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“THE COURAGE TO BLASPHEME”*: CONFRONTING BARRIERS TO RESISTING FEMALE GENITAL MUTILATION

Eugenie Anne Gifford**

I. INTRODUCTION: A FEMINIST CONTEXT FOR DISCUSSING FEMALE GENITAL MUTILATION

The practice of ritually mutilating the external genitalia¹ of young girls and women, a custom widely observed throughout the northern portion of Africa² and in the Arabian Peninsula, Indonesia, and Malaysia,³ has recently received worldwide atten-

* MARY DALY, *GYN/ECOLOGY: THE METAETHICS OF RADICAL FEMINISM* 264 (1978). The “Courage to Blaspheme” is “to be and to speak” in an age in which the Scylla and Charybdis of patriarchy and political correctness would trap us in silence. It is, in other words, to speak the unspeakable.

** J.D., UCLA School of Law, 1993; B.A., Amherst College, 1990. I would like to thank Professor Stephen Munzer for providing the opportunity and encouragement to think and write about this vital issue. I am also grateful to the editors and staff of the UCLA Women’s Law Journal, past and present, for having the courage to pursue our shared vision. This Essay is dedicated, with love and admiration, to three inspiring women: Deborah Cohler, Christine Tawa, and Charlotte Robinson Maya.

1. As used in this paper, “female genital mutilation” is a blanket term encompassing many variations practiced in different locations by diverse tribes and ethnic groups. The three most common variations are: 1) Pharaonic (or infibulation): the cutting away of all or most of the external genitalia and suturing together the remaining tissue, leaving only a pinhole size opening through which urine and menstrual blood are to pass; 2) Clitoridectomy (sometimes called sunna): removal of all or part of the clitoris and all or part of the labia minora; and 3) Sunna: a modified procedure involving either simply pricking or slitting the clitoris, or removal of all or part of the body of the clitoris itself. For a more extensive description of the different procedures and significant tribal variations, see HANNY LIGHTFOOT-KLEIN, *PRISONERS OF RITUAL: AN ODYSSEY INTO FEMALE GENITAL CIRCUMCISION IN AFRICA* 32–36 (1989).

2. *Id.* at 31–32.

3. Isabelle R. Gunning, *Arrogant Perception, World-Travelling and Multicultural Feminism: The Case of Female Genital Surgeries*, 23 *COLUM. HUM. RTS. L. REV.* 189, 195 (1992).

tion. The 1993 convictions of two Malian women in Paris for arranging to have portions of their three-year-old daughters' clitorises and labia removed have received a great deal of publicity.⁴ Several European countries have enacted laws which specifically prohibit female genital mutilation.⁵ From both within and without nations which have traditionally practiced genital mutilation, calls have come for non-practicing nations to grant political asylum to women who choose to flee their homes rather than face the possibility that they or their daughters would be forced to submit to the procedure.⁶ Reacting to those concerns, on May 12, 1993 the World Health Organization resolved to mount an international campaign to eradicate the practice.⁷

Since it has achieved this new level of public attention, numerous historians, sociologists, feminist theorists, and novelists have studied the custom of female genital mutilation, many coming to the conclusion that it should be resisted as a violation of basic human rights.⁸ Drawing on these diverse resources, this paper will examine the roots of, and the wide range of justifications for, the tradition in order to assess the feasibility of resistance as a goal of feminist practice.

In Alice Walker's recent novel about female genital mutilation, *Possessing the Secret of Joy*, we learn in the final pages of the book that the "secret" is resistance.⁹ Even if we begin, how-

4. Rone Tempest, *Ancient Traditions vs. the Law*, L.A. TIMES, Feb. 18, 1993, at A1. France has been prosecuting parents and others for genital mutilation for ten years. This practice has resulted in several convictions, but has only recently resulted in jail terms. *Id.* at A10.

5. These countries are Great Britain, Sweden, and Switzerland. French law, by contrast, addresses the prevention of harm to children generally, and does not specifically mention genital alteration. *Id.* at A10; *see also infra* part II.B. Rep. Patricia Schroeder has introduced a bill in the U.S. House of Representatives which would outlaw female genital mutilation. H.R. 3247, 103d Cong., 1st Sess. (1993).

6. Katie Sherrod, *Hate Crimes: Treaty Should Protect Women*, DALLAS MORNING NEWS, Dec. 12, 1993, at J6. A Nigerian woman recently avoided deportation from the United States because of her claim that the return of her two young daughters to Nigeria would result in their genital mutilation. *Nigerian, Daughters Can Stay in U.S.*, CHI. TRIB., Mar. 24, 1994, News Section, at 17. An immigration judge found that Lydia Oluloro's deportation would constitute "extreme hardship" to her or to her family and dropped deportation proceedings on those grounds. *Id.*; *see also* Timothy Egan, *An Ancient Ritual and a Mother's Asylum Plea*, N.Y. TIMES, Mar. 4, 1994, at B16.

7. *U.N. to Combat Female Circumcision*, L.A. TIMES, May 13, 1993, at A4.

8. *See, e.g.*, Kay Boulware-Miller, *Female Circumcision: Challenges to the Practice as a Human Rights Violation*, 8 HARV. WOMEN'S L.J. 155 (1985).

9. ALICE WALKER, *POSSESSING THE SECRET OF JOY* 279 (1992). Because this novel circumvents many of the difficulties found in academic analyses of female gen-

ever, from the premise that resistance is a positive goal, this position is challenged in three primary ways. First, when Western feminists attempt to address the implications of the practice, they are charged with cultural imperialism and racism. Second, the predominance of women in the perpetuation of the practice challenges traditional feminist assumptions about gender subordination and social dominance. Third, the experience of female genital mutilation — even if its victims manage to survive to adulthood — resists absolutely all attempts at verbal expression, thus leaving an understanding of its full horror unavailable to “outsiders” who would join the resistance movement. Each of these barriers to resistance is addressed below.

A. *Arrogant Perception: Combatting Cultural Bias*

The lack of theoretical frameworks within which to examine the intersections of race and gender, and the divergent yet complementary systems of oppression which characterize these classifications, have become an important focus of feminist legal theory in recent years.¹⁰ The work of prominent feminist jurisprudential scholars such as Catharine MacKinnon has come under fire for failing to adequately consider issues of concern to women of color — for, in effect, pretending that there is one prototypical “woman,” and that she is white, middle class, and American.¹¹

Even when Western feminists do attempt to include in their analyses women from other races, ethnicities, or cultures, they are accused of overestimating their ability to perceive and appreciate the challenges those women face. Recent efforts to bring the practice of female genital mutilation to light, and to strategize for resistance, have been marred by this criticism. In *An Open Letter to Mary Daly*, poet Audre Lorde comments on Daly’s book *Gyn/Ecology: The Metaethics of Radical Feminism*:¹²

ital mutilation, this Essay will use Walker’s novel as a tool for greater understanding of the topic. See *infra* part III.

10. See Kimberlé Crenshaw, *Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics*, 1989 U. CHI. LEGAL F. 139.

11. See, e.g., Angela P. Harris, *Race and Essentialism in Feminist Legal Theory*, 42 STAN. L. REV. 581, 585 (1990); Marlee Kline, *Race, Racism, and Feminist Legal Theory*, 12 HARV. WOMEN’S L.J. 115, 134–35 (1989).

12. MARY DALY, *GYN/ECOLOGY: THE METAETHICS OF RADICAL FEMINISM* (1978).

Your inclusion of African genital mutilation was an important and necessary piece in any consideration of female ecology, and too little has been written about it. To imply, however, that all women suffer the same oppression simply because we are women is to lose sight of the many varied tools of patriarchy. It is to ignore how those tools are used by women without awareness against each other.¹³

Feminist scholars endeavoring to expand the scope of their inquiries beyond their own cultural borders are also accused of "cultural imperialism," of presuming that the moral dictates of their own, dominant society are the "right" ones, and that cultural practices which depart from these dictates are "wrong" and should be eradicated. This superior attitude has been labelled "arrogant perception":

A key aspect of arrogant perception is the distance between "me" and "the other." The "I" as arrogant perceiver is a subject to myself with my own perceptions, motivations, and interests. The "other," in arrogant perception terms, is unlike me. The "other" has no independent perceptions and interest but only those that I impose. Any evidence that the "other" is organized around her own interests is evidence of defectiveness in the "other." The arrogant perceiver falsifies and oversimplifies. In other words, there is a falsification and oversimplification in the assumption of the distance and difference between self and dependent "other" as well as the conclusion that any evidence that contradicts the assumption of distance and difference is an example of fault in the "other."¹⁴

Certainly, as women, white Western feminists have experienced being labelled as the differentiated and distanced "other." It is imperative, therefore, that we avoid inflicting this indignity on anyone else. Neither, however, can we allow ourselves to become paralyzed entirely by fear that the limitations of our perspective may offend.

