

Group Backs Ritual ‘Nick’ as Female Circumcision Option

By [Pam Belluck](#)

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In a controversial change to a longstanding policy concerning the practice of female circumcision in some African and Asian cultures, the [American Academy of Pediatrics](#) is suggesting that American doctors be given permission to perform a ceremonial pinprick or “nick” on girls from these cultures if it would keep their families from sending them overseas for the full circumcision.

The academy’s committee on bioethics, in a policy statement last week, said some pediatricians had suggested that current federal law, which “makes criminal any nonmedical procedure performed on the genitals” of a girl in the United States, has had the unintended consequence of driving some families to take their daughters to other countries to undergo mutilation.

“It might be more effective if federal and state laws enabled pediatricians to reach out to families by offering a ritual nick as a possible compromise to avoid greater harm,” the group said.

But some opponents of female genital mutilation, or F.G.M., denounced the statement.

“I am sure the academy had only good intentions, but what their recommendation has done is only create confusion about whether F.G.M. is acceptable in any form, and it is the wrong step forward on how best to protect young women and girls,” said Representative Joseph Crowley, Democrat of New York, who recently introduced a bill to toughen federal law by making it a crime to take a girl overseas to be circumcised. “F.G.M. serves no medical purpose, and it is rightfully banned in the U.S.”

Georganne Chapin, executive director of an advocacy group called [Intact America](#), said she was “astonished that a group of intelligent people did not see the utter slippery slope that we put physicians on” with the new policy statement. “How much blood will parents be satisfied with?”

She added: “There are countries in the world that allow wife beating, slavery and child abuse, but we don’t allow people to practice those customs in this country. We don’t let people have slavery a little bit because they’re going to do it anyway, or beat their wives a little bit because they’re going to do it anyway.”

A member of the academy’s bioethics committee, Dr. Lainie Friedman Ross, associate director of the MacLean Center for Clinical Medical Ethics at the University of Chicago, said the panel’s intent was to issue a “statement on safety in a culturally sensitive context.”

Dr. Friedman Ross said that the committee members “oppose all types of female genital cutting that impose risks or physical or psychological harm,” and consider the ritual nick “a last resort,” but that the nick is “supposed to be as benign as getting a girl’s ears pierced. It’s taking a pin and creating a drop of blood.”

She said the panel had heard anecdotes from worried doctors.

“If we just told parents, ‘No, this is wrong,’ our concern is they may take their daughters back to their home countries, where the procedure may be more extensive cutting and may even be done without anesthesia, with unsterilized knives or even glass,” she said. “A just-say-no policy may end up alienating these families, who are going to then find an alternative that will do more harm than good.”

Currently, more than 130 million women and girls worldwide have undergone female genital cutting, according to the American Congress of Obstetricians and Gynecologists. It is mostly performed on girls younger than 15 in countries including Ethiopia, Sudan and Somalia. Consequences can include severe complications with pregnancy, childbirth and sexual dysfunction.

The academy’s statement acknowledged that opponents of the procedure, “including women from African countries, strongly oppose any compromise that would legitimize even the most minimal procedure.”

Dr. Friedman Ross said, “If you medicalize it and say it’s permissible, is there a possibility that some people will misunderstand it and go beyond a nick? Yes.”

But she said the risk that people denied the ceremonial procedure, usually on the clitoris, would opt for the more harmful one was much more dangerous.

And the statement said that, “in some countries where FGC is common, some progress toward eradication or amelioration has been made by substituting ritual ‘nicks’ for more severe forms.”

