.⁷⁹ Every researcher in geographical locations overshadowed by a hegemonic epistemology should be encouraged to carry out research that takes local epistemologies into account and challenges metanarratives (Mususa, 2012). In the case of FGM/C, the aim would be to expand and promote different ways of knowing in order to bring people to the consciousness that FGM/C exists, and that Boloko exists too. As such, it is our opinion that research on FGM/C terminologies in languages such as Bambara, Wolof, or Maasai FGM/C might provide more insights on the practice. This will directly address the urgent need to explore the present linguistic and epistemic differences between native and foreign terminologies of FGM/C, leading to a more equitable debate on Female Genital Mutilation/Cutting.

In conclusion, current discourses around the practice of Female Genital Mutilation/Cutting on the African continent need to be more nuanced in order to include marginalized narratives. As such, an FGM/C epistemological reform would help take into account profound differences in the ways of engaging with the practice on the continent and beyond.⁸⁰ But there is also a broad tension between liberty and equality. There is a broad tension behind liberty—an idea that sweepingly suggests freedom from and to—and equality—an idea that sweepingly suggests patent congruity. Some questions that can immediately arise are: from whom are we free; what exactly are we free to do; how, or in what respects, should we be equal to each other; what is the extent to which we should be equal to each other? As we observe, these twin pillars can—and often have—run into conflict with one another. Since the founding, there has existed a tension between liberty and equality. Indeed, the tension between liberty and equality formed the United States; the tension between liberty and equality is also what collapsed the United States during the Civil War and the difficulty in resuscitating it during Reconstruction.

⁷⁸ Jon Cooper (2021), "Science of Concord: The Politics of Commercial Knowledge in Mid-Eighteenth-Century Britain," *Intellectual History Review*, Vol. 31, Issue 2: 310-313.

⁷⁹ Maria Frederika Malmström, (2016) *The Politics of Female Circumcision in Egypt: Gender, Sexuality and the Construction of Identity*, (England: Bloomsbury Publishing), pp. 27-29.

⁸⁰ Brian D. Earp, "Sex and Circumcision," *American Journal of Bioethics* 15 (2): 43-45. 2015.

2.2 Political Epistemology versus Culture and Authenticity

By presenting the debate about the regulation of ritual circumcision as a clash between discrete ontologies or different value systems, there is the risk that ‘tradition’ is calcified and presented in opposition to ‘modernity.’ The contention that cultural practices of one sort or another have a pristine form that is at risk of contamination as a result of outside interference is, of course, a common rhetorical flourish on the part of those who wish to resist intervention on the part of a central state from which they feel estranged in some way.⁸¹ Any of a number of motivations, ideology, finance, status, power – may inform such resistance but whatever these may be, as Michel Wieviorka points out in his remarks on multiculturalism, traditions are inventions which convey ‘the very working of modernity.’⁸² Cultural identities, it is now common to point out, are neither stable nor fixed but are rather liable to decomposition and re-composition. Colonialism, and its accompanying vigorous Christian attacks on indigenous circumcision rites, served further to enhance the importance of these practices as a form of resistance to conquest: ‘the assertion that regardless of the forces of education, religion, employment, economics which have accompanied and outlived colonial conquests, the Xhosa mind and spirit has not been conquered or colonized by aliens or modernity.’⁸³ But notwithstanding colonial intrusion, circumcision rituals were hardly left unscathed by the impact of colonization, apartheid and industrialization.

Tradition is always in the process of being reinvented and contemporary realities constantly intrude and reorganize social conventions. Claims for the preservation of a pristine cultural practice are thus always rhetorical, as are claims for the inevitability of progress that modernity brings.⁸⁴ However, what is of interest is what the collision of rhetorics reveals about a society in transition and its forces of dominance, marginalization and exclusion.⁸⁵ Government itself has not emerged as uniformly or unproblematically positioned on the side of progress and western modernity. Far from simply presenting its regulation of circumcision in the language of individual rights and autonomy it has also, at times, sought discursively to position its regulatory regime as the protector of culture in its most authentic form from the corrupting influences of greed, alcoholism and ignorance of tradition associated with contemporary society.⁸⁶ Concerned to legitimize its regulation of traditional circumcision, government has enlisted the support of some traditional leaders and has argued that the problem is not with the tradition itself but with its practice by ‘bogus’ initiation schools which, as National House of Traditional Leaders spokesperson Sibusiso Nkosi put it, ‘claim the lives of our innocent children ... making a mockery of our culture’ and

⁸¹Brian D. Earp, “I can't get no (epistemic) satisfaction: Why the hard problem of consciousness entails a hard problem of explanation Dialogues in Philosophy,” *Mental and Neuro Sciences* 5 (1): 14-20. 2012.