A perfect example of the difficulty of avoiding cultural bias, on the one hand, and complacency, on the other, is found in the problem of arriving at an acceptable term for the practice at issue. Many feminists reject the commonly used label "female circumcision" as a dangerous misnomer.¹⁵ By comparing the full range of procedures commonly performed on girls and women,

13. AUDRE LORDE, *An Open Letter to Mary Daly: Essays and Speeches*, in *SISTER OUTSIDER* 67 (1984).

14. Gunning, *supra* note 3, at 199.

15. DALY, *supra* note 12, at 156. *But see* ASMA EL DAREER, *WOMAN, WHY DO YOU WEEP?: CIRCUMCISION AND ITS CONSEQUENCES* (1982) (accepting the term without question); LIGHTFOOT-KLEIN, *supra* note 1 at 31-32 (same).

from nicking of the clitoris to removal of the entire external genitalia, with the practice of removing the foreskin of boys and men,¹⁶ the severity of the former is deemphasized. Further, the apparent need to identify practices affecting women by analogizing them to something that happens to men is symptomatic of what Heather Wishik characterizes as the “add-women-and-stir” variety of “feminist” legal theory.¹⁷ The essential shortcoming of this approach, also labelled “compensatory scholarship,” is that it “does not question patriarchy’s categories, definitions, of experience, or assumptions. It simply suggests that there has been an error — the failure to include women. Its solution is to add women.”¹⁸

Neither is the term “female genital surgeries”¹⁹ sufficient to describe what happens to women in cultures that practice them. This phrase lends to the practice an air of legitimacy, or medical necessity, that is at best suspect. Only the wealthiest members of society can afford to have their daughters “operated on,” or themselves re sewn, by medical doctors in hospitals.²⁰ The majority of parents employ midwives, most of whom are untrained,²¹ who use not scalpels but razor blades, scissors, kitchen knives, and bits of broken glass.²² Traditional medical means of anesthesia and antiseptics are virtually unheard of and unused.²³ To use the term “surgery” to describe the practice is to lose sight of these facts.

It is obvious that the term “female genital mutilation” is every bit as loaded with suggestive impact as the two previously rejected terms. The word “mutilate” carries with it a universally recognized, negative connotation. It is defined as “to cut off,

16. I do not wish to suggest that the practice of circumcising boys and men is without its own set of religious, moral, and political challenges. Rather, I intend only to suggest that the practice of female genital mutilation is *nothing* like circumcision. Therefore, no attempt is made in this paper to address the possible similarities and differences between the procedures. *But see* LIGHTFOOT-KLEIN, *supra* note 1, at 183–92 (discussing the history of male circumcision and implicitly suggesting that parallels exist with the development of “female circumcision”).

17. Heather R. Wishik, *To Question Everything: The Inquiries of Feminist Jurisprudence*, in *FEMINIST LEGAL THEORY: FOUNDATIONS* 22, 23 (D. Kelly Weisberg ed., 1993).

18. *Id.* at 24.

19. *See, e.g.*, Gunning, *supra* note 3, at 193.

20. LIGHTFOOT-KLEIN, *supra* note 1, at 36, 55.

21. EL DAREER, *supra* note 15, at 14.

22. LIGHTFOOT-KLEIN, *supra* note 1, at 36.

23. *Id.*

damage or spoil an important part of.”²⁴ There is no doubt that, by choosing to describe the practice as “female genital mutilation,” my bias against it is firmly established. To avoid this result, I could perhaps substitute a neutral symbol, the letter “X” for example, every time “female circumcision,” “female sexual surgery,” or “female genital mutilation” is required. I have rejected this approach, however, out of a belief that too much has already been done to neutralize the perceived impact of social conditions on the lives of women. Greater visibility, not less, of the issues that concern women is needed, and I am willing to sacrifice a measure of academic credibility or political correctness to that end.

Despite the difficulty of arriving at a common language in which to discuss the practice, we must make an effort to bridge the distance that arrogant perception places in the way of meaningful, sensitive analysis. Professor Gunning prescribes a three-part methodology of “world-travelling”:

One has to be clear about the cultural influences and pressures that are inextricably involved in one's own sense of self. This requires understanding oneself in one's own historical context with an emphasis on the overlaps, influences and conditions which one is observing in the “other.” Recognizing interconnectedness requires two additional approaches. The first is to understand one's historical relationship to the “other” and to approach that understanding from the “other's” perspective, i.e., to see the self as the “other” might see you. Second, one must see the “other” in her own cultural context as she sees herself. This prong requires both an in-depth look at one's own complex cultural context in search of analogues to culturally challenging practices in the “other's” culture, as well as an in-depth look at the rich cultural context of the other woman's life.²⁵

While it is certainly true that Western feminists may not grasp entirely all of the cultural issues with which societies practicing genital mutilation grapple, neither are we utterly without a meaningful perspective. First, the practice is far from unknown in the United States.²⁶ Removal of the clitoris, as well as a variety of other “sexual surgeries” including ovariectomy, were actually in vogue in the nineteenth century.²⁷ Second, the high rate

24. WEBSTER'S NEW WORLD DICTIONARY 389 (1990).

25. Gunning, *supra* note 3, at 204-05.

26. *See id.* at 195, 205-11; *see also infra* part IV.

27. BARBARA EHRENREICH & DEIRDRE ENGLISH, FOR HER OWN GOOD: 150 YEARS OF THE EXPERTS' ADVICE TO WOMEN 123 (1978).

of sexual assault in this country, and the use of women in pornography and prostitution,²⁸ provide American women with a sense of what it means to be reduced to one's component parts and to have those parts violated, cut away, and discarded. These experiences serve as our passport for world-travelling, and show us that the distance arrogant perception would place between us is very short indeed.

There are, however, pitfalls to the world-travelling approach. The most obvious lies in ensuring that the technique does what it says it does: allows us to theorize about "culturally challenging" practices — without engaging in cultural imperialism — by visualizing our interconnectedness with the members of that "other" culture. Gunning urges us to approach the task with "'playfulness' . . . an openness in travelling, an attitude that rejects rules and structure and a willingness to engage in a reconstruction of self without a concern for competence."²⁹ But surely our identified "other" would beg us to be cautious while "playing" with their lives. In fact, is it not the very essence of cultural imperialism itself that leads us to believe we have the right to play with others in the first place?

If the first challenge of world-travelling is ensuring our caution, the second lies in making sure that we are not *over* cautious. That is, that we do not let our well-meaning concern for avoiding cultural imperialism and racism coax us into accepting too willingly practices and justifications that simply do not comport with what we know or suspect to be true. A passage in Gunning's article describing the possible appeal of genital mutilation to its young victims is instructive:

The surgeries are performed by women, largely midwives[,] and are a part of the creation of a special and exclusive "women's space." A young girl often has the surgery performed along with other youngsters, her sisters or other girls in the area of the same age group. She is never alone during the ceremony. In addition to other young participants, her female relatives will go through the pain with her; keeping her secure during the operation, but also supporting and

28. Some might argue that a man who purchases a prostitute is not merely buying parts but an entire "act." The testimony of women who have survived prostitution, however, serves to refute this position. See, e.g., LINDA LOVELACE, *ORDEAL* 43-44 (1980) ("They were playing musical chairs with parts of my body. I had the feeling that this was no more exciting for them than it was for me; they were robots with a robot. They would busy themselves for a while at one spot, then change positions.").

29. Gunning, *supra* note 3, at 204.

soothing her during and afterwards. Whatever pain is endured by the girl has to mingle with the joy of being like the other women, becoming clean and experiencing the "most important day of a girl's life."³⁰

Not a single sentence of this portrayal rings true in light of the numerous first-hand accounts in which survivors speak of an indescribable pain, imprinted permanently upon their memories,³¹ obliterating all but the consciousness of agony. By avoiding racism, Gunning has herself become complicit in genocide — and gynocide — in the guise of political correctness. As Mary Daly writes:

It is truly *racist* to keep silent in the face of these atrocities, merely "studying" them, speaking and writing deceptively about them Beyond racism is sisterhood, *naming* the crimes against women without paying mindless respect to the "social fabric" of the various androcratic societies, including the one in which we find our Selves imprisoned.³²

We must guard against the charge of racism when it becomes just one more way of silencing women's voices when they are raised to help each other.

B. *Midwives and Willing Women: The Meaning of Complicity*

A further impediment to effective resistance to the practice of female genital mutilation lies in the active role played by apparently willing women at all levels of the custom. Women perpetuate the oral tradition containing ancient justifications for the practice, demand it for their daughters, perform the mutilations as village "midwives," criticize or ostracize those who resist the procedure, and ask to have their wound resewn to pinhole size after childbirth. This paradoxical eagerness of women to participate in their own mutilation confounds attempts to employ traditional feminist frameworks in which aggressor (male) and victim (female) are easy to recognize. Mary Daly's theory of pre-possession and pre-occupation provides a crucial starting point for unravelling the mystery of women's apparent complicity in their own destruction:

This is possession before a woman's original movement in being can break through to consciousness. It involves depths of destruction that the term *possession* cannot adequately name. For someone to be possessed, she must first *be*. But the point

30. *Id.* at 219 (footnotes omitted).

31. See, e.g., EL DAREER, *supra* note 15, at iii.

32. DALY, *supra* note 12, at 172.

here is precisely that the process of be-ing is broken on the wheel of processions. Prepossession means that be-ing is condensed to a static state, that it is frozen.

. . . One method used to reinforce the prepossession of women is *preoccupation*. The prepossessors invade and occupy a woman, treating her as territory before she can achieve autonomous, Self-centering process.³³

The impact of this statement is obscured by Daly's invention of an entirely new vocabulary with which to speak of ancient conditions.³⁴ "Processions," for example, are defined as "the deception of the Fathers."³⁵ The "wheel of processions," then, signifies the self-perpetuating "lie" of patriarchy. Essentially, Daly's assertion is this: that male dominance is so firmly entrenched in our political order and collective consciousness that it perpetuates *itself*. Women comply unquestioningly with its dictates, and men maintain their status position without even trying. Men sympathetic to the victims' plight can fight with the utmost sincerity for eradication of female genital mutilation.³⁶ Whether they know it or not, the dominant status of men is secure, and it is complacent women who unwittingly make sure it stays that way.³⁷

This phenomenon is illustrated perfectly by the following excerpt from an interview with a male Sudanese psychiatrist:

Q. Under a system where it can be said that a woman does not possess her own body, and where she feels that parts of her body must be given up to someone who owns her, what happens to the self-image of women?

