

**FEMALE CIRCUMCISION AMONG YAKAN
IN BASILAN, PHILIPPINES**

**A RESEARCH PAPER PRESENTED TO
THE FACULTY OF THE GRADUATE SCHOOL
ATENEO DE ZAMBOANGA UNIVERSITY
ZAMBOANGA CITY**

**IN PARTIAL FULFILLMENT
OF THE REQUIREMENTS FOR THE DEGREE OF
MASTER IN PUBLIC HEALTH**

**SITTINURUSSAMSI A. CALSALIN
APRIL 2008**

ABSTRACT

Female circumcision has been the source of enormous and bitter international controversy. It is always been viewed as a harmful and devastating procedure on women where it becomes a public health concern in several countries. This procedure in other nations had adverse health effects. In the Philippines, female circumcision is also being carried out by the Yakan tribe of Basilan. However, there had been no study describing the process of female circumcision among Yakan in Basilan. Thus, it is important to document this practice to enhance understanding of possible implications on the health of Yakan female that undergo such practice. This qualitative study was done to explore, and document the socio-cultural beliefs and practices regarding female circumcision among the Yakan tribe of Basilan, Philippines. Fourty-three respondents which consisted of three Kah Dayang (Person performing female circumcision), five religious leaders, five girls who were to undergo the practice, five male respondents and twenty-five females who already underwent female circumcision were included in the study. Observational approach, one on one in-depth interview and focus group discussion was utilized in the study. Descriptive analysis of the results was employed. Results showed that all respondents have common beliefs regarding female circumcision. Female circumcision beliefs include cleanliness reason, dignity, honor and religious duty. They also believe that this practice should be done because it is stated in the hadith (words of Mohammad S.A.W), written in one of the ayat (page) of the Holy Qur-an. Female circumcision for them is obligatory since it is sunnah(the way the prophet lived it) to practice it with the Holy Qur-an their basis. In performing female circumcision, the Yakan tribe practiced the scraping technique using an unpointed knife. This technique employs scraping the labia majora until it becomes erythematous; assuring not to bleed the labia majora is obligatory for this group. A tawal (whispered prayer) is uttered to the child which marks the end of the practice. Results also showed that female circumcision in this area has no risk on mental health of the respondents. The impact of the practice to their mental health was advantageous since this people believe that being circumcised seemed to give worthwhile meaning to their lives. With regards to physical health, the dull tolerable pain which lasted for about an hour which was described by the 5 years old girls respondent after undergoing the practice was one of its consequences. Another was the erythematous labia majora which may lead to further vulvar inflammation and infection. The used of unsterilized unpointed knife could also imposed susceptibility to tetanus. Although this consequences were evident, respondents are still in favor of the practice mainly because of religious belief. They believe that female circumcision is written in the Holy Qur-an and obligatory thus Yakans as muslims are expected to respect and follow Allah's direct revelation in the Holy Qur-an regarding female circumcision.

CHAPTER I

THE PROBLEM AND ITS SETTING

Background of the study

Female circumcision officially known as female genital mutilation refers to a group of cultural practices that involves partial or total removal of the external female genitalia. Female circumcision or female genital mutilation (FGM) definitions was reaffirmed in the WHO, UNICEF, and UNFPA joint-statement issued in April 1997. Based on its severity, there are four major types (WHO, 1998): Type I-Excision of the prepuce, with or without incision of part or the entire clitoris, Type II - Excision of the clitoris with partial or total excision of the labia minora, Type III- Excision of part or all of the external genitalia and stitching/ narrowing of the vaginal opening (infibulation), Type IV- Unclassified, which includes: pricking, piercing or incising of the clitoris and/or labia; stretching of the clitoris and/or labia; cauterization by burning of the clitoris and the surrounding tissue; scraping of tissue surrounding the vaginal orifice or labia majora ('angurya' cuts) or cutting of the vagina ('gishiri cuts'); introduction of corrosive substances or herbs into the vagina to cause bleeding or for the purposes of tightening or narrowing it and any other procedure that falls under the definition of female genital mutilation given above.

Female circumcision has been the source of enormous and bitter international controversy since the late 1970's. It is always been viewed as a harmful and devastating procedure upon women where it has become a public health concern in several countries. In several literature it is always been defined as an ancient custom which has adverse health consequence, affecting the physical, sexual, reproductive and psychological well-being of women and girls who undergo this procedure.

Female circumcision is mainly carried out in Western and Southern Asia, the Middle East and large areas of Africa. It is also known to take place among immigrant communities in the USA, Canada, France, Australia and Britain, where it is illegal. An estimated 130 million girls and women have undergone female circumcision worldwide (Rainbo, 1996). The Center for Disease Control estimates that at least 168,000 women and girls in the U.S. are considered at risk in this procedure (Jones, et al. 1997, p. 369). In many countries around the world female circumcision still remains a public health concern because of the adverse health consequences such as infection, bleeding, pelvic inflammatory disease, urinary tract infection, infertility and septicemia that are associated with this procedure (Taylor, et. al, 1999).

In the Philippines, the peril of female circumcision has not yet been studied. Yet, the practice of female circumcision known as “Pag-Islam” particularly among Muslim women most especially with Yakan tribe of Basilan has long existed, but information concerning exactly how it is carried out has not yet been documented. This ethnic group which comprises the Yakan generally practices female circumcision. The Yakan constitutes the majority (41.3%) of the total population of Basilan Philippines (National Statistics Office, 2005). In Barangay Bato, Lamitan Basilan they constitute 80% of the total population. In Lamitan Emergency hospital, physician diagnosed female circumcision related trauma such as clitoris laceration, vulvar inflammation and vulvar infection, tetanus accounts for 1% of all hospital visits every year in the said hospital (Municipal Health Office, Lamitan 2006).

The existing literature could not present any evidence that female circumcision in the Philippines is similar to female circumcision in Egypt and some African countries. None of the literature in the Philippines described the process of female circumcision. None of them did a direct observation of the process to witness the procedure of circumcision. This made it difficult to prove that existing female circumcision practice is a form of violence against the girl child with a significant life-effect that manifest when entering adulthood or this practice is another type of female circumcision not included in the WHO definition which does not have implication on women health (Rhidwan, 1999).

In sum, there is insufficient report that female circumcision practices are the source of physical, sexual or psychological harm suffering, either manifested in a woman’s private sexual life, fertility history, or other effects at the community or public levels as what all literatures are claiming. In relation to the recommendation of the World Conference on Human Rights to intensify governments’ efforts for the protection and promotion of the human rights of women and the girl child, a direct observation of the female circumcision process in the Philippines needs to be done before concluding that female circumcision is always a threat to women’s health. Therefore to enhance understanding of such beliefs and practices of Yakan on female circumcision and implications on their health, the researcher conducted this study to address such issues.

CHAPTER II

REVIEW OF RELATED LITERATURE

Female circumcision is recognized by many as an issue of medical, social and legal concern. At present, female circumcision remains common in many cultures in Africa and the Middle East, varying in form and severity as a result of each group's socio-cultural norms and belief systems. It is estimated that approximately 100 million girls and women alive today are affected by female circumcision. It can have severe medical and psychological consequences for the girls and women on whom it is performed (WHO, 1998). Government, international human rights bodies, and non-governmental organizations have engaged in efforts to eradicate the practice of female circumcision, including specific legislation prohibiting the practice, public education campaigns and international conventions and resolutions condemning the practice. This literature shows that female circumcision practice should be condemned as a result of the medical, legal, human rights, historical, and religious arguments against it.

