Written by Maryam Abdullah

This PDF is auto-generated for reference only. As such, it may contain some conversion errors and/or missing information. For all formal use please refer to the official version on the website, as linked below.

A Case-Study of Female Genital Mutilation in Egypt

https://www.e-ir.info/2014/02/09/a-case-study-of-female-genital-mutilation-in-egypt/

MARYAM ABDULLAH, FEB 9 2014

Balancing Cultural Relativism and Universalism in Human Rights: A Case-Study of Female Genital Mutilation in Egypt

Cultural practices which cause harm to individuals often pose problems when promoting the protection of human rights. This is due to the obstacle of implementing universal views of human rights within cultures that observe such harmful practices as a norm, without creating a hostile view of forced imposition from the Universalist approach. This in turn, raises the question as to what is the best way in dealing with human rights violations in different cultures. Therefore a balance needs to be obtained between universalism and cultural relativism when approaching human rights abuses, by using the basic rules or regulations set out by the Universalist approach and applying them through cultural sensitivity within context, and in tandem with a more relativist approach. In the case of female genital mutilation (FGM), cultural relativism is not a legitimate defence with regards to human harm, and the norms of protecting women and girls from physical harm and bodily disfigurement, from the Universalist perspective, can only be effective through education and opposition to FGM from within the culture itself (Reichert, 2006, p. 30). In this essay, I argue that it is possible to establish a balance between universalism and cultural relativism in dealing with issues of human rights violations as a result of FGM in Egypt which has a large number of women who still exercise this custom and have undertaken many ways to overcome it. I will first outline the features of the Universalist approach and the cultural relativist approach including their limitations, and explain the relationship to FGM in general. Secondly, I will evaluate the relevance of the two perspectives to female genital mutilation in Egypt, and finally, elucidate the alternative views as to why FGM, as a cultural practice is essential to Egyptian society, and why implementing human rights might fall short in eradicating this problem. In the conclusion, I will summarise the key elements of this essay and reiterate my argument that a balance can be achieved between universalism and cultural relativism when dealing with certain concepts involving human rights' violations.

The Universalist view of human rights is rooted in Western historical notions of human morals and values, and is described as a "construct" of Western ideas (Pollis and Schwab, 1979, cited in Donnelly, 2009), forwarded within the 1948 United Nations Declaration of Human Rights. This approach to human rights promotes the idea that all human beings, no matter from what religion, gender, age or cultural background possess the same set of rights, describing these right as "universal" (UN General Assembly, 1993). Cultural relativism, in contrary to universalism focuses on human rights as collective rather than on an individual basis. Cultural relativism affirms that there are no "universal" rights due to the wide variety of cultures and ethnic groups across the globe, therefore human values or "rights" may be deduced differently (Donders, 2009). Both approaches weigh in persuasive arguments when dealing with human rights; however problems arise when one extreme perspective is used when different cultures are involved. For example in the case of female genital mutilation in Egypt, an extreme Universalist standpoint may handle the situation with forced intervention, thus creating tensions between the state and the intervening party. Forced intervention can appear to be an invasion of a sovereign state as "enforcement of internationally recognised human rights" is a decision to be made by the government of the sovereign state (Donnelly, 2009). Extreme cultural relativism, on the other hand, divulges the concept that FGM is an Egyptian cultural practice; therefore no one should interfere, thus leaving women and young girls at risk to further harm. Cultural relativism is also meant to protect the status quo of cultures, which does not allow for a critique of certain practices, like FGM, and a solicitation of universal human rights without respect for cultural behaviours weakens cultural identity, a human rights' violation in itself (Reichert, 2006, p. 24).

Written by Maryam Abdullah

A balance between both approaches is therefore necessary in order to prevent human harm. In this illustration, an umbrella effect of universality with the application of cultural sensitivity creates this balance when approaching human rights and cultural practices. The Universalist approach implies that the right of an individual to be protected from harm should be enjoyed by everyone; however the "implementation" of this right needs to adhere to cultural customs. This is referred to "relative universality" (Donders, 2009), and with regards to FGM, the universal view is to protect women and young girls from harm, while the implementation of preventing this harm, should allow for opposition movement from within the culture, in order to be relatively successful. Universalism and cultural relativism can be compatible, despite being from different ends of the spectrum when confronting human rights' issues in conjunction with cultural norms. The extent of cultural sensitivity can determine how well a "right" can be applied within a culture, in order to preserve human protection from harm (Reichert, 2006, p. 32). To further understand how the balance between universality and cultural relativism can affect a cultural practice, I will evaluate the relevance of the two approaches within human rights to female genital mutilation in Egypt, and highlight the areas where the "rights" of protecting women and young girls, have been implemented.