A. "I don't think that women here feel that they do not own their own bodies. We sometimes try to extrapolate from one culture to another, and it cannot be done. To the girls here circumcision does not mean taking away part of their bodies. It is a normal occurrence that happens to everyone. . . . A great majority of them take it for granted that this is something any woman should have. Of course, some of them have had serious medical problems, and if they are educated, know these problems are a result of their circumcision. Those that

33. *Id.* at 232-33.

34. *Id.* at 469 ("Although many of these words are not new in the old sense, they are new in a new sense, because they are heard in a new way.").

35. *Id.* at 30.

36. See also LIGHTFOOT-KLEIN, *supra* note 1, at 114, 281-83 (citing examples of men who would prefer that their wives and daughters resist mutilation). See generally, WALKER, *supra* note 9, at 278-79 (in which the mutilated protagonist's husband and son publicly protest the practice).

37. Women are, in effect, made into "token torturers . . . [to] mask [] the male-centeredness of the ritualized atrocity and turn [] women against each other." DALY, *supra* note 12, at 132.

are uneducated have no notion of cause and effect when it comes to problems later on in life, and so they all accept circumcision without question."³⁸

Women thus do not feel as if a part of them has been taken away, because they are never able to think of their external genitalia as *theirs* in the first place. A woman can say, with sincerity, that "[s]he does not feel that she has been in any way mutilated. 'I feel absolutely complete,' she says."³⁹ It is suddenly little wonder that women do not resist, and even cooperate or take the lead in, their own demise.

It is obvious that, without a clear sense of what underlies this complicity on the part of women, prospects for effective resistance are slim indeed. Up until this point, however, feminist scholars theorizing about female genital mutilation have been reluctant to place *women* under the same microscope that has so long been used to scrutinize the perceived transgressions of men. And with good reason: feminists are understandably loath to adopt a position which might be misread as letting men "off the hook," or as victim-blaming. The result is a field of "women's studies" in which the voices of the women studied are oddly silent. Thus, it is the purpose of this paper to refocus our attention on the subjective life experiences of women in an attempt to elucidate how it can be that women are complicit in their own subjugation, and what implications this position has for resistance to the practice of female genital mutilation.

C. *The Inexpressibility of Agony*

Even if one looks beyond charges of racism and the conundrum of women's complicity in the practice of female genital mutilation, there remains a further — and even more disturbing — barrier to a realistic assessment of the custom's implications. This barrier consists not of well-meaning outsiders' reluctance to interfere in a practice which they might not fully understand, but in the inability of mutilation survivors to fully communicate to those outsiders — or even to each other — the true horror they have experienced. There are simply no words, in any language or dialect, with which to speak the unspeakable.

The roots of this communication gap extend far beyond the inadequacy of any particular tongue to capture the experience of mutilation. It is not simply that there are no meaningful words to

38. LIGHTFOOT-KLEIN, *supra* note 1, at 139.

39. *Id.* at 265.

express the experience of pain, but that the experience of pain annihilates the survivor's very capacity for meaningful expression. Professor Elaine Scarry writes,

[w]hatever pain achieves, it achieves in part through its unsharability, and it ensures this unsharability through its resistance to language. . . . Physical pain does not simply resist language but actively destroys it, bringing about an immediate reversion to a state anterior to language, to the sounds and cries a human being makes before language is learned.⁴⁰

In the first part of her book, *The Body in Pain: The Making and Unmaking of the World*, Scarry considers how the inexpressibility of physical pain contributes to the success of torture as a political tool. The tortured prisoner is robbed of "[w]orld, self, and voice,"⁴¹ leaving the victim powerless to resist the demands of his captors, and the survivor incapable of expressing the horror of his violation to those who would prevent its reoccurrence. Thus, political torture persists despite the efforts of Amnesty International and other human rights groups to eradicate the practice through an aggressive publicity campaign.⁴²

According to Scarry, the language-destroying character of political torture is particularly effective when torturers succeed in transforming everyday objects into instruments of destruction:

In torture, the world is reduced to a single room or set of rooms.

. . . Just as all aspects of the concrete structure are inevitably assimilated into the process of torture, so too the contents of the room, its furnishings, are converted into weapons: the most common instance of this is the bathtub that figures prominently in the reports from numerous countries, but it is only one among many. Men and women tortured during the period of martial law in the Phillipines, for example, described being tied or handcuffed in a constricted position for hours, days, and in some cases months to a chair, to a cot, to a filing cabinet, to a bed; they describe being beaten with "family-sized soft drink bottles" or having a hand crushed with a chair, of having their heads "repeatedly banged on the edges of a refrigerator door" or "repeatedly pounded against the edges of a filing cabinet."⁴³

40. ELAINE SCARRY, *THE BODY IN PAIN: THE MAKING AND UNMAKING OF THE WORLD* 4 (1985).

41. *Id.* at 35.

42. *Id.* at 9 ("Amnesty International's ability to bring about the cessation of torture depends centrally on its ability to communicate the reality of physical pain to those who are not themselves in pain.").

43. *Id.* at 40-41 (footnote omitted).

If those who have been tortured manage to escape this agony alive, these same household items — once associated with comfort and security, with home — greet them upon their reemergence into “normal” life, serving to constantly recreate the circumstances of their pain. Such persons cannot be expected to reclaim fully their lost voices, and they will be prevented from communicating their pain as surely as if they were rendered mute by their attackers.

Although it is more common to view the practice of female genital mutilation as having political implications, rather than being politically motivated as is torture, certain parallels between the two are unmistakable. In each instance, the continued viability of the practice is dependent upon the inexpressibility of its horror. And in female genital mutilation, as with torture, the horror is compounded by the use of everyday items — kitchen knives, razor blades, scissors, and broken glass⁴⁴ — to accomplish its object. Then, the legs of newly mutilated young girls are bound together and, for weeks on end, the girls are tethered — like the Phillipine prisoners Scarry describes — to the same cots or beds upon which they have just been tortured and upon which they are expected to recover.

The result of this world-destroying practice is obvious. As Part II of this Essay makes plain, there is, despite the many thousands of women who have undergone genital mutilation, a lack of reliable accounts of the experience in the words of those who have survived. Historians, sociologists, and novelists' approximations of what mutilation *might* be like — though vital to bringing worldwide attention to the practice — necessarily fail to capture female genital mutilation's full personal and political import.

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Why, then, given the inherent limitations of language to address the enormity of the practice of female genital mutilation, should this Essay have been written? And why should anyone bother to read it? The reason, essentially, is this: it is imperative that we, as feminists, refuse to cower in the face of seemingly insurmountable obstacles to resistance. We should realize that many of these barriers — namely intellectual paralysis brought about by the threat of being accused of racism and cultural impe-

44. See *supra* note 22 and accompanying text.

rialism — are of our own making. When traditional modes of verbal expression are inadequate to the task of resistance, we must continually struggle to create new ones — no matter how bitterly disappointing our feeble first efforts. This is the courage to blaspheme.

II. ANCIENT AND MODERN MEANING: (SELF) JUSTIFICATION

Academic literature on the subject offers a variety of explanations for why female genital mutilation is required, acceptable, or even desirable. These include: the requirements of Islamic religious tradition, proper feminine hygiene, maintenance of virginity and prevention of rape, assurance of marital fidelity, and the need for differentiation between the sexual identities of the genders. These justifications have been addressed frequently in historical and sociological accounts of the practice,⁴⁵ and I will not attempt further detailed analysis of each one. Previous accounts, however, have focused almost exclusively on the male roots and attitudes underlying the explanations: patriarchal religious codes and a male view of ideal womanhood in which women are silent, powerless, and submissive. Exposure of these origins is vitally important. What has been woefully neglected, though, is any attempt to consider how women have come to adopt and adapt these attitudes to their own use. Surely it means something different when a man says “we must protect *our* women from rape” and when a woman says “*I* need to protect *myself* from being raped.”

What is needed, then, is a presentation of some familiar justifications for female genital mutilation as spoken by the unfamiliar voices of women. This endeavor is, however, crippled by the intervention of numerous *other* voices through which their words are filtered: observers, translators, and editors all chip away at original meanings. All that is left is an approximation of the women’s voices, neutralized by transformation into the third-person. And, of course, the observers, translators, and editors charged with presenting these women’s stories to the public are stymied by the same barriers that confront us all when we search for the words to speak or write about this ancient practice which simply defies description.⁴⁶

45. See generally LIGHTFOOT-KLEIN, *supra* note 1.

46. It bears repeating that my perspective is that of a Westerner, reading in English the secondhand accounts of other Westerners and the translated versions of

On the one hand, in her efforts to avoid being accused of cultural imperialism and racism, British sociologist Hanny Lightfoot-Klein, author of *Prisoners of Ritual*,⁴⁷ leaves the reader with the distinct impression that she has carefully chosen each word, painstakingly excising from her manuscript any hint of a too-passionate reaction which might offend the champions of political correctness. On the other hand, there is the work of Asma El Dareer, an African doctor who was herself subjected to pharaonic genital mutilation at an early age.⁴⁸ One might reasonably expect her account of the practice to communicate a perspective on the experience of mutilation which is unavailable to outsiders such as Lightfoot-Klein. This expectation remains unfulfilled, however; El Dareer's book is extremely clinical, setting forth page after page of statistical data with minimal personal commentary. This observation about the limitations of the work of Lightfoot-Klein and El Dareer is not intended to condemn their extremely important efforts. Rather, it is meant merely to underscore the virtual impossibility of putting into meaningful words the experience of pain and loss suffered by those subject to female genital mutilation. Any such attempt is guaranteed — to a greater or lesser degree — to miss the mark.⁴⁹ Nonetheless, what follows is an attempt to resurrect some of the original voices from the appendices to which they have been relegated⁵⁰ and allow them to be heard.

