Should Different Ethnic Communities Continue Practicing Female Genital Mutilation?

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Female Genital Mutilation as a Cultural and Legal Issue

Among the various communities around the world and moreover, in the United States, because of the communities more likely African Americans, there are different cultural practices that are carried out as traditional practices; however, they end up impacting the society in one way or another. This can either be a negative impact or a positive impact. Some of these practices are female genital mutilation, premature marriages and many more. Additionally, many of these practices, however, even though they are negatively affecting the individuals or the society at large, are usually spearheaded and engineered by the old in the societies. Furthermore, many of these practices usually violate human rights, and moreover, they are painful and have no known benefits at all. In this argumentative essay and research paper, we are going to argue scholarly whether the different communities around the world should continue practising this cultural act of female genital mutilation (Archana Pyati, 2013).

On the other hand, on the American soil, despite the high rise of activists in the entire world and mainly in America who are on the verge and serious fight to end the old-century traditional practice, some anecdotes still indicate that the practice is still performed in the US and is normally done with outmoded practitioners who immigrated into the US and covertly and illegally. Research done by the United Nations and the World Health Organization shows that the possible advantage of this practice has long been forgotten by the very ethnic communities that are doing it. However, these communities that are still carrying out the practice always do that as a means of identification of the first-born lady in the family (Isaacs, 2016).

Prevalence, Vulnerability, and the Protection of Women and Girls

Female genital mutilation is prevalent in African American immigrants and especially in those without documented immigration certificates, which makes it easier for one to be sent back to the original motherland for the traditional act to be done. Conversely, in the United States of America, women and

girls, mothers and daughters, find they are at high risk or rather are faced with the imminent and very real threats of FGM (Archana Pyati, 2013).

Research done by different organs in the United States indicates the following: the Centers for Disease Control and Prevention estimates that between 150000 and 200000 are in jeopardy of being forced to undertake this terrible and painful act. Additionally, the data analysis resulting from the US census done in the year 2000 indicates that the number of young ladies and women located in the United States of America who are in danger of female genital defacement has risen by 35% between the years 1990 and 2000.

Furthermore, the great New York City is the home for all girls and ladies of the United States who are in danger of being imperilled to the acts of female genital mutilation (Abdulcadir, 2016). This, however, has been declared as a national problem. Besides that, each year, quite a large number of girls are afraid of being exposed to FGM due to the common and spreading “vacation cutting” in which families who are permanent immigrants of the United States send their daughters abroad in the name of school holiday but the main reason being to be exposed to the acts of female genital dismemberment. Last but not least, the data obtained after research by the above bodies indicate that every year, ladies and young women are also subjected to female genital mutilation acts on United States soil by traditional practitioners in converts or illegal ceremonies in which they host or by legalized health experts who are in support of this practice or they do not want to question the family cultural and traditional practices (Momoh, 2017).

Health Risks and the Case for Ending the Practice

First and foremost, female genital mutilation should be done away with as a cultural practice among the different communities because it has many negative impacts in societies with no known medical or life benefits whatsoever. This is because it has both physical consequences and health-related consequences. First, firstly, it has been recognized as a harmful practice that violates the human rights of girls and women. This basically is the right and principle that defends equality and non-discrimination on the basis of gender. Additionally, it also violates the right to life, especially when it is carried out, and the outcome is death. Furthermore, it violates the right to freedom from cruelty and torture (WHO, 2008).

From all the above-discussed points and statistical and researched data and despite all the cultural and traditional beliefs, it is evident that the practice of female genital mutilation is of high health risks and hazards to these women and children and therefore, it should be avoided or rather done away with so that all the negatives impact that arise from it can be avoided. The following are discussed and well-explained health constraints that result from the practices of female genital Mutilation (Braun, 2014).

To begin with, female genital mutilation is harmful, and it is associated with many health risks and

end results. To add to the above, one of the harmful end results of this practice is that almost all the ladies who have undergone the procedure always experience a lot of pain and haemorrhage as impacts due to the procedure. These interpolations are usually traumatizing as the girls themselves are usually pinned down during the procedure.

Long-Term Physical, Sexual, and Psychological Consequences

Consequently, those ladies who are permanently infibulated always end up with their legs bound together for quite an uncomfortable period of time.

Long-term after effects of the same include infections, chronic pains and infections, reduced sexual enjoyment and also psychological impacts which result from post-traumatic pressure disorders. Additionally, WHO research shows that those ladies who have undergone the practice have a high risk of adverse events during childbirth. This results in many ladies undergoing caesarian delivery, which is expensive and also leaves a scar after the operation is done. Furthermore, there is an increased risk of child mortality at birth, especially for mothers who have undergone the same compared to ladies who did not pass through the same, with approximately two infant mortality rates per hundred deliveries. Apart from that, it has negative impacts on newborn babies' especially after birth (Archana Pyati, 2013).

Another negative consequence that highly affects ladies, especially those who are weak and do not have the capacity to access the hospital during child delivery, is post-partum haemorrhage, a life-threatening condition that harshly attacks these ladies when they are subjected to poor health services or when they can't access health services at all (Claudia Garcia-Moreno, 2012).

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