⁸² Michel Wieviorka, “Multiculturalism: A Concept to be Redefined and Certainly Not Replaced by the Extremely Vague Term of Interculturalism,” April 2012, *Journal of Intercultural Studies* 33 (2): 19

⁸³ Michel Wieviorka, “Multiculturalism: A Concept to be Redefined and Certainly Not Replaced by the Extremely Vague Term of Interculturalism,” April 2012, *Journal of Intercultural Studies* 33 (2): 15-18

⁸⁴ Gily Coene & Sawitri Saharso - 2019 - “Gender and Cultural Understandings in Medical Nonindicated Interventions: A Critical Discussion of Attitudes towards Non-therapeutic Male Circumcision and Hymen (Re) Construction.” *Clinical Ethics* 14 (1): 33-37.

⁸⁵R. Sala & D. Manara (2001) “Nurses and Requests for Female Genital Mutilation: Cultural Rights Versus Human Rights,” *Nursing Ethics* 8 (3): 247-258.

⁸⁶L. A. Briggs 1998) “Female Circumcision in Nigeria: Is It Not Time for Government Intervention?” *Health Care Analysis* 6 (1): 14-23.

bringing 'shame and doubt' on traditional practices.

This is one indication that the state's nation-building project is not unequivocally liberal individualist in nature but rather continues to be influenced by widespread support for alternative worldviews among its majority constituency. The appeal to authenticity is also of course a key component of the ideological armoury of the opponents of state regulation. The intrusion of state influence into a domain where some of the poorest and most marginalized in the society seek to maintain a limited hold on power is resisted by way of reference to the incontrovertible requirements of culture. Traditional leaders frame their vigorous opposition to the regulation of circumcision by appealing to the arcane intricacies of the practice, which are frequently interpreted in their most uncompromising form.⁸⁷ Female sexuality is considered as potentially dangerous, containing the power to distract a man from his religious duties, according to Ahrned et al, yet, Sudanese men are described as struggling with their sexuality.⁸⁸ Thus a direct link is established between FGC and sexuality, according to the community's belief that FGC will "directly fulfill this need, women need to be controlled and their sexuality restrained." Paradoxically, discussions with men to outline their knowledge and understandings of the links between health and FGC demonstrate men's belief that passive female sexuality is a malaise related to FGC, while active female sexuality is another malady attributed to the absence of FGC. Carnal pleasure is restricted as a male phenomenon, while the female is designated to a reproductive asset in intercourse.⁸⁹ Interestingly, Hadandawa men, in Sudan, prefer non-circumcised women as sexual partners. Does FGC empower or disempower masculinity?

According to some authors, FGC disempowers. Only amongst themselves have Hadandawa men, in Sudan, begun to develop a consciousness towards FGC and its effects. "While men believe that reducing women's desire can be done by FGC, they never looked at it as a disempowering factor to their ascribed gender roles and their own sexual power, it was only from within their closed circuits that men started to conceive of FGC as a disempowering practice for them." Issues of mutual sexual pleasure are thus identified as gradually emerging in African public discourse, with progress towards change. Herein lies the subtlety regarding the political epistemology of female circumcision, both in Africa and beyond.⁹⁰ Subsequently, in her presentation on FGC in relation to women's sexuality, Amel Fahmy argued that most international studies that have examined the relationship between FGC and sexuality did not take into consideration the socio-cultural conceptualization of sexual pleasure nor defined sexuality in its broader context. In comparing the Western understanding of sexuality as clinically influenced to produce certain conceptions of femininity and sexual pleasure, Fahmy highlights the problems of definitions and methods of the Western-centric model (of the clitoris and orgasm as central to pleasure). In this framework of the social construction of sexuality, it is argued that contact with other cultures can radically challenge and redefine notions of women's sexual pleasure. It is also noted that fewer studies are conducted

⁸⁷Diana Tietjens Meyers, (2000) "Feminism and Women's Autonomy: The Challenge of Female Genital Cutting." *Metaphilosophy* 31 (5): 469-491.

⁸⁸ Alcoff, L. M. (2007), "Epistemologies of Ignorance: Three Types," in Sullivan, S and Tuana, N. , (eds), *Race and Epistemologies of Ignorance*, (Albany: State University of New York), pp. 39-58.