The World Conference on Women in 2005 clearly stated that female circumcision is a violation of reproductive and health rights. The definition of female circumcision constitutes all procedures from partial to total removal of the external female genitalia or other injury to the female genital organs whether for cultural or any other non-therapeutic reasons (WHO, 1996). The violation of the basic human and health rights of the girl child lies in the fact that this practice is an infringement upon the physical and psycho sexual integrity of women and girls, and without a therapeutic reason this is a form of violence against them. Therefore, the Resolution WHA46.18 urged related countries to continue the monitoring and evaluation of their efforts to eliminate any form of female circumcision, because it is unacceptable from any point of view (WHO, 1997).

Currently, only anecdotal accounts outline the range and forms of female circumcision allegedly practiced in North America, Europe, Australia and New Zealand. Data do exist, however, for the regions where female circumcision remains a traditional custom. Female circumcision continues in North and South Yemen, Saudi Arabia, Iraq, Jordan, Syria, and Southern Algeria. Cases of excision are found throughout Africa, including Egypt, Mozambique, Botswana, and Lesotho. Infibulation remains customary in Somalia, Ethiopia, the Sudan, Kenya, Nigeria, Mali, Burkina Faso (previously Upper Volta), and parts of the Ivory Coast. Although little information is available, it has been documented that this procedure is practiced by Muslim populations in the Philippines, Malaysia, Pakistan,

Indonesia, Brazil, Mexico, and Peru.

In the United States female circumcision has become a public health concern because of the adverse health consequences that are associated with this procedure hence a study was conducted by Williams et al (1997) on female circumcision: Implications for women's health cited in Neille (2003). The paper presents the health risks associated with female circumcision, the cultural rationales for the practice and important issues to consider when designing prevention strategies (Neille,2003). Study showed that the immediate or short-term health complications common to all types of this practice are pain, hemorrhage, prolonged bleeding causing shock and death, local and systemic infection, septicemia, anemia, tetanus, gangrene, and fracture or dislocation of the clavicle, femur, humerus or hip joint from forcefully being held down (Eyega and Connelly,1997; Lightfoot-Klein and Shaw, 1991; Toubia, 1995).

The long-term complications from nearly sealing off the vagina after infibulation include difficulty in passing urine and chronic urinary tract infection. Untreated, these infections can ascend to the bladder and kidneys resulting in renal failure, septicemia and even death. Pelvic infection of the uterus and fallopian tubes is also common and excruciatingly painful. Infertility, keloid scarring, fistulae, dyspareunia and sexual dysfunction are also frequently reported from infibulated women (Elchalal, Ben-Ami, Gillis & Brzekinski, 1997; Horowitz and Jackson, 1997). By far, one of the most frequently cited explanations for this practice has been Islamic law. The Islamic religion has been used to lend credence particularly to Type IV, infibulation. Because Islam requires virginity before marriage, infibulation insures virginity (El Dareer, 1982).

Unfortunately, individual interpretation in various places has turned this cultural tradition into a religious doctrine that commands female circumcision as a basic element of religious faith, similar to the abstention of pork in daily food. In Limbangan, Central Java, the Islamic religious leaders perceived that female circumcision is required by the Islamic law (Sunnah or recommended by the Prophet), a duty for male believers as well as for the females. However, the researchers found out that in reality circumcision was practiced by non-Islamic Javanese too, a practice inherited as a custom or tradition (Research Team of LSPPA, 1999).

A study on the psycho-socio-sexual consequences of FGM and attitude change at the Khartoum North and East Nile provinces of Khartoum State in the Sudan has been conducted by Dr. Amna A. R. Hassan, the Executive Secretary of the Sudan National Committee on Traditional Practices (SNCTP) in collaboration with the Swedish Save the Children (Radda

Barnen). This study was begun in 1996 and approved in July 2000. It is a comprehensive scientific study which gives attention to the diversity of cultures, differences in age-groups, urban, suburban and rural areas.

The selected random sample included 573 females. A number of decision makers were also interviewed. The study showed that 91 % of the newly married females showed their negative experiences in sexual life while 82% of the females interviewed reflected their negative desire towards sexual intercourse with their husbands. Seventy-four percent of their husbands reacted, aggressively with complaints about the negative attitudes of their wives during intercourse due to female circumcision acute health complications.

In Indonesia, a qualitative study was conducted regarding female circumcision and its extent, implications and possible interventions to uphold women's health rights by the Population Council with support from the ministry for women's empowerment under USAID funding. The specific aims of the study were to enhance understandings on female circumcision practices and their extent and variation in the country as well as their causes and implications on women's health. The study used multiple data sources, including literature review, in-depth qualitative interviews with female circumcision providers, community leaders, religious leaders, and mothers, and a household survey with a sample of 1694 mothers of female children underage 19. Study findings indicate that in general Muslim communities support the continuation of female circumcision practice, because they perceive it as both a societal custom or tradition, and a religious duty. Religious leaders want the practice of female circumcision to continue indefinitely; because of their common interpretations that female circumcision is a required act of faith, although when being probed, they admitted that the law varies from one to another, from "wajib"(obligatory) to sunnah (recommended but optional), while some placed it an even lower level of religious duty. Around 92% of the families visited for the survey expressed support for the continuation of female circumcision not only for their girl children but also for future grandchildren. Indonesian female circumcision practices can be divided into two main groups: "symbolic only" types where there is no incision or excision, accounting for about 28% of all the cases of female circumcision in the study for which an eye-witness account was available, and "harmful" forms, involving incision (49%) and excision (22%).The study concluded that the practice of female circumcision in Indonesia is essentially a tradition which has been passed from one generation to the next with little questioning about its meaning or its basis in Islamic history or law. Many adhere to, and pass down, this tradition simply because elders and grandparents wish to preserve this practice in the younger

generations. The study findings did not reveal any clear immediate or long-term physical or psychological complications of female circumcision for girls or women. However, direct observation of procedures showed that female circumcision practice in Indonesia certainly involves pain and real genital cutting in about three-quarters of cases. This evidence, and the fact that it is done without the consent of the girl and without clear health benefits or religious mandate is enough to classify this act as a violation of human rights, specifically children's rights and women's sexual and reproductive rights. The practice of female circumcision in Indonesia can therefore be said to violate the rights of the child as guaranteed under the Convention on the Rights of the Child, which was ratified by Indonesia in 1990.

A qualitative study done in Malaysia by Beatrice Letitia Haffner on cultural traditional practices: Implications for reproductive health pointed out that female circumcision is a major health hazard affecting between 100 and 140 million women (WHO 2003). Despite the fact that female circumcision is not advocated by any religion, it has a strong religious and cultural foundation, which has ensured its continued practice. Their study concluded that female circumcision may lead to reproductive health hazard such as infection pelvic inflammatory diseases, Bartholin's gland abscess and chronic vulvar ulcer and infertility.

Literature in the Philippines showed that Muslim people use the word "Pag-Islam" for female circumcision practices including the Yakan tribe. It is a traditional ritual that in practice, merely involves rubbing and not cutting of the female genitalia. It is believed that female circumcision is a pre-condition to become a Muslim. Female circumcision for them is viewed as a must for Muslims, both males and females, and those who are not circumcised will be stamped as kafir (non-believer) (cited in Majid et al, 2001). They perceive female circumcision as an obligatory practice for boys and girls, a required act of purification, or a pre-condition to become a Muslim.

