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LIST OF ABBREVIATIONS:

FGM = Female Genital Mutilation

NGOs = Non-Governmental Organizations

MSF = Médecins sans frontières

UN = United Nations

UNFPA = United Nations Population Fund

INDEX

Figure 1: AKTION REGEN – Dr. Ines Kohl – CLITORIS TOOL of AKTION REGEN

(<https://www.aktionregen.at/fr/outils/> consulted on the 27.02.23)

Figure 2: 2023, AKTION REGEN, Dr. Ines Kohl, Private Archive - A RAIN WORKER explaining the Clitoris to young girls, women, boys, and men.

Table of Contents

I.	INTRODUCTION	3
II.	THE PRACTICE OF FGM AND THE ROLE OF NGOS WITHIN ANTHROPOLOGY	5
1.	HISTORY, DEFINITION, AND TYPES OF FGM.....	6
2.	PREVALENCE AND SOCIO-CULTURAL IMPLICATIONS OF FGM.....	9
3.	PROCEDURE AND MEDICAL CONSEQUENCES OF FGM	13
4.	THE ROLE OF NGOS	15
III.	ANALYSIS AND DISCUSSION	17
1.	ANALYSIS OF THE ROLE OF NGOS IN TACKLING FGM IN VIENNA	17
2.	THE IMPORTANCE OF UNDERSTANDING THE CULTURE IN THE NGOS IN VIENNA	24
IV.	DISCUSSION	28
1.	LIMITATIONS	28
2.	IMPLICATIONS	30
V.	CONCLUSION	31
VI.	BIBLIOGRAPHY	33
VII.	DOCUMENTATION AND APPENDIX PART OF AN INTERVIEW TRANSCRIPTION	35

I. Introduction

I will never forget that day. I was presented to a 19-year-old Somali woman in the delivery room. She was expecting and getting ready to give birth. Since she didn't speak German or English, I realized there would be a communication issue. However, it had little impact. We progressively developed a rapport and relationality with one another over the course of a few hours. Her contractions progressed and became more frequent. This indicated that the newborn would arrive shortly. It provided as a cue for me to examine her and gauge her progress. I was shocked and unsure of how to respond to what I was seeing. Her clitoris and small lips were cut off, and her scar tissues healed in a way that her vulva didn't look as it should normally be. This was the outcome of female genital mutilation. The birth was fairly challenging due to anatomical complications. Scarification of the skin that has not properly healed is one among the numerous complications FGM has on women. Because the tissues are so tense, it is difficult for women to give birth through the vaginal canal. The psychological pain that FGM can inflict on women makes this magnificent event traumatizing and even deadly. Although a baby girl was born. The young woman then asked me if I wanted to cut the umbilical cord, and I said yes. The midwife who had assisted the birth afterwards explained what I had just witnessed. She told me that we had to provide as much comfort as we could for the migrant women's who were coming to birth because several of them were cut. Although she presumably didn't fully understand why it was done, she didn't go into great detail. It is important for NGOs, to take in consideration that it is important to raise awareness in communities where FGM in practice to ensure that women learn about their own rights, their own sexual and body autonomy and also that even if they do not practice FGM, their value as women cannot be diminished despite the cultural pressures that shaped them.

The literature on female genital mutilation draws upon the biological, historical, and cultural analysis within the field of anthropology. In this dissertation, by focusing on the historical trajectories of FGM, and on the abilities of NGOs to tackle it, I aim to demonstrate the multi-faceted implications of such a dangerous, yet deeply embedded cultural practice. The premise of my analysis focuses on NGOs such as Médecins sans Frontières (MSF), AKTION REGEN, FEMSüd and Wiener Programm für Frauengesundheit and their efforts in raising awareness about FGM. Therefore, I demonstrate how the NGOs located in Vienna fight against female genital mutilation, and what methods and campaigns they deploy in order to diminish the practice?