Cultural sensitivity within the brackets of universality when approaching human rights and female genital mutilation requires understanding of the practice within context. This means that in order to implement a process which reduces harm to women and young girls, a partnership must be created between parties from within and apart from the Egyptian culture. FGM as a cultural norm causes harm, and human rights are basic regulations aimed at protecting all humans from harm through their government or by third parties. Intra-cultural opposition to FGM provides a substantial basis for reducing the practice, as members of the culture suggest that cultural relativism is more effective than universalism when inaugurating "moral norms and regulations" (Kalev, 2004, p. 340). In conjunction with movements from within a country, external support from international organisations, such as Amnesty International and other third parties, increases the possibility for a successful elimination of this practice. For example, the United Nations have directed attention towards FGM and Amnesty International has also acknowledge FGM as a human rights' violation (Bullbeck, 1998, cited in Kalev, 2004, p. 339). Internationally, female genital mutilation has been recognised as a connection to other health problems through infections which put women and young girls at further risk of harm, supporting the view that it is associated with physical detriment (Molleman and France, 2009, p. 58), constituting it as a human rights' violation. Dalal, Lawoko and Jansson, have accrued information through statistical analysis and empirical evidence which affirm that women who are informed about the health risks are against FGM (2010, p. 46). Their findings suggest that women from educated backgrounds and urban areas, as opposed to women from more rural areas who believe FGM necessary for marriage and womanhood, are more likely to reject the practice (lbid.).

These findings also assert the importance of educating Egyptian women about the severity of the health risks involved with FGM and why it is classed as a human rights' violation. Internal cultural opposition in Egypt has been prevalent in attempting to reduce the practice. For instance, Mrs Suzanne Mubarak, former first lady of Egypt, started a national movement and campaign against FGM, and under her patronages, the National Council for Childhood and Motherhood (NCCM) has organised nation-wide awareness in association with civil society institutions, and to increase laws which interdict the practice of FGM. Legal, medical and media organisations have also been targeted to help curb the practice by medical professionals, as well as a projection of the seriousness of FGM through national media (Molleman and France, 2009, p. 59). The opposition movements within Egypt create the understanding of the importance of national organisations such as the NCCM and other civil society communities, in tackling a cultural custom and implementing a human right. These movements against FGM have been successful as international organisations, such as the International Federation of Gynaecology and Obstetrics Committee, have condemned any "medicalization" of FGM in Egypt as well as in many other countries, and the Egyptian Ministry of Health and Population have issued a medical decree prohibiting the practice of FGM (Ibid.). The perspective of government and authoritative figures, alongside external organisations, are also necessary in order to preserve the opposition against a cultural custom.

When implementing a human right, the support from government and superior persons are essential to ensure that a movement towards stopping the practice is successful. The involvement of government and authoritative figures, such as religious leaders, means that civil organisations are not the sole bearers of trying to oppose a cultural norm. According to the Vienna Declaration and Programme of Action (1993), governments are the first institutions

Written by Maryam Abdullah

responsible for safeguarding and upholding the human rights of its citizens. In the case of FGM in Egypt, the government is required to reinforce the laws prohibiting the practice. Egypt has the highest record of FGM and the Egyptian High Court had banned the practice in 1997 (Dalal, Lawoko and Jansson, 2010, p. 42). This highlights the severity of FGM, despite being an Egyptian cultural norm, as it had reached that level of legal action against it. Religious figures are also recognised as authority and their approach is imperative when culture is involved in many communities. The Grand Mufti in Cairo, for example, issued a "fatwa", which is an Islamic ruling forbidding female genital mutilation, and alongside this, the Patriarch of the Coptic Christian Church in Egypt, Pope Shenouda III has publicly divulged his opposition to FGM (Molleman and France, 2009, p. 59). Besides governmental and internal cultural opposition to a cultural practice, the contribution of external organisations helps stabilise the balance between Universalist perspectives and cultural relativism.

Although most international human rights' organisations, both non-governmental and governmental, are considered to be "western-centric" and individualistic (Reichert, 2006, p. 24), the recognition of cultural sensitivity provides these organisations with a non-invasive involvement in giving support to the cultural communities. For example, the United Nations International Children's Emergency Fund (UNICEF), has assisted in a project involving 40 villages in Egypt, based on the "Positive Defiance Approach", which is a culturally sensitive approach dependent on establishing solutions from with the communities (Molleman and France, 2009, p. 59). Despite the means from internal as well as external involvement by which human rights can be applied and reinforced, support for a continuation of a cultural practice, such as women in Egypt opting for continuation of FGM, poses a challenge to any form of human rights' implementation, and the combined approach can also be problematic.