Literature review showed that female circumcision practices in other countries had already been studied extensively. But in our country none of these practice had been documented hence effort to study female circumcision in the Philippines should be carried out.

Statement of the Problem

What are the beliefs and practices of Yakans regarding female circumcision and its implications on women's physical and mental health?

General objective

To document the beliefs and practices of female circumcision and to assess its implications on the physical and mental health of Yakan women.

Specific objectives

1. To determine the beliefs and practices regarding female circumcision among Yakan tribe in Basilan, Philippines.
2. To determine the Yakan male perception regarding beliefs and practices on female circumcision.
3. To document the female circumcision procedure among Yakan tribe.
4. To determine the perceived physical and mental health implication female circumcision has on Yakan women.

Significance of the study

Since no study has been done regarding beliefs and practices of Yakan tribe on female circumcision (Pag-Islam) this issue call for understanding of this group's rationale for this practice. In general, this study aimed to provide research-based information on female circumcision (Pag-Islam) beliefs and practices among Yakan tribe of Basilan and give us information if there is women's health consequences associated with it.

Scope and Delimitation of the Study

This ethnographic investigation focuses only on the female circumcision ("Pag-Islam") beliefs and practices of Yakan tribe in Barangay Bato Lamitan Basilan. "Pag-Islam" was described according to the beliefs and practices of the Yakan tribe only. Videos and photographs taken were restricted to those that do not contravene their beliefs and practices. Comparisons of female circumcision among other ethnic group in the Philippines was not included.

Conceptual framework

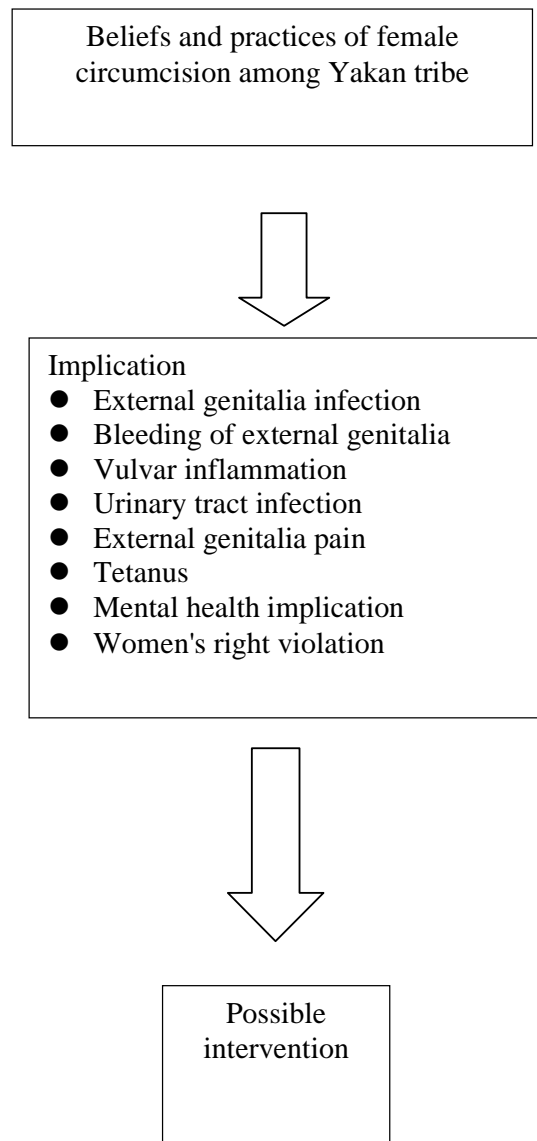


Figure 1. Conceptual framework

The schematic diagram reflects the beliefs and practices of female circumcision among Yakan tribe. An assumption is made that this practice might have physical and mental health implication which warrants future intervention.

CHAPTER III

METHODOLOGY

Research design

The study used an ethnographic qualitative design. The method was utilized to describe, analyze the data inductively and interpret gathered cultural information on beliefs and practices of Yakan on female circumcision and its impact on women's health.

Study Setting

The study was conducted at Barangay Bato, Lamitan Basilan. This barangay is one of the underdeveloped communities of Lamitan. It is located eastern part of the said municipal. It is 3 kilometers away from the town site. It is about 1 km. northeast of the Municipal Hall. The barangay is a Yakan dominated community, though other ethno-linguistic groups such as Badjao and Tausug also reside in the area. It is accessible by land with an acceptable road condition. Tricycles and single motorcycles are the major modes of public transportation in the area. The barangay is a fishing area equipped with a port for fishing boats (Cabangal, 2006).

Based on the 2006 census, the total population of Barangay Bato is 5446 consisting of 2451 males and 2995 females. Out of the total populace 80% are Yakan wherein females constitute 55% in the said area. Females ages 5-9 years old comprises 14% of the Yakan female population, 68% belongs to the reproductive age group and 10% of them belongs to ages 50 and above. There are 3 known people who perform female circumcision in the area and 5 known religious leaders. Islam is the major religion (88%) (Local Barangay Survey, 2006). The main dialect is Yakan although Samal, Tausug, Visayan, Chavacano and Tagalog are widely used.

Key- informants

- 1. Person performing female circumcision.**
- 2. Religious leaders.**
- 3. Girls 5 years old and above who will undergo female circumcision.**
- 4. Females who have undergone female circumcisions**
 - educated
 - non-educated
 - adolescent

- reproductive age
- elderly

5. Male respondents

Inclusion criteria

1. Person performing female circumcision.

- Must be in active practice of female circumcision.
- Must be a Yakan
- Must be a permanent resident of Basilan, Philippines.

2. Religious leaders.

- Must be an active religious leader.
- Must belong to the Yakan tribe.
- Must be a permanent resident of Basilan, Philippines.

3. Girls who will undergo female circumcision.

- Must finish the entire ceremony of female circumcision.
- Must be a resident of Basilan, Philippines.
- Girls 7 years old and above, belonging to the Yakan tribe.

4. Females who have undergone female circumcision.

A. Educated

- Must be a college level.
- Must belong to the Yakan tribe.
- Must be a resident of Basilan, Philippines

B.Non-educated

- Females 18 years old and above with no educational attainment.
- Must belong to the Yakan tribe.
- Must be a resident of Basilan, Philippines.

C. Adolescent

- Females ages 10-19 years old.
- Must be a Yakan
- Must be a resident of Basilan, Philippines.

D. Reproductive age

- Females ages 10-50 years old.

- Must be a Yakan.
- Must be a resident of Basilan, Philippines.

E. Elderly

- Females ages 55 years old and above.
- Must be a Yakan.
- Must be a resident of Basilan, Philippines.

5. Male respondents

- Males ages 20 years old and above.
- Must be married to a Yakan woman who underwent female circumcision.
- Must be a Yakan.
- Must be a resident of Basilan, Philippines.

Sampling Method

Purposive sampling method was used in selecting the Kah Dayang (person who performs female circumcision), religious leaders, female who underwent female circumcision and girls who were to undergo female circumcision. For the male respondents, random sampling method was used. This type of method was used because in the study there were 25 males who met the inclusion criteria. Since only 5 respondents are needed, random sampling method was used to eliminate bias.