The subject of female genital mutilation and NGOs will be addressed using pertinent literature, empirical data gathered from Vienna-based NGOs: Doctors without Borders (MSF), AKTION REGEN, FEMSüd and Wiener Programm für Frauengesundheit and international NGOs such as WHO (World Health Organization), UN (United Nations) and UNFPA (United Nations Population Fund). The topic is multidisciplinary, drawing from the literature across several fields of social studies. A more in-depth theoretical and empirical analysis of the various aspects of FGM and NGOs is made possible by the multidisciplinary approach, illuminating and correlating concepts from medical anthropology, feminist activism, and institutional culture of non-governmental work. The empirical analysis of the interviews with Médecins sans Frontières (MSF), AKTION REGEN, FEMSüd and Wiener Programm für Frauengesundheit, serves as a promulgation of further debate on FGM within the field of anthropology.

A critical investigation of the appropriate literature and an examination of the empirical data collection is used to exemplify the NGO's approaches to FGM. An integral part of the theory is the discourse-analytical explanation of female genital mutilation. The second chapter examines FGM in further detail, as well as the function of NGOs within anthropology. In this chapter, I reflect upon FGM's definitions, history, and prevalence, while focusing on the socio-cultural effects it has on women. It is followed by examining the procedure used during female genital mutilation, and its medical ramifications before concluding with a discussion on the role of NGOs when tackling such culturally prevalent practice in developing countries.

The third and fourth chapters are dedicated to the perspectives and the function of NGOs in Vienna with regard to FGM. Through a series of interviews with Médecins sans Frontières (MSF), AKTION REGEN, FEMSüd and Wiener Programm für Frauengesundheit this chapter provides an overview of NGOs work and in which part of the world they are fighting against FGM and the crucial factors of understanding the culture of FGM withing the NGOs. This highlights the main concerns and contentious points of view around the subject. I also demonstrate more contemporary concerns, criticisms, and discussions around FGM and NGOs in Vienna, while also evaluating the various NGOs' efforts. Lastly, the fifth chapter discusses how non-governmental groups in Vienna combat female genital mutilation and what obligations they have to end the practice.

II. The practice of FGM and the role of NGOs within Anthropology

The body represents the quickest and most natural implementation of an individual, according to Marcel Mauss a French sociologist and ethnologist. He was Emile Durkheim's nephew. Durkheimian thought had significant impact on Mauss's work later on. He is considered the father of French anthropology. In the techniques of the body Marcel Mauss explains how individuals acquire and learn socially meaningful physiological behaviors. Mauss asserts that in addition to being a biological being, the body is also influenced by cultural and social forces (Valeri, 2013; p. 281). The way that people move, gesture, and utilize their bodies is impacted by social standards, cultural beliefs, and historical traditions in addition to personal preference and biological inclination (Valeri, 2013; p. 281). Therefore, what women feel and what are the repercussions of the practice in their life shows that the body is also influenced by cultural and social forces.

Understanding the social and cultural elements that lead to the practice of FGM can be done using Marcel Mauss concept of the method of the body. FGM is a physical procedure that learnt and internalized as a component of a broader set of cultural meanings and practice, but it is also reflects and reinforces social structures and hierarchies that place a higher priority on male dominance and control over female sexuality.

FGM is frequently regarded as essential step in a girl's socialization process in societies where it is practiced. It is seen as a rite the passage into womanhood and is said to encourage modesty, sexual chastity, and marriageability. FGM can be viewed in this sense as a bodily procedure that is internalized as a part of a larger system of cultural meanings and practices. According to Fran P. Hosken, a designer and American feminist activist, is credited with being a pioneer in the fight against female genital mutilation, the most frequent side effects of FGM, include reduced sexual pleasure, issues after childbirth, painful menstruation, urinary tract infections, and bleeding during surgery. FGM has no documented health advantages (Hosken, 1976; p. 8). Although it is uncertain where FGM originated, it is firmly ingrained in the traditions of many cultures, where it is linked to chastity, purity, and a rite of passage into adulthood. Due to social pressure and reasons of pride and honor, women typically perform the procedure.