⁸⁹Fanidh Sanogo, One Pusumane "A Call for The Epistemic Fluidity of Female Genital Mutilation/Cutting" <https://www.e-ir.info/2021/03/23/a-call-for-the-epistemic-fluidity-of-female-genital-mutilation-cutting/> Accessed on July 9, 2022, pp. 3-5

⁹⁰ Aida Seif El Dawla, "The Political and Legal Struggle over Female Genital Mutilation in Egypt: Five Years Since the ICPD, *Reproductive Health Matters* , May, 1999, Vol. 7, No. 13, pp. 128-136

by local sexologists, and that most studies on the topic are conducted by Western researchers.⁹¹

The politics surrounding interventions against FGC Political issues regarding sexuality and women's rights is a fundamentally cross-cutting issue in any society, with solutions differing according to time and space. Below are various aspects that researchers must bear in mind regarding the political arena, as discussed by the group; Identifying acceptable grounds: The issue of FGC interventions must find a welcome space in the sensitive internal politics relations in given communities, as governments working on FGC abandonment initiatives are often criticized as bearing Western agendas Identifying public agents of social change: Particular attention should be paid to the recruitment of public leaders that promote the dynamics of social change (e.g. presidents' wives) Avoiding cultural voyeurism: The politics of perception in a globalizing world, and the awareness that FGC abandonment efforts may have a voyeuristic quality in certain situations (e.g. CNN screening of young Egyptian girl's circumcision during 1994 ICPD meeting in Cairo), should encourage sensitivity towards ways by which FGC interventions can have a humiliating or negative backlash encouraging subtlety.

Confrontational politics and heads-on approaches to the issue of FGC does not seem to bear effect in a human rights dialogue, while more subtlety and sophistication is recommended Fusing local feminist and religious agendas: Local considerations may not merely be nationalistic, but based upon religious communities. Ways must be sought to root feminist agendas within religious agendas in local communities (commencing by the promotion of the knowledge of indigenous women's movements) avoiding class bias: 'Effective partnerships across social class divisions must be formed, as it appears that those who bear leadership roles have been from the upper classes. This is to party a defense against accusations of class bias emphasizing the Hippocratic Oath. The politics surrounding FGC should emphasize sound medical practices and the Hippocratic Oath, as goals should not aim to revoke the licenses of medical professionals who are in the position of suffering credibility issues, yet should promote an ethical perspective Remembering the agenda at large: FGC interventions should politically and strategically stress the well-being and health of women and their partners. Women's bodies should not be reduced to statistical figures in the campaign.⁹²

2.3 Conclusion and Recommendations

It must be stressed that counseling of male and female partners suffering the consequences of FGC is an area in need of rigorous capacity building, on both local and international health care fronts. The role of the media in effectively communicating and disseminating research findings is also highly emphasized. The diversity of perspectives on this issue, point to essential theoretical movements and trends currently influencing our perceptions of women's bodies and sexuality. A deepened understanding of hegemonies driving the practice of FGC, a deconstructed epistemic spaces dealing with women's sexuality, and a sustained contest against the export of Western

⁹¹ Amy Knox, "Female Genital Cutting in Africa: The West and the Politics of 'Empowerment,'" available at: <https://www.e-ir.info/2021/03/19/female-genital-cutting-in-africa-the-west-and-the-politics-of-empowerment/> Accessed on July 10, 2022, pp. 3-5

⁹² Mona Bur, "Advancing knowledge of Psycho-Sexual Effects of Female Genital Cutting Assessing the Evidence A Seminar Report Alexandria, Egypt October 10- 12, 2004." *International Network to Analyze, Communicate and Transform the Campaign Against FGC/FGM/FC (INTACT) Population Council, West Asia North Africa Regional Office.*

twentieth-century clinical models of measuring female sexual dysfunction in the cross-cultural woman's body, cannot be over-emphasized. Generally, there is an apparent unanimity of opinion in their belief that there is a lack of substantive evidence and scientific data that establishes the relationship between FGC and the psychosexual and reproductive health of women. In the scientification of women's sexuality, recent evidence has shown that the deeply-rooted tradition of FGC, which may not result in the complete elimination of sexual satisfaction or desire in women (with the intention of curbing promiscuity) with the multifaceted health effects of the procedure on women, seems to be the core basis of the perpetuation of the practice. On the contrary, FGM does not necessarily reduce promiscuity. Sometimes, circumcised females experience depression more than uncircumcised and, circumcised females may have more difficulty than their uncircumcised counterparts in becoming sexually aroused and attaining orgasm. Psycho-counselling measures are needed to help FGM victims manage their lives, achieve sexual satisfaction (within their respective circumstances in life) and become better adjusted in the society.⁹³

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⁹³ Benedicta Ifeyinwa Nnodum, "Female genital mutilation and its effects: Implications for counselling," *Nigerian Journal of Guidance and Counselling*, Vol. 8, No. 1, 2002: 112-132.

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