Research instrument

An interview guide questionnaire was formulated which consisted of items pertaining to the beliefs and practice of the respondents. Questions used for assessing the physical and mental health were validated by a psychiatrist. The mental health status questions were adopted from the usual mental status examination of the Kaplan's Synopsis of Psychiatry. Media equipment was also used to document the actual practice of female circumcision of Yakan tribe.

Data gathering procedure

The researcher spent many hours in the field, collected extensive data, and labors over field issues of trying to gain access, rapport and an insider perspective. She spent 2-3 hours per respondent during the one on one in depth-interview. A one day session was also allotted for each of the focus group discussion. This more than one month fieldwork was her key to gather information through observations of the practice and interviews using the research instrument. These procedures and tools were also used to document and develop a portrait of the beliefs and practices of Yakan women on female circumcision. In-depth interview was used to gather information from the religious leaders, girls who will undergo circumcision and the one performing the female circumcision (Kah Dayang). To obtain information from the females who underwent female circumcision and from male respondents, one on one in-depth interview followed by a focus group discussion were conducted.

Data analysis

As soon as information on beliefs and practices of female circumcision was gathered, analysis through description and interpretations of the observed practices and beliefs of the Yakan tribe was done. The researcher gathered words and pictures as raw data, analyzed them inductively, focused on the meaning of the respondents and described a practice that was expressive and persuasive in language. The gathered information was also used by the researcher to evaluate the implication of female circumcision on women's health.

Flowchart of the study

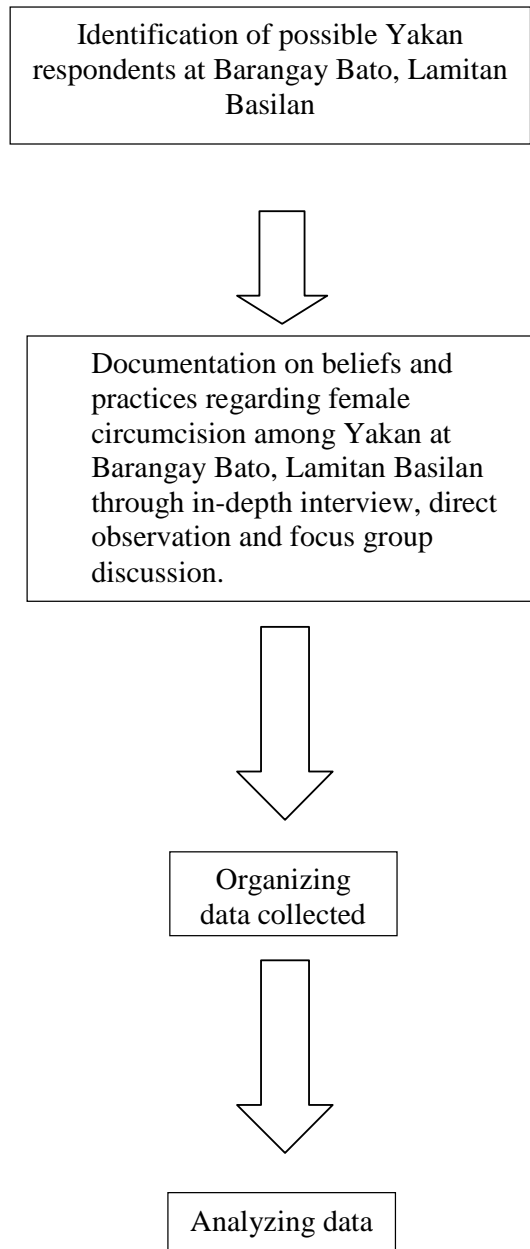


Figure 2. Flowchart of the study

Beliefs and practices of Yakan at Barangay Bato, Lamitan Basilan on female circumcision was determined through in-depth interview, direct observation and focus group discussion. Data were then analyzed for the implication on women's health.

CHAPTER IV

PRESENTATION AND INTERPRETATION OF RESULTS

The richness of qualitative data is due to the stories that are told. In order to understand the responses to the research questions, one needs to know the respondents. There were forty-three respondents interviewed for the study. All of them are natives of Basilan and live in Barangay Bato Lamitan Basilan, Philippines. Their educational attainment ranges from elementary level to college graduate. Three fourths of the participants have been employed for most of their lives. Their occupation varies from being a sari-sari store vendor to being a nurse. Based on their education, occupation and place of residence, the respondents mostly belong to the lower middle to upper middle class.

BELIEFS AND PRACTICES REGARDING FEMALE CIRCUMCISION AMONG YAKAN TRIBE

By using handwritten notes, the researcher was able to amass a large quantity of verbal response to the research questions. The general interview guide allowed for some freedom in the interview but kept the conversation focused. When transcribing the data, she eliminated extraneous, unrelated comments as she went along rather than transcribing verbatim. This process was more expedient and allowed her to pull from the handwritten notes only those data she felt relevant to the study. Specific responses to the interview questions were first transcribed under each participant's code (their initials). Next, all the participants responses were combined under each question. This enabled the researcher to identify commonalities among the responses and moreover, to identify themes that had emerged.

The following section includes the answer to research questions, questions from the general interview guide that were used to answer that question, interpretations of the answer to the research question, and verbatim responses used to document this interpretation.

The belief model has been widely used to explain whether or not people change to participate in certain health behaviors. The main components of the model are individual perceptions: perceived seriousness and susceptibility, modifying factors such as demographic or sociological variables, and, likelihood of action cause such as perceived benefits and perceived barriers.

Specific answers of each respondent are outlined below:

Person performing female circumcision (Kah Dayang)

The researcher interviewed three persons performing female circumcision. Although these three Kah Dayang have different sources on how they acquired their knowledge regarding female circumcision, all have the same idea on performing the practice. Their basis of this belief was also similar- the Holy Qur-an.

The first Kah Dayang that the researcher interviewed was a woman of about 79, with a strong featured face, and alert eyes that she kept in continuous, intense contact with the researcher as she talked. She gave the impression of intelligence and was delighted to share her knowledge regarding female circumcision. Kah Dayang Jainab admitted that she actually learned the practice of female circumcision from her grandmother who is also a renowned Kah Dayang. Her grandmother focused more on teaching the prayers recited during the circumcision because she already has some idea on the procedure, since she watched her do it many times before. When she learned everything about the practice her grandmother passed away at the age of 81. She was 27 years old at that time and eventually continued performing female circumcision, the most important prowess her grandmother handed her.

Being 52 years in practice Kah Dayang Jainab believes that female circumcision has no negative effect to women. Instead this practice means dignity and honor for them. When asked regarding the source and basis of her belief, she claimed that she owed everything to her grandmother and the Holy Qur-an where hadiths (a collection of the saying and acts of prophet Mohammad S.A.W) are found rationalizes the continuation of her practice.

In performing female circumcision, Kah Dayang Jainab usually started it with *Pagpandih tawal* (bathing process) to the child. During the *Pagpandih, tawal* (verbal prayer) is recited as a whisper to the child's ear while pouring water to the child's head. This *Pagpandih tawal* is designed to produce a particular effect on the child's emotion to be prepared for the upcoming ceremony. It is done to calm and free the child from being nervous. One hour after the *Pagpandih tawal*, the actual female circumcision ceremony is started. This is usually done inside a *luku* (white garment used for praying by women). The Kah Dayang and the 5 year old child stayed inside the *luku* for not more than five minutes. According to her, she just had a little scraping in the child's labia majora making sure not to bleed. After the scraping a *tawal* is recited again in whisper directed to the child's genital organ. This is usually performed to provide blessing to the child that she is now considered Islam and can now pray in the proper fashion and read the Holy Qur-an.