Non-governmental organizations, or NGOs, have been instrumental in the fight against FGM. They have worked to advocate legal and regulatory changes, help and girls who have been harmed by FGM, and raise awareness of the practice. Another method that NGOs deploy with communities to shift attitudes and ideas regarding FGM is by promoting substitute ceremonies and practices that do not include the excision of female genitalia.

However, research by anthropologists has demonstrated that FGM is a significant and respected procedure for many women. Prazak is a specialist of East Africa's economic work and cultural transformation. Her work is mainly focused on examining problems such as gender-based violence, globalization, inequality, social, health and human rights. She strongly discusses the politics of the body. Coffman on the other hand is an ex-district judge for the US. Prazak and Coffman analyze that *"Female genital cutting (FGC) has been a topic of perennial anthropological interest because of the variability of its forms... While most commonly practiced in Africa, FGC became increasingly relevant in Western societies because of colonial entanglements, and it remains so as a corollary of migration and incorporation of populations with strikingly different cultural heritages"* (Prazak, Coffman, 2007; p. v). The concept that FGM is intractable is contested in the research *"The Twilight of cutting – African Activism and Life after NGOs"* of anthropologist Saida Hodzić, who also examines what occurs in a society where such a cherished practice is stopped. Over the past 30 years, there has been a substantial growth in the number of non-governmental organizations (NGOs) such as across Africa launching new campaigns to end the practice of FGM (Hodzić, 2017). FGM is consequently declining in frequency all throughout the world.

1. History, Definition, and types of FGM

According to Saida Hodzić, Female genital mutilation was not recommended in any religious text. She explains that *"This saying is frequently cited in debates about whether Islam requires cutting and in efforts to understand when and where cutting began; the passage is taken as evidence that Muslims practiced cutting in the seventh century and that it arrived in Africa from Saudi Arabia. I turn to this saying to highlight something of an entirely different order, which is that as early as the seventh century, cutting existed simultaneously with attempts to regulate it. In this case a religious authority was trying to modify and reduce the extent of the cut. We should*

assume that this was neither the first nor the last time before colonialism that authoritative historical figures weighed in on whether or how cutting should be practiced” (Hodzić, 2017; p. 49-50). As Raqiya D. Abdalla a sociologist and politician from Somali and Abusharaf a senior Professor at the Pembroke Center for Teaching and Research on Women at Brown University, mentions that, although its exact origins are unknown, FGM is believed to have been practiced in prehistoric Egypt, Ethiopia, and Somalia (Abdalla, Abusharaf, 2006; p.188).

Cutting procedures have a multifaced, broken and fractured past that reflects constant regulation, adjustment and intervention as declare the author Hodzić (Hodzić, 2017; p. 49). Female Genital mutilation was frequently repeatedly alluded as the female circumcision up until the 1980s, suggesting an equivalent to male circumcision. The word mutilation was used in the title of an essay by the American Anthropologist Rose Oldfield Hayes in 1975. She starts by introducing her essay by explaining the terminology of FGM: *“In the valley of the Nile in northern Sudan, the genitalia of young Arab Muslim girls are deliberately mutilated in such a way as to close off the vaginal opening almost completely. This custom is known as Pharaonic circumcision, or infibulation. The stated reason for the operation is to ensure a girl's chastity, thereby safeguarding the dignity and honor of her own and her future husband's patrilineages”* (Hayes Oldfield, 1975; p. 617). Doris Burtscher a medical anthropologist at doctors without borders explains in that the word *“purification”* is defined as *“tahura”* in Chadian Arabic. It is regarded as the young woman's introduction into society and significant to her future as a woman, wife, and mother. In the local dialect, the word *“tawdjih”* denotes initiation or orientation. It is the girl's traditional education and functions as a counseling tool. (Burtscher 2012; p. 18). Ellen Gruenbaum is an American anthropologist. She specializes in the researching of medical practices within cultures of societies. She explains that the word *“purification”* is usually translated from *“tahur”* or its variant *“Tahara”*, she refers to the attainment of cleanliness by ceremonial action. (Gruenbaum, 2001; p.4). She continues on arguing that the routine performing of the surgical act has little to do with ritual in a religious or spiritual sense. As a result, applying a label with a ritualistic connotation to the practices' diverse range of meanings and situations appears both wrong and insufficient. And other people find it offensive since it can imply that practitioners lack reflection or are not sensible (*ibid*, 2001; p.4). It is important to understand the terms of the signification of the different types of FGM. According to El Guindi, an Egyptian-American anthropologist the word *“sunna”* is an Arabic word that signifies the *“path of the Prophet”* (El Guindi, 2006; p. 38). The removal of the clitoral hood or