A. Religion

*"There's a Somali proverb . . . If you stop a tradition, it's similar to making God mad."*⁵¹

survivors' experiences. I do not profess to know how these stories of torture and survival resonate in the original tongues of the women who live them.

47. LIGHTFOOT-KLEIN, *supra* note 1.

48. EL DAREER, *supra* note 15, at iii.

49. The limitations of the academic voice are never more obvious than when compared to the artistic vision expressed by Alice Walker in POSSESSING THE SECRET OF JOY, *supra* note 9; *see infra*, part III.

50. *See, e.g.*, LIGHTFOOT-KLEIN, *supra* note 1, at 247-77 (summarizing interviews with 27 women); EL DAREER, *supra* note 15, at 122-27 ("Appendix V: Interviews with Midwives"). To be fair, both women do draw upon these interviews throughout their books. It is worth considering, however, that the stories themselves are banished to the volumes' final pages along with bibliographies and data tables.

51. Mary Ann French, *The Open Wound*, WASH. POST, Nov. 22, 1992, at F1, F4 (quoting a Somali mother who was asked why she had her daughter mutilated).

A great number of the mutilated women studied are adherents of the Islamic faith,⁵² although the practice of female genital mutilation is apparently unknown in eighty percent of Islamic countries.⁵³ Those Muslims who do observe the tradition do so out of an apparently mistaken belief that the tenets of their religion require it.⁵⁴ In fact, however, the Prophet Mohammed himself advised that any female genital mutilation be slight.⁵⁵ Still, the strict demands of chastity and sexual repression imposed by Islamic tradition certainly contribute to the perpetuation of the custom. Many women studied seem to accept Islam's dictates without question.⁵⁶

B. Hygiene

The widely held belief among members of mutilating cultures that the procedure is necessary for proper hygiene goes a long way toward explaining why apparently loving parents would insist upon having their daughters cut. What is incomprehensible is how this belief can persist given the litany of unpleasant potential side effects that genital mutilation entails: hemorrhage, infection, septicemia, shock, retention of urine and menstrual blood, rancid odors, and excruciating pain.⁵⁷ The following experiences are typical:

This 30-year-old housewife has had 8 years of schooling.

. . . She was pharaonically circumcised at the age of 9. She had to be hospitalized for 7 days and required 5 blood transfusions. She was unable to urinate, and when her wound was reopened at the hospital, a large blood clot was found to be causing the blockage.⁵⁸

. . . This is a 25-year-old housewife who was raised in a West Sudanese town and has had twelve years of education. She was pharaonically circumcised at the age of 5 by a trained midwife, under local analgesic. Her wound became badly infected, and she suffered severe bleeding and fever. The wound remained open due to infection, and a year later when it finally healed, she was resutured. She had tremendous pain

52. EL DAREER, *supra* note 15, at 21 (98.2% of research sample were Muslim).

53. LIGHTFOOT-KLEIN, *supra* note 1, at 41.

54. EL DAREER, *supra* note 15, at 21; *see also*, Ray Moseley, *Conference Hears of Horrors Against Women*, CHI. TRIB., June 17, 1993, § 1, at 6 (women are frequently told that mutilation is a "sacred requirement of religion").

55. EL DAREER, *supra* note 15, at 72.

56. *Id.* at 248, 269. *But see id.* at 265 (woman refusing to mutilate her daughter because it is best to leave a girl "as Allah made her").

57. Gunning, *supra* note 3, at 196.

58. LIGHTFOOT-KLEIN, *supra* note 1, at 257.

during the entire period. The refibulation was so tight that it took 30 minutes to empty her bladder. She suffered greatly from depression.⁵⁹

These women, and others like them, are the recipients of incredible misinformation, passed down as an oral tradition from their mothers, most or all of whom were similarly mutilated. For example, women are frequently told that if they are *not* mutilated, they will be plagued by malodorous discharge,⁶⁰ exactly what they experience when they are cut. Further, despite numerous instances of pharaonically mutilated women experiencing severely difficult childbirth, sometimes resulting in the death of the baby,⁶¹ women are told that the mutilating procedure will ease labor and protect the life of the fetus during childbirth.⁶²

The precise origins of the hygiene beliefs of practicing cultures are virtually impossible to trace. Neither is it possible to say that there exists one, universally applicable standard of what it means to be healthy or hygienic. It seems obvious, in the Western view, that a practice which routinely leads to illness, suffering, and even death, of up to fifty percent of a population cannot properly be considered healthful by any logical measure. The very ease with which we make this assumption, however, points directly to why the typical human rights approach to eradicating the practice is virtually guaranteed to fail. For instance, in 1959, the U.N. General Assembly adopted the Declaration of the Rights of the Child which guarantees that “[t]he child shall enjoy special protection . . . to enable him [or her] to develop physically, mentally, morally, spiritually and socially in a *healthy and normal manner*”⁶³ It has been suggested that this international standard can be used to prevent female genital mutilation wherever it is practiced.⁶⁴ The shortcoming of this conclusion is, however, obvious. In a community in which most young girls are subjected to mutilation, and virtually all women who manage to survive to adulthood are similarly scarred, who is to be the arbiter of normalcy? Under such circumstances, the very word “normal” — or, for that matter, “healthy” — has the ring of the absurd.

59. *Id.* at 262.

60. *Id.* at 269, 270.

61. *Id.* at 59.

62. *Id.* at 38, 39.

63. *Quoted in Boulware-Miller, supra* note 8, at 166 n.67 (emphasis added).

64. *Id.*

More crucial than the efforts of some nations that have not traditionally practiced female genital mutilation to eradicate the custom among immigrants is a consideration of whether law can be used as an effective tool to combat the practice within cultures that do observe the tradition. Some African regions have enacted laws aimed at preventing genital mutilation through criminal and civil enforcement methods.⁶⁵ Such laws have, however, largely failed as efforts both to prevent the practice and to save lives. In fact, the threat of prosecution, or of social ostracism of whistleblowers, has driven the custom underground in certain areas. There, victims are denied necessary medical care if complications arise — as they inevitably do — because parents are fearful of legal repercussions. Mutilated girls are allowed to bleed to death rather than risking a visit to the doctor.⁶⁶

C. *Sexual and Social Control of Women*

Female genital mutilation serves to control the sexual and social role of women in a number of obvious ways, occasionally with not-so-obvious results.

1. Assurance of Virginity

The most important function of genital mutilation as a means of social control is its believed tendency to preserve virginity.⁶⁷ To marry well is a woman's chief opportunity for economic survival in practicing cultures, and she is repeatedly told that she will be unmarriageable if her reputation for chastity does not remain intact. To her family, then, the woman's purity becomes a marketable commodity, and the mutilation procedure an obvious way to protect the family's investment. It is not unknown, however, for women to engage in premarital intercourse and then have their vaginal opening refibulated to avoid detection.⁶⁸

65. Seble Dawit & Salem Mekuria, Editorial, *The West Just Doesn't Get It*, N.Y. TIMES, Dec. 7, 1993, at A27 (noting that Sudan, Kenya, Egypt, Ivory Coast, and Burkina Faso have legislation or policies against female genital mutilation); Tempest, *supra* note 4, at A1–A10 (citing the West African nation of Burkina Faso as one example of a region that has taken explicit legislative steps to eradicate female genital mutilation); see also LIGHTFOOT-KLEIN, *supra* note 1, at 43 (citing Sudanese efforts at legal prohibition).

66. LIGHTFOOT-KLEIN, *supra* note 1, at 44–45. But see EL DAREER, *supra* note 15, at 101–02 (advocating new legislation against female genital mutilation).

67. Gunning, *supra* note 3, at 216.

68. LIGHTFOOT-KLEIN, *supra* note 1, at 24.

2. Prevention of Rape

A belief that infibulation will protect women from rape is listed occasionally among the justifications for female genital mutilation.⁶⁹ One searches in vain, however, for a single example of this concern being raised in a woman's voice. What little direct discussion there is on this issue is generally found only in interviews with men, who reveal that the preventive measure is not only ineffective, but also wholly unmotivated by concern for the girls and women themselves. To presume that sewing up a woman's vaginal opening will prevent her violation requires an understanding of rape as purely an act of sex and not of violence and domination. However, the fact that powerless, "easy targets" as young as five and six are often selected as rape victims shows that rape is an act more motivated by hatred and rage than by desire:

Q. What type of problems do you encounter on the pediatric ward?

A. "I saw two cases of girls recently, 5 and 6 years old, respectively. They had been raped. There were horrible tear wounds because of the infibulation."⁷⁰

Further, on the rare occasion that a rape victim is brought to a hospital for treatment, the goal is restoration of the appearance of virginity, and not healing of the psychological wounds that the crime has inflicted:

Q. What were you able to do for these small girls that had been raped?

A. "All we were able to do was to resuture them, try to stop the bleeding and try to reassure the mothers that the girls would be all right. There is nothing else that we could do. The prime concern of the mothers every time is the virginity of the girl. They are afraid no one will marry her if we cannot repair the infibulation."