Kah Dayang Jainab believes that female circumcision is considered to be a cleansing rite that enables Muslim women to pray in the proper fashion, can read the holy Qur-an and

can live with dignity and honor in the community.

This next female circumcision performer is a fifty six year old woman, a native of Bato-Bato Tuburan Basilan, Philippines. She has no formal schooling, who knew only of reading the Holy Qur-an. She is a constant traveler to Malaysia where her knowledge regarding female circumcision came from. This skilled Kah Dayang was very cooperative that she told her experiences and knowledge regarding this practice in a tone of excitement. She grew up until 26 years old in Malaysia and came to the Philippines at that age as well. In that place her grandmother passed this prowess to her and several sacred prayers like *ilmoh*. These sacred prayers were handed down from generation to generation, until it reached her and eventually was practiced by her. She spent years to learn the prayers because they were in arabic words, and were hard to learn. *Ilmoh* is a prayer given to lucky and entrusted people and she was one of those few fortunate to learn and use them appropriately when she arrived in Basilan. Because of several years of witnessing the practice, it was not hard for her to learn it all. According to her the basis of her grandmother for this is a Kitab (book on Islamic teaching). The contents of this Kitab was from the Holy Qur-an. She started performing female circumcision at about 30 years old in Basilan.

Being twenty-six years in practice she is in favor of female circumcision. According to her there are benefits in performing the practice the most important of which is religion-wise. She believes that all women should be circumcised because it is Mohammad who taught them to do this as stated in the Holy Qur-an. After the female circumcision ceremony, Kah Dayang Taas believes that this is the right time to teach girls the rules and regulation in relation to Islam. She also added that female circumcision gives the woman her female identity, allowing her to take part in reading the Qur-an and pray to the mosque.

In doing the female circumcision ceremony her technique was the same with that of the two Kah Dayang in which there are two parts.

Kah Dayang Taas ended the researcher's interview reiterating that female circumcision is obligatory for all Muslim women, so that she could pray regularly and perform other religious duties, and can now strengthen her knowledge in Islam by reading Qur-an and books in Islam.

The last Kah Dayang the researcher interviewed was a forty six year old woman, Hadji Habiba Abdulla popularly known as Kah Dayang Poh. Born in Lamitan, Basilan, this forty six year old woman is a widow, with 9 children. She started performing female circumcision at the age of 19 years old in one of the Barangays in Basilan. Kah Dayang Poh reached 1st grade in her formal schooling but had stopped when she entered Islamic school.

After she finished Islamic school at the age of eighteen, people started to call her Kah Dayang because of the prowess of performing female circumcision which was taught by her Islamic teacher during her Islamic school days. She was proud of her Islamic teacher, Kah Dayang Poh was delighted to share her source of ability to perform female circumcision.

“ My religious Islamic teacher was a renowned Islamic mentor. She was one of the best teacher in our Islamic school at our place. Several children rushed to her for help in reading Qur-an and Islamic teachings, and she does not refuse them even without payment”.

During her Islamic school days being a favorite student, Kah Dayang Poh always accompany her mentor whenever she is called to perform female circumcision. She observed how she did it and asked her so many questions that finally convinced her mentor to teach the procedure. The enthusiasm she had in learning the practice, was her great medium to learn female circumcision.

Using her mentor as a source of her belief she claimed that Qur-an is still her basis. According to Kah Dayang Poh, female circumcision is one of the characteristics of the fitrah (the natural state of man) which is written in the Holy Qur-an. It is also one of the symbols of Muslim women because it is also narrated in the hadiths that the characteristics of fitrah are five: Circumcision for both men and women, shaving the pubic hair, trimming the mustache, cutting the fingernails and plucking the armpit hairs. So circumcision is one of the characteristic of the fitrah hence it is obligatory and should be practiced.

Kah Dayang Poh believes that when female circumcision is done, the most important part is the cleansing rite or scraping process plus the uttered *tawal* to the girl's ear. Although *Pagpandih* is also done by Kah Dayang Poh, she does not have any prayer in doing it. According to her she incorporates all the prayer during the actual ceremony.

Kah Dayang Poh ended her interview with the researcher saying that female circumcision symbolizes a person being ready for adult responsibilities in the near future because of her prayers and also the individual's acceptance as a full member of Islam. Table 1 summarizes the beliefs of Kah Dayang regarding the practice.

Table 1. Beliefs of Person performing female Circumcision (Kah Dayang)

A. For Dignity and Honor
B. Cleansing rite that enables Muslim women to pray in the proper fashion, can read the holy Qur-an.
C. Right time to teach girls the rules and regulation in relation to Islam.
D. Marks the woman of her female identity, allowing her to take part in reading the Qur-an and pray to Mosque.
E. Obligatory for all Muslim women
F. Symbolizes a person being ready for adult responsibilities in the near future.

Religious leaders

There were five religious leaders interviewed for this study. These religious leaders were members of the community and played a great role in promoting Islamic laws. All of the religious leaders believe that female circumcision should be practiced. This practice has religious backing and is justified in the *hadiths* (words of Mohammad S.A.W), written in one of the *ayat* (page) of Qur-an. According to Imam Pindatun (one of the religious leaders), female circumcision has already been a practice at the time of Mohammad S.A.W. Mohammad encouraged female circumcision for all Muslim women.

According to these religious leaders there are multiple reasons why women should practice female circumcision. They should practice it for cleanliness reason, dignity and honor. However, the primary reason is for the practice of *Sunnah*. *Sunnah* is the way the prophet lived it. It is written in the Qur-an in providing guiding principles to Muslims. As Mohammad and his wife Sitti Fatima were circumcised, all Muslims are obligated to be circumcised as well. Every Muslim is expected to follow the way of life of prophet Mohammad (peace be upon him). Therefore all Muslims should observe this practice. Women are obliged to follow this because it is Allah's message in the holy Qur-an. The prophet also said this in his hadith and their wives did it as proof of their dedication to Islam. Without it none calls herself a Muslim.

In doing the practice, it was also described in the Qur-an that scraping the external female genitalia assuring not to bleed is obligatory. Religious leaders further explained that

female circumcision should be practiced since it is among the rites of and part of *fitrah*, or the innate disposition and instinct of the human creation. The prophet (S.A.W) means by *fitrah* is that if these characteristics are followed by women, she would be described a woman of *fitrah* so that they attain a high degree of respectability and dignity.

When asked if they are in favor of this practice, all of them answered that the practice should be continued. There were no sound reason that it causes harm to women. It is found in Qur-an, in one of its hadith. They added that when the person performing female circumcision will do this, they should not overdo it or provide bleeding. Female circumcision has its beneficial effect when not overdone which includes cleanliness and you can now be called an Islam bringing honor and dignity to yourself and your family. Table 2 shows the beliefs of religious leaders regarding female circumcision.

Table 2. Beliefs of Religious leaders regarding female circumcision.