Cultural customs are practiced for a number of reasons specific to communities or societies within a country. In the case of female genital mutilation, communities commit to this practice for a variety of reasons, such as chastity, hygiene and socio-economic, which are enacted overall in order to preserve the society and safeguard women and young girls from fornication, prostitution and unwanted pregnancies (Ibid., p. 58). Social status and marriage potentiality are also other reasons for this practice, which cause women with "culturally-based beliefs" from poorer backgrounds to defend the practice (Dalal, Lawoko and Jansson, 2010, p. 46). In Egypt, the percentage of women who continued FGM in more recent studies has amounted to approximately 82 (Ibid.), thus demonstrating that despite laws and regulations prohibiting the practice and the large amount of internal opposition, the likelihood of completely eradicating this cultural norm remains unapparent. Cultural sensitivity and contextualisation, within universalism when approaching a controversial human rights' violation, does not guarantee a 100% successful change, as village communities most often retain members with heavy culturally instilled principles. Support for the continuance of FGM as a cultural tradition does not only stem from within the actual culture as some western feminists do not oppose the practice based on different reasons, such as FGM being a choice rather than an infliction. Anna Galeotti for example, defends toleration for the exercise of FGM, which can be noted through her use of female "circumcision" as opposed to female genital "mutilation", arguing that if the procedure is "minimalist" in harm and women choose to have it performed, is a right in itself for them to be allowed to have the option (2007, p. 92). Contrary to this viewpoint, is that young girls within cultures where this occurs regularly are not given this choice and if performed in unsanitary conditions, the health risks associated with FGM can become dominant resulting in further harm.

The problem with cultural relativism and universalism is the view that Universalist human rights, project a "Western" perspective. This advocates the opinion that human rights try to impose a form of "Western moral imperialism" against a cultural "non-Western" standpoint (Ignatieff, 2001, cited in Reichert, 2006, p. 27), despite the many attempts to combine the two approaches in embarking upon human rights' issues. Cultural relativism also occurs in Western nations, where there are diverse communities which practice their cultural norms after generations of migration. In some instances cultural relativism is used as a "mitigating factor" in legal cases within Western societies, involving persons with various cultural identities (Reichert, 2006, p. 30). This consolidates the reality that cultural actions persist, independent of western or non-western societies.

To conclude, universalism provides a view of general human rights while cultural relativism refers to cultural practices and norms specific to communities, which may or may not result in contradiction to universal human rights. Both approaches can cause controversial problems from extremist standpoints, which in themselves may amount to

Written by Maryam Abdullah

moral indignity. Establishing a relative balance between the two positions when dealing with human rights can have partial success and this balance can be achieved through the recognition of cultural sensitivity within the context of universally projected perspectives. An implementation from a "non-interventionist" viewpoint requires internal cultural acceptance that a custom may be harmful, in conjunction with education and support from external institutions directly aimed at preventing human rights' violations. As seen with the case of female genital mutilation in Egypt, this type of balanced approach to a human rights' issue, has resulted in intra-cultural opposition and government policies which have established laws prohibiting the practice, alongside international acknowledgement of the health risks and disapproval of FGM. Despite the prowess of cultural relativism and universalism to formulate a positive movement against FGM, as with other cultural occurrences, problems arise due to support for these harmful practices mainly from within the community due to a multitude of reasons intended to preserve a society. Defensive views are also evident from theorists who put forth the view that a cultural practice should be in the choice of the individual to perform the custom, whether or not it is viewed generally as a harmful phenomenon. Cultural relativism and universalism have yet to overcome all aspects of cultural traditions which result in human harm, however through balancing the two methods, there is potential for progress in the application of human rights.

Bibliography

Dalal, K., Lawoko, S. and Jansson, B. (2010) Women's attitudes towards discontinuation of female genital mutilation in Egypt. *Journal of Injury & Violence Research*. 2 (1), pp. 41-47.

Donders, Y. (2009) Culture and Human Rights. In: Oxford Reference. *Encyclopaedia of Human Rights* [online]. [Accessed 15 January 2013].

Donnelly, J. (2009) Universality. In: Oxford Reference. *Encyclopaedia of Human Rights* [online]. [Accessed 15 January 2013].

Galeotti, A. E. (2007) Relativism, Universalism, and Applied Ethics: The Case of Female Circumcision. *Constellations*. 14 (1), pp. 91-111.

Kalev, H. (2004) Cultural Rights or Human Rights: The Case of Female Genital Mutilation. *Sex Roles*. 51 (5), pp. 339-348.

Molleman, G. and France, L. (2009) The struggle for abandonment of Female Genital Mutilation/Cutting (FGM/C) in Egypt. *Global Health Promotion*. 16 (1), pp. 57-60.

Reichert, E. (2006) Human rights: an examination of universalism and Cultural Relativism. *Journal of Comparative Social Welfare*. 22 (1), pp. 23-36.

United Nations General Assembly (1993) *Vienna Declaration and Programme of Action*. A/CONF.157/23. Available from: http://www.unhcr.org/refworld/docid/3ae6b39ec.html [Accessed 16 January 2013].

Written by: Maryam Abdullah Written at: University of the West of England, Bristol Written for: Dr Christien van den Anker Date written: January 2013