...

Q. So no one is really concerned over the physical or psychological trauma to which the child is subjected.

A. "No, they are not worried about that at all. They do not even think about that. They think only of the virginity, not the child itself."⁷¹

69. *Id.* at 69.

70. *Id.* at 156 (interview with Sudanese physician).

71. *Id.* at 157-58.

Reported cases of rapes of adult women in mutilating cultures are virtually unheard of.⁷² Given the sex role of the married women this is hardly surprising. In fact, from Hanny Lightfoot-Klein's interview with one young Sudanese man, it becomes clear that infibulation, making forced entry the norm, ensures that the male rape fantasy will be played out, legally, again and again:

Custom in Sudan dictates that the woman act completely uninterested, he tells me, even if she strongly desires sex. Each partner has to play an assigned role. She acts the part of the rape victim, and he acts the part of the rapist. "Everything proceeds quite normally after that," he says.⁷³

When rape is what a woman is trained to expect, it is small wonder that she gives little thought to its prevention.

3. Marital Fidelity

An often-heard justification for female genital mutilation is assurance of women's marital fidelity. The woman's wound becomes, in effect, a chastity belt of flesh. When intercourse is a torture, women can hardly be expected to seek out sex with men to whom they are not contractually bound. The women themselves, however, paint quite a different picture: one account of interviews with fifty mutilated women revealed instances of dissatisfied wives who engaged in repeated affairs in an effort to find sexual fulfillment.⁷⁴

4. Prevention of Outward Sexual Response

As the preceding discussion has made clear, women in cultures that practice female genital mutilation are expected to deny as fully as possible their identities as sexual beings. Even within loving marriages, it is strictly taboo for wives to appear to initiate sex or to display any sign of sexual arousal. One might expect that the mutilation of their external genitalia would render compliance a virtual certainty. Numerous reports exist, however, of pharaonically mutilated women continuing to enjoy sexual contact and even achieving orgasm on a regular basis.

Women in the studied cultures also circumvent the prohibitions on displays of sexual desire through a system of signalling.

72. *Id.* at 158.

73. *Id.* at 280.

74. *Id.* at 41 (citing OLAYINKA KOSO-THOMAS, *THE CIRCUMCISION OF WOMEN: A STRATEGY FOR ERADICATION* 11 (1987)).

Fragrant smoke and oil are frequently used to indicate interest in sex without the shame associated with asking for it.⁷⁵

This consideration of the continued vitality of female sexual identity despite genital mutilation should by no means be read as an attempt to justify the practice, or to minimize its impact. For every story of a woman who continues to desire her husband, and to covertly initiate sex with him, there are ten accounts of women who dread intimacy and report that all sexual desire within them has died. Instead, this section is meant to suggest that it is a serious mistake to assume that a woman mutilated is a woman destroyed. To do so is to make the same error that we condemn in those who would seek to cut her. We must remember that she is not merely a wound,⁷⁶ but a woman.

III. AN ALTERNATIVE VOICE: *POSSESSING THE SECRET OF JOY*

In her novel *Possessing the Secret of Joy*,⁷⁷ Alice Walker presents the story of one woman's experience with genital mutilation from the points of view of eight different narrators. Each of the four women and four men⁷⁸ brings to the tale a unique perspective on the practice, derived from the diversity of their ethnicities, genders, and social backgrounds. Although the book is a work of fiction, and makes no attempt to present a precisely accurate historical or sociological account of female genital mutilation in Africa,⁷⁹ it is an immensely important point of reference for a feminist critique of the practice for a number of reasons. Through the novel, we can imagine the unimaginable, speak about the unspeakable.

First, by adopting the literary device of multiple narration, Walker allows readers to hear and to consider simultaneously the voices of the mutilator and the mutilated, the oppressor and the oppressed, the actor and the acted upon. She thus avoids the pitfall of one-sidedness that characterizes the work of too many well-meaning, impassioned political activists. It is, of course, true

75. *Id.* at 87-88, 268-69.

76. See French, *supra* note 51, at F1 (describing a woman as a "pitiable, jagged wound").

77. WALKER, *supra* note 9.

78. Note that only six characters, three women and three men, are directly herein considered.

79. In fact, Walker freely admits that many of the details of the book, including the African village in which it is set and even the language spoken there, exist nowhere but in her imagination. WALKER, *supra* note 9, at 282-83.

that each of these voices is filtered through Walker's own; and she makes no secret of her own political agenda.⁸⁰ She endeavors, however, to rein in her bias against the practice in order to permit the players to speak for themselves. The result is that the familiar dividing lines between victim and aggressor have been blurred, and comfortable feminist assumptions about gender and power no longer satisfy.

Second, although the characters in the book are fictional, as one reads it becomes clear that they are archetypes of the real-life players in the drama of genital mutilation currently taking place on the world stage. The mutilated heroine of the novel, her shocked and saddened husband, the midwife, and the psychiatrist all have their counterparts in the sociological and historical literature on the practice.⁸¹ Walker, however, is able to give the reader something sociologists and historians may lack: an artist's eye through which to view the interplay between the various actors and a uniquely sensitive insight into the complex of emotional ties that have bound so many to a tradition of pain.

Finally and most importantly, rather than dismiss the novel as merely fictional, it is imperative to use literary works as tools of feminist practice. Adrienne Rich writes that feminists must "question everything. To remember what it has been forbidden even to mention."⁸² Willingness to silence, for a time, the overbearing voice of academia, and allow the imagination to speak, gives women *and* men, authors *and* audiences, a safe place from which to do just that. Further, the dearth of academic and jurisprudential scholarship concerning issues of vital interest to women forces feminists to develop experimental strategies for theorizing about our lives.⁸³

80. The author's position on the practice of genital mutilation is made perfectly clear before the novel even begins. The dedication reads: "This Book is Dedicated With Tenderness and Respect To the Blameless Vulva."

81. See, e.g., LIGHTFOOT-KLEIN, *supra* note 1, at 247-88 (case studies of 27 Sudanese women and 5 men).

82. ADRIENNE RICH, *ON LIES, SECRETS, AND SILENCE: SELECTED PROSE, 1966-1978*, at 13 (1979); see also, Wishik, *supra* note 17, at 22.

83. Consistent with this experimental approach, I have chosen to quote extensively from Walker's work where appropriate so that the "voices" of the novel may be heard and not diminished by summary or paraphrase.

A. *The Narrators*

1. Tashi

Possessing the Secret of Joy is the story of a woman whose very being is splintered by the experience of genital mutilation. In fact, she is not *one* narrator but six: Tashi (her Olinkan tribal name), Evelyn (the American name she received when she arrived in the United States), Tashi-Evelyn or Evelyn-Tashi (depending on which part of her dual self has pushed its way to the surface), Tashi-Evelyn-Mrs. Johnson (a convergence of roles as she approaches her death), and finally Tashi Evelyn Johnson Soul. Through the chorus of voices that these personalities represent, much is revealed about the competing pressures on women to comply with and to resist the mutilation tradition.

In the first pages of the novel, Tashi sneaks away from family and friends, returns to the African tribal village of Olinka in which she was raised, and demands that M'Lissa, the village midwife, perform pharaonic mutilation on her.⁸⁴ Upon her departure, she envisions herself as a tribal chief or warrior, gaining strength from the prospect of obtaining the marks that will tie her to the tradition of her ancestors.⁸⁵

The operation she'd had done to herself joined her, she felt, to these women, whom she envisioned as strong, invincible. Completely woman. Completely African. Completely Olinka. In her imagination, on her long journey to the camp, they had seemed terribly bold, terribly revolutionary and free.⁸⁶

It does not take long for it to become clear that, far from giving her strength, the procedure has sapped her energy, killed a part of her. "It was only when she at last was told by M'Lissa, who one day unbound her legs, that she might sit up and walk a few steps that she noticed her own proud walk had become a shuffle."⁸⁷

Ultimately, her own life shattered, Tashi returns to Africa to find M'Lissa and, in fulfillment of prophesy, kills her:

I killed her all right. I placed a pillow over her face and lay across it for an hour. Her sad stories about her life caused me to lose my taste for slashing her. She had told me it was tradi-

84. WALKER, *supra* note 9, at 21. The procedure was not done on Tashi in her youth because her older sister, Dura, died as the result of genital mutilation. *Id.* at 8.

85. *Id.* at 22.

86. *Id.* at 63 (spoken by husband Adam).

87. *Id.* at 63-64.

tional for a well-appreciated *tsunga* to be murdered by someone she circumcised, then burned. I carried out what was expected of me.⁸⁸

The remainder of the book recounts Tashi's trial for murder, her conviction, and finally her execution by firing squad.

A more extensive analysis of the transformation that Tashi and her alter egos undergo would require an entire book of its own, and would of necessity detract from the beauty and power of the novel itself. In order to preserve the experience of reading the book for those who have not yet done so, I will leave Tashi and turn to the other characters through which her story is told.

2. M'Lissa

M'Lissa, the midwife, or *tsunga*,⁸⁹ who performed a pharaonic mutilation on Tashi is by far the most troubling of the novel's many narrators. She epitomizes the African woman's strange dual role as victimizer and victim: she was pharaonically mutilated at a young age with a razor sharp stone⁹⁰ and has herself performed the same procedure on countless young girls. One would think it impossible that someone who has experienced the devastating effects of mutilation could voluntarily subject another to the same agony. In fact, it was the incomprehensible monstrosity of M'Lissa's actions that ultimately drove Tashi to murder her. However, as M'Lissa speaks, either to Tashi or in soliloquy, she illuminates a variety of justifications for a woman's willing participation in the practice:

[F]rom the time of memory, always, in my family, the women were *tsungas*.