A. Cleanliness reason, dignity and honor.
B. For the practice of <i>Sunnah (is the way the prophet lived it)</i> .
C. It is obligatory because it is written in the holy Qur-an.
D. Rites of <i>fitrah (fitrah means that if followed by women, she attained a high degree of respectability and dignity)</i> .

GIRLS WHO WILL UNDERGO FEMALE CIRCUMCISION

Girls five years old and above were interviewed before undergoing the female circumcision ceremony. Before the respondents went into the actual female circumcision ceremony, the researcher was with them digging for answers which the researcher thought is not likely to be proved successful. All of them had a look of consternation on their faces. It was even difficult for the researcher to distinguish between their fear and anticipation and their annoyance with the camera. Though they looked with a piercing eye they were able to answer wise-beyond their years what the researcher needed to know regarding their perception and their emotion as they are going to go through the ceremony.

When asked on why they practice female circumcision, their response was always that this was how it had always been done, so it must continue to be that way. Sima one of the girls also emphatically replied that it was to "mark their passage into adulthood". They even bolted in an echo that only after a girl is circumcised is she considered ready for marriage and

the community shuns those who refuse the procedure hence they are doing this.

All were in favor of the practice intending precisely what their Islamic teacher had informed and told them. Sarah believed that they "should endure circumcision because if you are not circumcised you cannot go to the mosque to pray or you cannot even start to read the holy Qur-an". It is also a common knowledge in this group of girls that female circumcision is considered to be a cleansing rite so that they would grow up in a right way and most importantly not marry at an early age. Table 3 shows the beliefs of girls who were to undergo female circumcision.

Table 3. Beliefs of Girls who were to undergo female circumcision regarding the practice

A. Mark their passage into adulthood.
B. Considered ready for marriage.
C. Community shuns those who refuse the procedure.
D. If you are not circumcised you cannot go to the Mosque to pray or you cannot even start to read the holy Qur-an.
E. Cleansing rite
F. They would grow up in a right way.
G. Not marry at an early age.

FEMALES WHO HAD UNDERWENT FEMALE CIRCUMCISION

Majority of the respondents came from this group. The researcher had extended difficult, rigorous and time consuming in depth interview and group discussion with them. This group which consisted of the adolescents, reproductive age, elderly woman, educated and non-educated have common knowledge when asked about female circumcision. Though these respondents came from different demographic status in the community their perception regarding female circumcision were all similar. As the researcher explore these reasons it emerges that this group of people entered the same Islamic school (within the community). This Islamic school focuses mainly on teachings of Islamic law and one of this is female circumcision.

Based on inquiry process this females had always assumed that female circumcision is not an ancient practice but they knew that this has been justified in the name of Islam and has religious basis. This knowledge was taught to them by their Islamic teacher. These women basically knew that Qur-an is the basis for doing the practice.

Nursiya one of the females said that "In Basilan, local interpretations or religious

doctrines are used to rationalize continuation of the practice. It is actually mentioned in the Qur-an in one of its hadith that it is obligatory”.

This group of respondents believed that after female circumcision, you are like shedding your skin and reborn. It is a cleansing rite which every woman should do. Bining also mentioned that an "uncircumcised person, no matter how old she might be, will generally be regarded as a child, without wisdom, will be seen as inferior to others and not being blessed".

The right time to undergo female circumcision varies from 5-8 years old. Though they had experienced this practice at a younger age, these women spoke very positively about the experience of female circumcision. Descriptions used by the women are exciting, enjoyable, happy, fulfilling, wonderful, special, good and easy. They were all in favor of the practice since their life has become blessed. Not only they are named Islam but can also perform Islamic act. They had the benefit of being pure, clean and dignified. Specific examples of this positive attitude include:

Samia said: “it was a pretty enjoyable experience. I was glad I had a chance to experience what I thought was worthwhile”

Laila said: “it was a very special time. You realize how miraculous the process is. It was such a pleasant time”.

Jubs said: “I was extremely happy since I can pray regularly after the female circumcision. I felt wonderful, physically and psychologically”.

The emotional status varied among the respondents. They described their experience as being exciting and wonderful but at the same time, worrisome and scary. It seemed that they wanted to be positive and optimistic about the practice but for various reasons found they were hesitant. Some remembered the tolerable pain of female circumcision.

Baby said: “I was excited but of course extremely nervous”.

Indah: “I was worried the whole time I was being circumcised. After the ceremony, it was really exciting and the pain was tolerable”.

The most consistent positive comments seemed to be in the category of psychosocial aspects. Here the respondents cited patience, tolerance, knowing oneself, and having already lived as being privileged having been circumcised. They stated that they really wanted to be circumcised and were willing at this point in their lives to be circumcised because this practice will imposed some restrictions and seemed to give new meaning to their lives.

Rasmiya: “With out circumcision, it felt like, I am not doing something for my religion and my life which is not blessed. Now there's a purpose to all of this”. Table 4 shows

the beliefs of females who had underwent female circumcision.

Table 4. Beliefs of females who had underwent female circumcision regarding the practice

A. Religious doctrine is used to rationalize continuation of the practice.
B. You are like shedding your skin and reborn.
C. Cleansing rite.
D. If not circumcised, she will be regarded as a child, without wisdom, will be seen as inferior to others and not being blessed.
E. Life becomes blessed.
F. You can perform Islamic act.
G. Being pure, clean and dignified.

YAKAN MALE PERCEPTION REGARDING BELIEFS AND PRACTICES ON FEMALE CIRCUMCISION

Another series of interviews was carried out with Yakan men married to circumcised women, most of whom had never had a conversation in a form of an interview to a researcher before, and certainly not one that dealt with their sexual and marital histories. The researcher was certainly fulfilled that none of the men she approached refused to be interviewed. When the researcher first expressed interest if they are in favor of the practice, they assured her that there was nothing wrong with female circumcision. Accordingly, female circumcision during their Islamic schooling was already taught to them by Kah Dayang. They believe that it is found in the Holy Qur-an and is obligatory.

According to Rakib, one of the respondents “Muslims believe that Holy Qur-an is Allah's direct revelation and the first source of guidance concerning righteous living, the example set by the prophet Mohammad in his lifetime and handed down in writings known as the hadith is a secondary basis. Thus, Muslims are expected to respect and follow these actings of prophet as much as possible.”

Shaide prefers to marry a circumcised woman because they believe that if a person which is not circumcised has children, that act is believed to anger both Allah and the spirits of their ancestors, and the whole community will suffer in consequence. There would be a drought, for example in terms of money, because someone who was not circumcised had made a child. Female circumcision therefore for this group of respondents was necessary for

maintaining relation with ancestors and Allah. If not, their health will be at risk.

Salim also believes that in marrying a circumcised woman, they will surely marry a pure, dignified woman. Female circumcision according to Hapiz is girl's transition from childhood to womanhood. With it comes the lifting of the taboo on pregnancy and good relationship in their married life will swiftly follow. The researcher also found out that they are still capable of normal sexual response. Table 5 shows the beliefs of Yakan males regarding the practice.

Table 5. Beliefs of Yakan males regarding female circumcision

A. It is Allah's direct revelation.
B. First source of guidance concerning righteous living.
C. If a person marries an uncircumcised woman, it will anger both Allah and the spirits of their ancestors and the whole community will suffer in consequence.
D. Will surely marry a pure, dignified woman.
E. Girls transition from childhood to womanhood.