<https://www.prnewswire.com/news-releases/american-academy-of-pediatrics-aap-is-advocating-for-us-pediatricians-to-perform-certain-types-of-female-genital-mutilation-fgm-92871624.html>

American Academy of Pediatrics (AAP) Is Advocating for U.S. Pediatricians to Perform Certain Types of Female Genital Mutilation (FGM), Says Equality Now

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EQUALITY NOW CALLS ON AAP TO REVOKE ELEMENTS OF ITS 2010 POLICY STATEMENT THAT ENDORSES PEDIATRICIANS' "NICKING" OF GIRLS' GENITALIA

NEW YORK, May 5 /PRNewswire-USNewswire/ -- International human rights organization Equality Now is stunned by a new policy statement issued by the American Academy of Pediatrics (AAP), which essentially promotes female genital mutilation (FGM) and advocates for "federal and state laws [to] enable pediatricians to reach out to families by offering a 'ritual nick'," such as pricking or minor incisions of girls' clitorises. The Policy Statement "*Ritual Genital Cutting of Female Minors*", issued by the AAP on April 26, 2010, is a significant setback to the Academy's own prior statements on the issue of FGM and is antithetical to decades of noteworthy advancement across Africa and around the world in combating this human rights violation against women and girls. It is ironic that the AAP issued its statement the very same day that Congressman Joseph Crowley (D-NY) and Congresswoman Mary Bono Mack (R-CA) announced the introduction of new bipartisan legislation, *The Girls Protection Act* (H.R. 5137), to close the loophole in the federal law prohibiting FGM by making it illegal to transport a minor girl living in the U.S. out of the country for the purpose of FGM.

FGM is a harmful traditional practice that involves the partial or total removal of the female genitalia and is carried out across Africa, some countries in Asia and the Middle East, and by immigrants of practicing communities living around the world, including in Europe and the U.S. It is estimated that up to 140 million women and girls around the world are affected by FGM. The U.S. Department of Health and Human Services estimated in 1997 that over 168,000 girls and women living in the U.S. have either been, or are at risk of being, subjected to FGM.

FGM is a form of gender-based violence and discrimination that is performed on girls to control their sexuality in womanhood, guarantee their acceptance into a particular community, and safeguard their virginity until marriage. Taina Bien-Aime, Equality Now's Executive Director explains, "Encouraging pediatricians to perform FGM under the notion of 'cultural sensitivity' shows a shocking lack of understanding of a girl's fundamental right to bodily integrity and equality. The AAP should promote awareness-raising within FGM-practicing immigrant communities about the harms of the practice, instead of endorsing an internationally recognized human rights violation against girls and women."

The current policy is a regression from the AAP's 1998 policy statement *Female Genital Mutilation* and raises great concern because it denotes a clear shift in addressing the issue. The World Health Organization and the International Federation of Gynecology and Obstetrics have unequivocally opposed FGM as a "medically unnecessary" practice, and it is widely recognized that all types of FGM are a form of gender-based violence. Stemming from this perspective, the AAP's 1998 statement sees the practice as a human rights violation, opposes all forms of FGM, and cautions pediatricians about their role in "perpetuating a social practice with cultural implications for the status of women." In contrast, the new 2010 statement no longer uses the term "female genital mutilation" but refers to the practice as "female genital cutting (FGC) or ritual genital cutting," makes no reference to the discriminatory aspect of FGM, and selectively opposes only those forms of FGM that in its view "pose the risk of physical or psychological harm."

Taina Bien-Aime adds, "Throughout the ages 'cultural' practices like foot binding in China have caused lifelong physical and psychological harm to women and girls. If foot binding were still being carried out, would the AAP encourage pediatricians to execute a milder version of this practice?"

The AAP's proposition that pediatricians could offer to "nick" girls' genitalia is problematic and troubling. Advocates also fear that mothers who have until now resisted community pressure and not subjected their daughters to FGM in the U.S., in part because of the anti-FGM law, could be forced under the AAP guidelines to ask pediatricians to "nick" their daughters' clitorises if it is legally permitted. The AAP must revoke its statement, which comes at a time when several African and European countries have noted the increasing dangers of medicalization of FGM and specifically banned medical personnel from performing any form of FGM.

Equality Now is an international human rights organization that works to protect and promote the civil, political, economic and social rights of girls and women around the world. For more information visit www.equalitynow.org.

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