But why is that? I asked my mother.

Because it is such an honor, she replied. And also because it is the way we fill our bellies.⁹¹

Thus, willingness to contribute to the destruction of one's sisters allows one to achieve both social power and economic survival. Clearly, both of these commodities are at a premium for women

88. *Id.* at 274.

89. "Tsunga" is one of several imaginary "African" words that Walker uses throughout the novel. *Id.* at 282-83. While she hypothesizes that the word may have derived from an unidentified African language stored in her subconscious, *id.*, I rather think her choice was a conscious rejection of the generally benign term "midwife."

90. *Id.* at 214-15.

91. *Id.* at 212.

in the Olinka village. But M'Lissa has earned herself recognition and respect at all levels of Olinkan society:

I have been strong. This is what I tell the tourists who come to see me, and the young mothers and the old mothers and everybody who comes. It is what they tell me back: the president and the politicians and the visitors from the churches and the schools. Strong and brave.⁹²

M'Lissa's rise to social and economic power in her community clearly parallels certain real world *tsungas* who perform genital mutilations. The practitioners may strongly influence other women,⁹³ and the decision to seek the mutilation procedure is often left to the girls' female relatives.⁹⁴ It is not unheard of, when fathers request their wives to refrain from having their daughters cut or to use the less severe *sunna* techniques, for the women to secret the girls away and have them pharaonically mutilated against their fathers' wishes.⁹⁵

The argument that the practice of genital mutilation provides women with some degree of power is similar to that sometimes used to justify prostitution in this country. Women, according to this view, must be permitted to choose prostitution as a viable economic alternative to the limited social opportunities otherwise open to them.⁹⁶ Rather than being exploited by others, women who "choose" prostitution are reclaiming control of their bodies. This argument is, however, equally unsatisfying whether applied to prostitution or female genital mutilation. Can a woman's choice that results from limited social opportunity and societal messages of inadequacy, in short from desperation, really be said to be legitimately her own?

The character of M'Lissa provides a vivid illustration of the limitation of the economic empowerment justification for the practice. Despite the fact that M'Lissa performs genital mutila-

92. *Id.* at 219.

93. LIGHTFOOT-KLEIN, *supra* note 1, at 77.

94. *Id.* at 69 (men may forfeit their usual decision-making role in regards to "women's matters"); EL DAREER, *supra* note 15, at 88 (describing the fathers of genitally mutilated girls as generally playing a passive role in the genital mutilation of their daughters). *But see* EL DAREER, *supra* note 15, at 89 ("[S]ome women are circumcised after marriage, in accordance with their husband's orders.").

95. *See* Lightfoot-Klein, *supra* note 1, at 114; *see also* Tempest, *supra* note 4, at A10 (citing the opposition of Silamakan Traore, husband of one of the Malian women convicted of mutilating her daughter, to the practice and noting his ignorance of his wife's plans until after the girl had already been cut).

96. *See generally* SEX WORK: WRITINGS BY WOMEN IN THE SEX INDUSTRY (Frederique Delacoste & Priscilla Alexander eds., 1987).

tions voluntarily and frequently, reaping otherwise unattainable financial and social rewards, as she nears her inevitable death she is able to admit that she has known all along that what she was doing was wrong. “[W]ho are we,” she asks, “but torturers of children?”⁹⁷ She expresses as well her own amazement that women flocked to her, to have their daughters cut as soon as possible or to have themselves resewn after childbirth. The following exchange takes place in a section of the story told by Evelyn-Tashi:

But what did you think, I ask M'Lissa. When I came into the Mbele camp asking to be “bathed.”

I thought you were a fool, she says without hesitation. The very biggest.

But why? I ask.

Because, first of all, there were no other women in the camp. Didn't you have eyes in your head? Didn't anyone ever teach you that the absence of women means something?⁹⁸

Even if M'Lissa had tried to explain to Tashi how very foolish she was to submit, of her own free will,⁹⁹ to mutilation, there is no indication that her warning would be heard. When Tashi's mother Nafa brought her older sister Dura for the procedure, M'Lissa told her to wait because the practice had fallen into disfavor among the male tribal leaders and was not necessary. But Nafa insisted, and even held the child down while M'Lissa cut her.¹⁰⁰

Thus, although the reader loathes M'Lissa's role, and rallies behind Tashi when she murders her, we cannot simply dismiss her as unspeakably barbaric and cruel. Rather, she merely demonstrates the basic economic principle that for every demand there is a potential supply. Given the limited availability of financial and social opportunity in the Olinka village, M'Lissa would be stupid to reject a viable option for survival.

3. Lisette

Lisette is the white Parisian mistress of Tashi's husband Adam. Her role in the action of the book is fairly minimal, but in

97. WALKER, *supra* note 9, at 219.

98. *Id.* at 237.

99. *But see* Boulware-Miller, *supra* note 8, at 157 & n.18 (suggesting that terms such as free will, or consent, may have little meaning in the face of societal pressures to submit to mutilation).

100. WALKER, *supra* note 9, at 253.

occasional references to her throughout the text and in the two short sections she narrates, it is clear that she is the novel's "feminist" voice. She rejects societal expectations about marriage and family,¹⁰¹ and credits Simone de Beauvoir with bringing to her attention the "universal subjugation of women."¹⁰² In fact, she is the only character in the novel who gives much thought to the subjugation of women, and to women's complicity in that agenda. She recognizes, in the following story retold by her son Pierre, that women, whether or not "circumcised," are *circumscribed* in myriad ways:

It was about how, at last, I recognized the connection between mutilation and enslavement that is at the root of the domination of women in the world. Her name was Ayisha, and she ran to us one night screaming from the sight of the variety of small, sharp instruments her anxious mother had arranged underneath a napkin on a low seating cushion that rested beside the bridal bed.

My mother suddenly shuddered, as though watching a frightful scene. It's in all the movies that terrorize women, she said, only masked. The man who breaks in. The man with the knife. Well, she said, he has already come. She sighed. But those of us whose chastity belt was made of leather, or of silk and diamonds, or of fear and not of our own flesh . . . we worry. We are the perfect audience, mesmerized by our unconscious knowledge of what men, with the collaboration of our mothers, do to us.¹⁰³

It may seem to the reader somewhat odd that Alice Walker, an African-American woman, would give to a white Frenchwoman the role of detached commentator on the practice of female genital mutilation. If, however, Lisette represents the Western feminist viewpoint, Walker's use of her and the evolution of her relationship with Tashi illuminates the cultural imperialism debate previously discussed.¹⁰⁴ From the very beginning, Tashi hates Lisette. True, the woman is sleeping with her husband, but Tashi's rage goes far beyond that of a jealous wife. Rather, she is wildly jealous of Lisette's very *completeness*; of her unfettered ability to enjoy normal lovemaking and normal childbirth:

When Evelyn learned of my pregnancy with little Pierre, as Adam and my parents used to call him, she flew into a rage that subsided into a years-long deterioration and rancorous

101. *Id.* at 31.

102. *Id.* at 125-26.

103. *Id.* at 137-38.

104. *See supra* part I.A.

depression. She tried to kill herself. She spoke of murdering their son.¹⁰⁵

Tashi repeatedly rejects Lisette's attempts to reach out to her in friendship. What of value could an intact, white woman possibly have to share with her, and what could she possibly know of Tashi's pain? The depth and breadth of the gulf which separates the women is illustrated by a comparison of their experiences with childbirth. Lisette's is nothing short of comical:

I had the most sought-after midwife in France — my competent and funny aunt Marie-Therese, whose radical idea it was that childbirth above all should feel sexy. I listened to nothing but gospel music during my pregnancy, a music quite new to me, and to France, and "It's a High Way to Heaven" (" . . . nothing can walk up there, but the pure in heart . . .") was playing on the stereo during the birth; the warmth of the singers' voices a perfect accompaniment to the lively fire in the fireplace. My vulva oiled and massaged to keep my hips open and my vagina fluid, I was orgasmic at the end. Petit Pierre practically slid into the world at the height of my amazement, smiling serenely even before he opened his eyes.¹⁰⁶

Tashi's experience with giving birth, by contrast, is anything but comical, and far from serene:

The obstetrician broke two instruments trying to make an opening large enough for Benny's head. Then he used a scalpel. Then a pair of scissors used ordinarily to sever cartilage from bone. All this he told me when I woke up, a look of horror lingering on his face.

. . .

I felt as if there was a loud noise of something shattering on the hard floor, there between me and Adam and our baby and the doctor. But there was only a ringing silence. Which seemed oddly, after a moment, like the screaming of monkeys.¹⁰⁷

Tashi's rejection of Lisette, and symbolically of Western feminist values, seems complete, and completely justified. Perhaps, the reader might think, Alice Walker has aligned herself with those who charge resisters with racism or cultural imperialism and concluded that the "culturally challenging" practice of female genital mutilation should be left to be sorted out by the culture responsible.¹⁰⁸ Following Lisette's death from cancer,

105. WALKER, *supra* note 9, at 125.

106. *Id.* at 98–99.

107. *Id.* at 57–58.