FEMALE CIRCUMCISION PROCEDURE

Female circumcision is a part of the legal body of Islam. It is an Islamic law. In Basilan, local interpretations of religious doctrine are used to rationalize continuation of the practice. It is mentioned in the Qur-an or hadith (a collection of the saying and act of prophet Mohammad) that it is obligatory according to religious leaders.

A belief that the practice is religiously significant has justified its continuation. According to Imam Pindatun, it only contradicts religious tenets if it involves cutting and release of blood from the point of scraping. Girls who live in this province are most likely to undergo female circumcision because of an obligatory task and their access to Kah Dayang (the one performing the circumcision).

When the researcher heard that female circumcision will be conducted at Barangay Bato, she hurriedly made her way to the place where she can witness and observe the female circumcision ceremony. When she arrived at the place, she negotiated with the Kah Dayang to observe the ceremony. The Kah Dayang expressed concerns that she cannot photograph

children who would be naked. She added that covering the *awrah* (private parts) is obligatory. Islam dictates that *awrah* should be covered and forbade the researcher to uncover it. She told the researcher that photographing the actual scraping process is forbidden. So the researcher agreed and began shooting what proved to be a frenzied event. She also asked the Kah Dayang if she could go inside the female circumcision with the camera because she wanted to see the actual ceremony- not the scraping process so that she could accurately report what occurred during the ceremony.

The researcher was surprised when the girls aged 5-8 years old arrived early for what they think the first and only surgery in their whole lives, lasting anywhere up to not more than 20 minutes. Some girls arrived with their parent, sisters and sometimes grandparents as early as six in the morning. They arrived early even though the circumcision is 31/2 hours away. When the time arrives, the girls formed a line on a “first-come-first-served” basis. The girls were ushered into the place (a living room), all were bathed by the Kah Dayang. She instructs them to take off their underwear. Most of the girls were unable to contain their anxiety, and often feel faint.

The procedure described in the succeeding paragraph was based on observing Kah Dayang Jainab, who has been practicing female circumcision for nearly 52 years. After properly observing using notes and a video camera, the researcher asked the Kah Dayang to describe the procedure, which has been confirmed by two more Kah Dayang, Kah Dayang Poh and Kah Dayang Taas.

Materials used for female circumcision and their meaning:

- Luku- this is a white garment used to cover the actual scraping procedure. It should be white colored to symbolize purity and wholeness.
- Glass bowl- where to put the one kilo rice. This bowl symbolizes that blessings will be contained in your hands throughout the year.
- Rice- one kilo rice to symbolize abundance of blessings.
- Candle- the candle is blowed by the child after the ceremony to drive away bad spirits in her body for the entire life.
- cotton-symbolize purity.

Position of the entire process: The Kah Dayang and the girl should face the Kibla (sunrise) so that human affairs will not be out of order later on.

The female circumcision procedure involves two major parts. First, is the Pagpandih (bathing process) and second is the Pag-Islam (scraping process).

1. Pagpandih- this process starts an hour before the scheduled time of the scraping process. In this process the Kah Dayang whispers a tawal (prayer) to the child's ear while pouring water on the child's head. This lasted for about 3-5 minutes.

2. Pag-Islam (scraping process)

When every material is in place, the Kah Dayang and the girl is already facing the Kibla, the ceremony can now be started. Both will enter the luku. The Kah Dayang with her small knife sits in a flexed position instructing the young girl to sit in a semi-fowler's position. The Kah Dayang will now begin to scrape the labia majora of the young girl, doing it very gently, making sure not to cause any bleeding. When the labia majora is already erythematous, she will stop doing the scraping and will put cotton on the scraped site. The cotton should stay there for almost two hours. The Kah Dayang will now utter a tawal (prayer) to the child and ends the female circumcision ceremony. Both will leave the luku (white garment), the guardian of the child should fix the luku in a very orderly fashion so that the life of the child will not be out of order in the coming years. The child will now blow the candle, to drive away bad spirits in her body. The guardian of the child will also give sadaqqa (alm) to the Kah Dayang. The Kah Dayang will now instruct the mother to remove the cotton in the child's labia majora after two hours. This cotton should not fall because the Kah Dayang believes that the fall of the cotton also marks hard headedness of the child. The cotton after 2 hours should be put inside a small bottle and kept. After all of these, the Kah Dayang will again conduct a prayer, which marks the end of the ceremony.

PERCEIVED PHYSICAL AND MENTAL HEALTH IMPLICATION

To outsiders, the practice euphemistically known as female circumcision is shocking. That people surgically alter the genitals of young girls and women, usually in painful and unhygienic procedures can cause grave harm to their health seems truly horrible. Then the researcher stumbled upon writing that in Basilan, there was another approach they are using for female circumcision procedure. The scraping approach and their basis using the Holy Qur-an has forged its own version to strengthen the foundation of this practice. Perceived negative effects of female circumcision like bleeding, vulvar inflammation, irregular menses, infertility and problems in urination were not seen even after the practice. The only physical health implication of female circumcision in Basilan was the tolerable pain described to be

dull and rated 3 by the respondents as average (characterize pain from 1 to 10. 1 with no pain and 10 excruciating pain). This was caused by the scraping procedure.

Positive descriptions described by the respondents include wonderful feeling, good experience, feeling healthy through all of it, having more energy and an easy practice. They also felt pretty good and did not have any problems at all.

However, there were also some negative descriptions described by the respondents. One respondent said it was a struggle from the day her mother had informed her. Another respondent claimed that she is more aware of her own mortality. She was afraid of the consequences that would happen to her.

Regarding the mental health status, there is positive effect on their psychosocial aspect. Positive descriptions of respondents regarding mental health status include being excited and extremely happy. They also mentioned that it was a very special time. After the circumcision they mentioned that they would take their life more seriously, with social maturity. The respondents also believed that you can practice your religion and you know about yourself already. Some negative description regarding mental health status includes being worried the whole time and scary. Some mentioned that it was a roller coaster, which made their hormones kicking in and also an emotionally charged time, which made them cry a lot.

The emotional state of the women ranged from excitement to fear. Health risk and consequences basically depends on the type of the female circumcision and the hygienic conditions. In the Philippines the skill of the Kah Dayang made this practice more tolerable with no health implications noted. However, the use of unsterilized knife might have consequences and may add susceptibility to tetanus infection. The erythematous labia majora may also lead to vulvar inflammation and infection, which should be given attention in this practice.

The above mentioned negative effects of the Yakan female circumcision practice in the Philippines differs from other country and society. Countries such as the Western and Southern Asia, the Middle East and large areas of Africa had adverse health consequences, which condemns the practice. Definitely they follow the type I, type II and type III major types of female circumcision as described by the World Health Organization. The severity of this practice ranges from the partial and total removal of the external genitalia, which in turn can cause major bleeding, scarring, narrowing and tightening of vaginal orifice and tetanus.

Female circumcision in countries like Africa, Middle East, Egypt, Mozambique, Botswana and Lesotho has health implication because of its form and severity. Based on its severity, they follow the type I, type II and type III major types of female circumcision as

described by the World Health Organization. Cases of excision are therefore common throughout these countries. Because of this, the practice has severe medical and psychological consequences for the girls and women on whom it is performed. This is the main reason that government, international human rights bodies, and non-governmental organizations have engaged in efforts to eradicate the practice of female circumcision.