the partial or complete removal of the clitoris constitute Type 1 of FGM, which is frequently referred to as “*sunna*” circumcision (*ibid*, 2006; p. 38). Generally accepted, Islamic academics do not approve this use of the phrase since they believe it to be a distortion of the Prophet Muhammad’s teachings (*ibid*, 2006; p. 39). The vast majority of Islamic scholars agree that FGM is a cultural practice that predates Islam and has been embraced by some Muslims groups. “*These are recorded in compendia of hadith, Islamic narratives recorded by the Prophet's students, which are considered an important authority for Islamic teaching but, unlike the Qur'an, not divinely revealed*” and therefore has no support in the Qur’an or the Sunna of the Prophet Muhammad (*ibid*, 2006; p. 39). FGM actually harms people, which goes against Islamic values that place a high value on maintaining everyone’s health and well-being. As El Guindi discuss in the Chapter the word gives the practice legitimacy for the majority of Muslims; mostly in Sudan, despite the fact that it fails to state that it is necessary (*ibid*, 2006; p. 39). Sunna is a term that denotes an Islamic foundation without delving into the etymology of the language used to define the activity, and this validity is typically not disputed (*ibid*, 2006; p. 39). The justification for FGM in Islam is currently being investigated, but if Muslims concluded that there is no religious justification for it, therefore the tradition may be modified or abandoned outright. Giovanna Cavatorta and Michela Fusaschi two social anthropologists explain that “*The word circumcision when qualified as feminine, declined in the local languages, is one of the terms used by social actors to name those procedures which, in an anthropological approach, symbolically “work” on the genitals of the future women and participate in socially instituting their gender*” (Cavatorta & Fusaschi, 2020; p. 9).

It is crucial for NGOs to understand that the practice was not rooted from religious purposes. Due to the terminology of the word FGM it was shown the connection between the meaning of the word and the cultural part of the practice.

In addition, the UNFPA (United Nation Population Fund) adds some definition to the term as well:

“**Incision** refers to making cuts in the clitoris or cutting free the clitoral prepuce, but it also relates to incisions made in the vaginal wall and to incision of the perineum and the symphysis. **Deinfibulation** refers to the practice of cutting open a woman who has been infibulated to allow

intercourse or to facilitate childbirth.

Reinfibulation is the practice of sewing the external labia back together after deinfibulation. “¹

Based on the scope and nature of the practice, the WHO (World Health Organization) has divided FGM into four kinds. They include the following types:

“Type 1: *This is the partial or total removal of the clitoral glans (the external and visible part of the clitoris, which is a sensitive part of the female genitals), and/or the prepuce/clitoral hood (the fold of skin surrounding the clitoral glans).*

Type 2: *This is the partial or total removal of the clitoral glans and the labia minora (the inner folds of the vulva), with or without removal of the labia majora (the outer folds of skin of the vulva).*

Type 3: *Also known as infibulation, this is the narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the labia minora, or labia majora, sometimes through stitching, with or without removal of the clitoral prepuce/clitoral hood and glans.*

Type 4: *This includes all other harmful procedures to the female genitalia for non-medical purposes, e.g., pricking, piercing, incising, scraping and cauterizing the genital area.”²*

Since circumcision appears to devalue the harmful act and the enormous scope of its practices, many individuals reject female genital mutilation or circumcision (Gruenbaum, 2001; p. 4). “Neither term —mutilation or circumcision —is a translation of the Arabic word most commonly used for female circumcision in Sudan“ (Gruenbaum, 2001; p. 4).