108. See Dawit & Mekuria, *supra* note 65, at A27.

however, Tashi (as Evelyn) begins to reconsider her refusal of the dead woman's overtures. Ultimately, she admits to herself that, far from thinking Lisette incapable of understanding her, she felt she might know her *too* well.¹⁰⁹ What could she mean by this? Perhaps she means, as was suggested above,¹¹⁰ that as women, genitally mutilated or not, Lisette and Tashi share a common core of experience: that of being objectified, reduced to component parts, and discarded. Whether she likes it or not, Tashi must rely on the efforts and insights of committed feminists of *all* races and cultures to arrive at effective strategies for resistance.

4. Adam

Tashi's husband Adam, like the character of M'Lissa, forces the reader to realize that traditional sex role stereotypes of aggressive men and submissive, subordinated women do not fit in a consideration of female genital mutilation. If we accept that the characters serve as archetypes for real world figures, then the absence of a powerful male character to defend the practice and to demand that it be performed on "his" women is striking indeed. Instead, the central male figure in the book is left entirely out of his wife's decision to seek the procedure and is horrified at its devastating result.

From the very beginning of his life — raised in Africa as the son of Western missionaries — Adam is cast in the role of outsider. Far from taking an aggressive stand to encourage Tashi to seek mutilation, for the most part he simply watches events unfold in shocked silence. When he does speak of Tashi's condition, his function is limited to serving as a foil for her development. "The first thing I noticed was the flatness of her gaze. It frightened me."¹¹¹ In fact, it is usually he, and not Tashi, who seems overwhelmed by the physical effects of the procedure:

It now took a quarter of an hour for her to pee. Her menstrual periods lasted ten days. She was incapacitated by cramps nearly half the month. There were premenstrual cramps: cramps caused by the near impossibility of flow passing through so tiny an aperture as M'Lissa had left, after fastening together the raw sides of Tashi's vagina with a couple of thorns and inserting a straw so that in healing, the traumatized flesh might not grow together, shutting the opening com-

109. WALKER, *supra* note 9, at 159.

110. See *supra* text accompanying notes 21-23.

111. WALKER, *supra* note 9, at 40.

pletely; cramps caused by the residual flow that could not find its way out, was not reabsorbed into her body, and had nowhere to go. There was the odor, too, of soured blood, which no amount of scrubbing, until we got to America, ever washed off.¹¹²

Adam's graphic account of the intimate details of Tashi's pain suggests his desire, or at least his willingness, to share his wife's suffering. Prior to their wedding ceremony, Adam has himself cut with Olinka tribal markings carved into his cheeks. Rather than drawing them together, however, Adam's gesture serves only to draw attention away from Tashi's plight: "His handsome face was swollen; his smile, because of the pain involved, impossible. No one spoke of the other, the hidden scar, between Tashi's thin legs."¹¹³

If, then, we take Adam as the archetypal "man" in this story, one thing becomes clear: men may not be fully equipped to comprehend or to prevent the practice of female genital mutilation, but neither are they, at least individually, to blame for it.

5. Pierre

Pierre is the Harvard-educated¹¹⁴ son of Adam and Lisette. He is also the self-appointed intellectual voice of the novel. When he is not reading the words of great Black male authors — James Baldwin, Langston Hughes, Richard Wright¹¹⁵ — he is theorizing about the sociological and psychological roots of female genital mutilation. Through Pierre's musings, Walker delineates some central theories regarding the practice as a means of preserving traditional sex roles. Two instances are illustrative.

In the first, Pierre reads to Tashi (as Tashi-Evelyn) from a book entitled *Conversations with Ogotemmel*, by French anthropologist Marcel Griaule.¹¹⁶ The passage he reads contains the following account of creation:

"The spirit drew two outlines on the ground, one on top of the other, one male and the other female. The man stretched himself out on these two shadows of himself, and took both of them for his own. The same thing was done for the woman. Thus it came about that each human being from the first was endowed with two souls of different sex, or rather

112. *Id.* at 64.

113. *Id.* at 65 (spoken by Adam's sister Olivia).

114. *Id.* at 125.

115. *Id.* at 133.

116. MARCEL GRIAULE, *CONVERSATIONS WITH OGOTEMMEL: AN INTRODUCTION TO DOGON RELIGIOUS IDEAS* 22 (1965).

with two principles corresponding to two distinct persons. In the man the female soul was located in the prepuce; in the woman the male soul was in the clitoris.

...

Man's life was not capable of supporting both beings: each person would have to merge himself into the sex for which he appeared to be best fitted."¹¹⁷

Pierre finishes the account in his own words, telling Tashi:

[T]he man is circumcised to rid him of his femininity; the woman is excised to rid her of her masculinity. . . . [A] very long time ago, men found it necessary to permanently lock people in the category of their obvious sex, even while recognizing sexual duality as a given of nature.¹¹⁸

Pierre's words clearly echo those of Sigmund Freud, who surmised in *Three Essays on the Theory of Sexuality*¹¹⁹ that, from the time girls are born, their sexual energies are focused on the clitoris, a structure essentially masculine in its function and appearance.¹²⁰ As part of the sexual maturing process, the adolescent girl has to accomplish a transfer of her sexual focus from the clitoris to the uniquely feminine vagina.¹²¹ Freud considered the need for women to make this transfer to be a primary cause of "hysteria,"¹²² a disorder which was treated for some time with clitoridectomy in Europe and the United States.¹²³

In the second instance, Pierre's theories read more like an effort at popular psychology. His father describes the following conversation about an effortlessly orgasmic female acquaintance of his son:

I am speechless at the thought that any woman's pleasure might be found so easily, I stammer; so, in a sense, *carelessly*.

117. WALKER, *supra* note 9, at 171 (quoting MARCEL GRIAULE, *CONVERSATIONS WITH OGOEMMELI: AN INTRODUCTION TO DOGON RELIGIOUS IDEAS* (1965)).

118. *Id.* at 171-72. It is worth noting here that these words are spoken by someone who has rejected to some extent the traditional male sex role: Pierre is identified in the novel as bisexual. *Id.* at 177.

119. SIGMUND FREUD, *THREE ESSAYS ON THE THEORY OF SEXUALITY* (1905), reprinted in *FREUD ON WOMEN: A READER* 89, 137 (Elizabeth Young-Bruehl ed., 1990).

120. *Id.* at 136.

121. *Id.* at 137; see also Boulware-Miller, *supra* note 8, at 157 (citing the belief of some supporters of the practice of genital mutilation "that the 'redundant' and 'masculine' tissue of the uncircumcised woman must be eliminated to demarcate her sex and initiate her into womanhood").

122. FREUD, *supra* note 119, at 137-38.

123. See *infra* part IV.

The word you are looking for, says Pierre, is *wantonly*. *Loosely*. A woman who is sexually “unrestrained,” according to the dictionary, is by definition “lascivious, wanton and loose.” But why is that? A man who is sexually unrestrained is simply a man.

Well, I say, *was* she loose?

Pierre shifts his weight . . . and frowns up at the sky. Now, he says, in the scholarly tone that still strikes me as amusing in one so childlike in size, we can begin to understand something about the insistence, among people in mutilating cultures, that a woman’s vagina be tight. By force if necessary. If you think of being wanton, being loose, as being able to achieve orgasm easily.¹²⁴

While prevention of promiscuity and suppression of “shameful” outward sexual response are frequently invoked as justifications for female genital mutilation,¹²⁵ Pierre’s account simply does not ring true. Rather, it is nothing more than a Western male, academic attempt to justify or explain an unjustifiable and inexplicable practice. After all, “loose” and “tight” are American sexual argot, not African.¹²⁶

Thus, Walker appears to use Pierre, as sympathetic a character as he may be, to negate the notion that Western male analytical frameworks are sufficient to address this culturally challenging practice. This is, of course, why she wrote the book in the first place: to invent a new lens through which to view the custom and to work for change.

6. Mzee (Carl Jung)

In the acknowledgments following her novel, Alice Walker writes: “I thank Carl Jung for becoming so real in my self-therapy (by reading) that I could imagine him as alive and active in Tashi’s treatment.”¹²⁷ Indeed, it is Lisette’s “[U]ncle Carl”¹²⁸ who first helps Tashi to face the horror of what has happened to her. Rather than interpreting her dreams as Freud would, Mzee (“old man”), as Tashi refers to him, encourages her to bring the

124. WALKER, *supra* note 9, at 175–76.

125. *See supra* part II.

126. My knowledge of African dialects is nonexistent, so there is the possibility that there is a parallel construction in some African tongue. However, because the language spoken in the Olinka village is entirely fabricated, it is unlikely that Walker intended such a coincidence.

127. WALKER, *supra* note 9, at 285.

128. *Id.* at 85.

inhabitants of her dreams to life through drawing.¹²⁹ The image that emerges, in ever-increasing dimensions, is that of a monstrous chicken and a disembodied woman's foot. As she paints, Tashi unearths a long-buried memory of her sister's mutilation:

I saw M'Lissa shuffle out, dragging her lame leg, and at first I didn't realize she was carrying anything, for it was so insignificant and unclean that she carried it not in her fingers but between her toes. A chicken — a hen, not a cock — was scratching futilely in the dirt between the hut and the tree where the other girls, their own ordeal over, lay. M'Lissa lifted her foot and flung this small object in the direction of the hen, and she, as if waiting for this moment, rushed toward M'Lissa's upturned foot, located the flung object in the air and then on the ground, and in one quick movement of beak and neck, gobbled it down.¹³⁰

This invocation of mythic characters is used in Jung's work¹³¹ to explore the contents of the collective unconscious, a sort of shared universal memory. In the following passage, Mzee explains the import of his chosen methodology by turning the therapeutic lens in on himself:

They [Tashi and Adam], in their indescribable suffering, are bringing me home to something in myself. I am finding myself in them. A self I have often felt was only halfway at home on the European continent. In my European skin. An ancient self that thirsts for knowledge of the experiences of its ancient kin. Needs this knowledge, and the feelings that come with it, to be whole. A self that is horrified at what was done to Evelyn, but recognizes it as something that is also done to me. A truly universal self. That is the essence of healing that in my European, "professional" life I frequently lost.¹³²

This approach appears to be a psychological version of the "world-travelling" method explored earlier, and has obvious appeal as an experimental mode of feminist inquiry.