Infibulation (type III), the excision of part of the external genitalia and stitching/narrowing of the vaginal opening remains customary in Somalia, Ethiopia, Sudan, Kenya, Nigeria, Mali, Burkina Faso (previously Upper Volta) and parts of the Ivory Coast. This practice is an infringement upon the physical and psychosexual integrity of women and girls and is believed to be a form of violence against them thereby condemning the practice in this country. Although little information is available, it has been documented that Muslim populations in Malaysia, Pakistan, Brazil, Mexico and Peru also practice this procedure.

Through this study, female circumcision in Basilan Philippines was confirmed to be existing. It was evident that in this country female circumcision is a form of cleansing rites and acceptance in the community. It has religious backing in which the Holy Qur-an was their basis. A religious leader mentioned saying that “*Innaddina indallahil-islam, nawaitu al-islamia fardhan lillahi* “ (*a female should be circumcised because it is obligatory, so that she can be called an Islam because its is being asked by Allah*) which was found in one of the hadith in the Holy Qur-an. The practice in the Philippines differs from other country because they follow the type IV female circumcision procedure of the World Health Organization, found to have no mental and physical health implication to the women. The scraping technique, a usual practice in the Yakan tribe of Basilan for several years had no imposed women’s health implication hence this practice in their community is continuously working even though several countries are already banning it.

In Basilan, based on the WHO definition of the female circumcision the Yakan tribe embodied a type IV-unclassified type. This includes the scraping of the labia majora without any bleeding. This makes their practice more tolerable with no major health implication noted.

To sum up the situation presented in this research means that female circumcision in Basilan which is closely linked with religious duty, is not going to vanish even if other countries ban this practice. The findings of this study point out that this practice differs from other country. There is no established health implication among women regarding female circumcision in the Philippines.

CHAPTER V

CONCLUSION AND RECOMMENDATION

This qualitative study was conducted to provide a descriptive report on female circumcision beliefs and practices among Yakan of Basilan, Philippines. After a month of committing extensive time in the field, the researcher was able to collect extensive data, engaged in the complex, time-consuming process on data analysis and finally was able to describe all the information needed to present a detailed view of the female circumcision beliefs and practices in the Philippines.

In this qualitative study, established core characteristics of beliefs and practices were gathered and documented. The respondents believe that the practice speaks for dignity and honor. It is a cleansing rite that enables Muslim women to pray in the proper fashion and can read the Holy Qur-an. They also believe that this is the right time to teach girls rules and regulations in relation to Islam, the person also will be ready for adult responsibilities and considered ready for marriage. This practice should also be done because it is the way the prophet Mohammad live it and most especially it is written in the Holy Qur-an. Being a Yakan which follows Islam religion they believe that they are expected to follow the way of life of prophet Mohammad S.A.W. The rationale of their beliefs are based on religious doctrine that this practice is written in the Holy Qur-an. During the actual female circumcision, Yakans have great respect on the privacy of the child. They believe that it is forbidden to show the awrah (private parts) of the girl.

The Yakan tribe exemplifies a female circumcision procedure with two parts and embodied a type IV type of female circumcision - the scraping technique. The first part is the *Pagpandih tawal* (bathing process) designed to utter *tawal* (whispered prayer) to the child's ear to prepare the child for the upcoming ceremony. The second part is the *Pag-Islam* (scraping process), a process which embraces scraping of the labia majora. After the *Pag-Islam* another *tawal* is uttered which marks the end of the female circumcision practice of the Yakan tribe.

Basically, there is no established mental health implication concerning this practice. Physical health consequences involves tolerable pain of the vulva due to the scraping process.

The following recommendations may be useful to other researchers who would like to conduct socio-cultural related studies so as to better understand other tribal groups in terms of unusual practices existing in our country like female circumcision.

1. A documentary and comparative study regarding female circumcision beliefs and

practices will be done with that of Tausug, Samal and Badjaos to delineate the similarities and differences. Through this, researchers would be able to explore if female circumcision on other tribes have health implications.

2. The girls who underwent female circumcision should also be given health education by health professionals on how to avoid vulvar infection and should immediately report fever and persistence of pain or any other unusual events after the practice.

3. The necessity for health care providers to be aware of this practice should be enhanced. The health implications of this method should always be entertained. This can lead to vulvar inflammation, vulvar infection and tetanus which can impose health risk to girls undergoing the practice. Still, there is a great possibility that girls undergoing female circumcision might seek their professional medical help. The Kah Dayang should develop awareness on impose health risk consequences in employing scraping technique using unsterilized knife.

BIBLIOGRAPHY

Books Sources

Baker, C. A., Gilson, G. J., Vill, M.D., & Curet, L. B.1993. *Female circumcision: Obstetric issues*. American Journal of Obstetrics and Gynecology.

Ben-Ami, F.1997. *Female genital mutilation: Balancing intolerance of the practice with tolerance of culture*. Journal of Women's Health.

Dorkenoo, E. & Elworthy, S. 1996. *Female Genital Mutilation: Proposal for Change* (2nd ed.). United Kingdom: Brixton Graphics.

Elchalal, U., Ben-Ami, B, Gillis, R., & Brzezinski, A. (1997). *Ritualistic female genital mutilation: Current status and future outlook*. Obstetrical and Gynecological Survey.

Gilliz.1997. *Female "circumcision"*. Journal of General Internal Medicine.

Inhorn, M. & Buss, K. 1993. *Infertility, infection and iatrogenesis in Egypt: the anthropological epidemiology of blocked tubes*. Medical Anthropology.

Jones et. al.,1997. *Female Circumcision*. Oxford University Press, New York.

Jones, W. K., Smith, J., Kieke, B., & Wilcox, L. (1997). *Female genital mutilation: Who is at risk in the U.S.?* Public Health Reports.

Klein, H. 1989. *Prisoners of Ritual*. New York: Harrington Press.

Mackie, G. 1996. *Ending footbinding and infibulation: a convention account*. American Sociological Review.

Majid, et. al.,2001. *Traditional Ritual Practices in the Philippines*. Journal of religion and Health.

McCaffrey, M. 1995. *Female genital mutilation: Consequences for reproductive and sexual health*. *Sexual and Marital Therapy*.

Morris, R. 1996. *The culture of female circumcision*. Advances in Nursing Science.

Neille, B. et al.,2003. *Female Circumcision Study: Implication for Women's Health*. American Journal of Public Health. Volume no. 3. New York Washington DC.

Taylor, et. al.,1999. *Female Circumcision and Health Consequences*. Washington DC.

Toubia, et. al.,1995. *Health Complications of Female Circumcision*. 2nd Edition. Mayfield Publishing Company USA.

Electronic Sources

www.gendwaar.gen.in.pn.beliefs.com *Beliefs and Practices regarding female circumcision*.

www.hri.ca/fortherecord1997/documentation/subcommission.

www.mc.maricopa.edu/dept/d46/psy/dev/Spring02/female_circumcision/index.html
Female circumcision and its effect on women's health.

www.medicinalremedies.com/research.html 1997.

www.metagenics.com/resources/imc/OneMedicineCons/ConsHerbs/Turmericch.html
Copyright © 2009 OneMedicine.

www.rhgateway.org/query.html. *Psychosocial effect of female circumcision.*

www.salisbury.haitiansult.femcirc.com. *Female circumcision Beliefs and Practices.* 2007