.....

Together, these many narrators provide us with a broad perspective, often lacking in more traditional forms of scholarship, from which to view the practice of female genital mutilation in other cultures. In turn, this perspective gives us a point of refer-

129. *Id.* at 54. Given the underlying premise of this Essay that language is inadequate to express the full import of the experience of mutilation, it is little wonder that Tashi must abandon traditional modes of psychotherapy, which center on the spoken word, to find healing.

130. *Id.* at 73.

131. DALY, *supra* note 12, at 254.

132. WALKER, *supra* note 9, at 84.

ence against which to view the history of mutilation in our own culture.

IV. THE CULT OF INVALIDISM: THE AMERICAN EXPERIENCE

Although there do not appear to have been any instances of ritual female genital mutilation performed on American soil in recent years,¹³³ the practice is far from unknown in this country. The latter half of the nineteenth century marked the development of gynecology as a separate medical specialty dedicated to curing various "female disorders," including hysteria, nymphomania, lesbianism, and "excessive" masturbation.¹³⁴ For a time, clitoridectomy surgery was the preferred method for treating these conditions. The procedure originated in England, was imported to the United States in 1860,¹³⁵ and was practiced here by some physicians as late as 1948.¹³⁶

Doctors offering clitoridectomies found a willing clientele in the middle- and upper-class white women of the day. At the time, a sort of "cult of invalidism"¹³⁷ had arisen: wealthy women took to their beds in droves, stricken with the symptoms of a mysterious disorder. These included: "headache, muscular aches, weakness, depression, menstrual difficulties, indigestion, etc., and usually a general debility requiring constant rest."¹³⁸ Physicians seeking to cure the women focused on their sexual and reproductive organs as the source of these difficulties: in addition to clitoridectomy, removal of the ovaries was a popular treatment.¹³⁹

Writer Charlotte Perkins Gilman, famous for her fictionalized account of her own experience with female "mental disorder

133. However, trauma associated with being forced to undergo genital mutilation while growing up in Egypt has been raised unsuccessfully as a defense to murder committed in the United States. Rene Lynch, *O.C. Woman Sentenced in Grisly Murder*, L.A. TIMES (Orange County Edition), Mar. 13, 1993, at A1, A26.

134. Gunning, *supra* note 3, at 206.

135. *Id.*

136. EHRENREICH & ENGLISH, *supra* note 27, at 123. The last known clitoridectomy in the United States was performed on a five-year-old girl as a cure for masturbation.

137. *Id.* at 137.

138. *Id.* at 103.

139. The fact that access to "voluntary" sexual surgery was limited to women with the financial means to pay for it should not be taken to mean that the practice had no relevance to poor women and women of color. The experimental development of the procedures, prior to mass marketing, focused on black slaves, some of whom were operated on dozens of times, and on poor Irish immigrants to the United States. *Id.* at 124-25.

der,"¹⁴⁰ was not surprised that women's sexual nature was presumed to be the origin of their difficulties. Wealthy wives were not permitted to work outside of the home, and they were expected to leave the majority of domestic tasks, including housekeeping and childrearing, to hired help. A woman's entire utility, then, was focused in one function: sex.¹⁴¹

Along with the fashions designed to tie women to their sexualized persona — "bustles, false fronts, wasp waists"¹⁴² — clitoridectomy briefly reached fad proportions among the privileged.¹⁴³ Numerous women demanded that the operation be performed on them, and doctors of the day described women's views of the surgical scar as "'a mark of favor' or 'as pretty as the dimple in cheek of sweet sixteen.'"¹⁴⁴

The nearest modern analogue of this phenomenon is the incredible demand for cosmetic breast implants in this country in recent years.¹⁴⁵ Until the Food and Drug Administration placed a moratorium on their use in 1992, American women lined up by the thousands to have their breasts enlarged with implants of silicone.¹⁴⁶ In 1991, the American Society of Plastic and Reconstructive Surgeons estimated that as many as 94,000 women a year underwent the surgical procedure.¹⁴⁷

Although this and other forms of elective cosmetic surgery are frequently dismissed as minor, a typical breast augmentation operation can actually be quite barbaric. One technique involves pushing the implant sac into the patient's breast through an incision in her armpit.¹⁴⁸ The list of potential implant-related health problems and side effects is staggering: contracture of scar tissue around the implant, separation from breast tissue, painful hardening, interference with nursing, delayed cancer detection, numbness, infection, skin necrosis, blood clots, toxicity, lupus,

140. DALY, *supra* note 12, at 255 n.*.

141. EHRENREICH & ENGLISH, *supra* note 27, at 105.

142. *Id.*

143. *Id.* at 123; Gunning, *supra* note 3, at 207-09.

144. Gunning, *supra* note 3, at 209 (quoting Ben Barker-Benfield, *Sexual Surgery in Late Nineteenth Century America*, 5 INT'L J. HEALTH SERVS. 279, 295 (1975)).

145. *Id.* at 213-14.

146. *Id.* at 214.

147. SUSAN FALUDI, BACKLASH: THE UNDECLARED WAR AGAINST AMERICAN WOMEN 220 (1991); see also Ridgely Ochs, *Debate Over Breast Implants*, NEWSDAY (Nassau and Suffolk Edition), Nov. 11, 1991, News Section, at 4 (reporting that more than two million women have received breast implants, at a rate of between 100,000 and 130,000 women a year).

148. FALUDI, *supra* note 147, at 216.

rheumatoid arthritis, scleroderma, and death.¹⁴⁹ Further, one study indicated that the implants failed and had to be removed in as many as fifty percent of cases.¹⁵⁰

Still, despite the risks, women continued to demand the surgery. Further, plastic surgeons who offered it insisted that their patients were “‘self-motivated’ . . . mean[ing] they aren’t expanding their breasts to please a man.”¹⁵¹ As unconvincing as this argument is, given the abundance of media messages governing ideal feminine beauty, breast implantation has been packaged and sold to women as a means of giving them control over their bodies and lives.¹⁵² One cannot help but hear the echo of the African women who have come to believe that their participation in female genital mutilation will provide them with some small measure of control over their lives. Mary Daly exposes the ugly flip-side of this lie:

Gynecological/therapeutic/cosmetic preoccupation conceals the patient’s emptiness from her Self. It drives the splintered self further into the state of fixation upon the parts that have become symbols of her lost and prepossessed Self. Reduced to the state of an empty vessel/vassal, the victim focuses desperately upon physical symptoms . . . and “appearance,” frantically consuming medicine, counsel, cosmetics, and clothing to cloak and fill her expanding emptiness. As she is transformed into an insatiable consumer, her transcendence is consumed and she consumes herself. This is enforced female complicity in gynocidal fetishism — the complicity of those programmed to repeat: “Let it be done unto me according to thy word.”¹⁵³

To be sure, to our Western eye, the links between patriarchal standards and female demand for breast implantation are far more clear than those between patriarchy and women’s role in female genital mutilation. Nonetheless, this example of the complicity of women in our own country, at this point in history and in the previous century, should be borne in mind lest we be tempted by arrogant perception to dismiss genital mutilation as unthinkable barbaric or archaic.

149. *Id.* at 219.

150. *Id.*

151. *Id.* at 216.

152. *Id.* at 218 (“Even *Ms.* deemed plastic surgery a way of ‘reinventing’ yourself — a strategy for women who ‘dare to take control of their lives.’”). One particularly perverse illustration of the type of control involved is the “adjustable” implant. This version uses a plastic straw, protruding from the woman’s armpit following surgery, through which she may add or subtract silicone to suit her mood. *Id.* at 216.

153. DALY, *supra* note 12, at 233.

V. CONCLUSION

And so, we return to the same question with which this Essay began: Why, given the inherent — seemingly insurmountable — barriers to effective resistance, was this Essay written? It commenced with the darkly pessimistic assumption that we are utterly without an essential tool, language, with which to battle the physical mutilation of women in any culture, our own included. Then, many pages later, I am no closer to being prepared to offer a comprehensive proposal for its eradication. Has anything really been accomplished by our shared effort of writing and reading these words which, necessarily, fail to capture the full import of what they attempt to express? It is my sincere hope that the answer is yes, that by resurrecting — even in a degree — the long-muted voices of mutilation survivors; by quieting the cacophony of academic rhetoric to allow the artist, Alice Walker, to be heard; and then by bringing us, weary from world-travelling, back to view the “other” in our own culture, the goal for which we must strive is somewhat clearer. That is, we must find a new voice — a new language — with which to speak the unspeakable. We may not now know where this new voice will come from, but we do know that the time-worn assumptions of our prior efforts will disappear. We know that the Baedekers and Berlitz classes with which we once prepared for world-traveling will seem to us hopelessly outmoded, if not unintelligible. And, finally, we know that, whatever its limitations, the simple act of taking an unflinching look at ourselves — having the courage to blaspheme — and speaking our new language with the trembling voice of a child, is the only place to start.