2. Prevalence and socio-cultural implications of FGM

Female genital mutilation, or FGM, is the term used widely to refer to the act of removal all or part of a female's genitals. Due to the sociocultural context of their tribe, numerous areas will

¹ (2022, UNFPA, Female genital mutilation (FGM) frequently asked questions, https://www.unfpa.org/resources/female-genital-mutilation-fgm-frequently-asked-questions#practice_origins) (Consulted the 28.02.23 at 10:28)

² (January 2023, WHO, Female genital mutilation, <https://www.who.int/news-room/factsheets/detail/female-genital-mutilation>) (Consulted the 28.02.23 at 10:28).

expose girls from the age of 0 and 14 to that same practice.³ The practice is deeply rooted in social and cultural norms and is frequently seen as a rite of passage into adulthood in several parts of Africa. It is estimated that more than 200 million women and girls still living today have undergone FGM, with the majority of cases taking place in Africa and the Middle East. (Kandala, Ezejimofor, Uthman, Komba, 2018; p. 1-2). Additional research from a recent global study found that this practice existed in India, Indonesia, Israel, Malaysia, Thailand, and the United Arab Emirates. (Kandala, Ezejimofor, Uthman, Komba, 2018; p. 1-2).

On the authority of WHO, on a large-scale, national surveys have been conducted, questioning women between the ages of 15 and 49. There are significant differences amongst the nations, with prevalence rates exceeding 80% in eight of them. Furthermore, ethnicity is the most significant variable that differs throughout regions within nations. In their study of the “Secular trends in the prevalence of female genital mutilation/cutting among girls: a systematic analysis” *“This practice is regarded as a major national public health issue since it impacts the physical and mental health of more than half of Ethiopia’s population, which in turn also impacts the country’s socio-economic development”* (Anyanwu, Torpey, Abiodun, Sanni, Anyanwu, 2022; p. 2). In this sense FGM violates human rights and has detrimental effects on the social, psychological, and physical well-being of the women and girls who receive it. The physical symptoms might be painful, hemorrhage, infected, or even fatal. Examples of the psychological repercussions include post-traumatic stress disorder (PTSD), depression, and anxiety. Exclusion, prejudice, and less job chances are examples of social effects⁴. Doris Burtscher lights up about the socio-economic factors of FGM in her text *“SI TU N’ES PAS MORT TU AURAS UNE CEREMONIE APRES LA GUERISON, Local perception of Female Genital Cutting Salamat region, Am Timan District Chad”*, she says that while addressing about FGM, its *“economic representations”* is one of the main issues (Burtscher, 2012; 21). She lightens up that the families are honored, as the young girl for the cut. They are receiving gifts in order to show appreciation of the act. The practice is seen as a ritual, that the girl has to do, to be socially accepted for her community and from the others. She continues by showing of the symbol of chastity and explains that *“What counts is not the pain the girl has endured but the honor and*

³ (January 2023, WHO, Female genital mutilation, <https://www.who.int/news-room/factsheets/detail/female-genital-mutilation> consulted the 28.02.23 at 10:29).

⁴ (January 2023, WHO, Female genital mutilation, <https://www.who.int/news-room/factsheets/detail/female-genital-mutilation> consulted the 28.02.23 at 10:30).

reputation she gets through the cutting. For example, the dowry of a circumcised girl is greater than that of a non-circumcised girl“ (ibid, 2012; p. 21). Regardless of a wealthy urban household or a low-income rural family, it will also demonstrate the type of FGM the girl will experience.

As previously mentioned, FGM is a destructive practice that can lead to terrible consequences on the physical, psychological, sociocultural, and socioeconomic levels of women. Let's delve deeper into the specifics of each sector. Throughout history, the female body always sparked curiosity, conjecture, and objectification. Women's bodies have been utilized as symbols, tools of power, and sources of both pleasure and suffering since ancient times. Dualism was regarded as crucial in medical anthropology since it connected the body to something tangible and human. According to Rodger Brooke a clinical psychologist, he affirms that “...*dualism accounts for the endless acrobatics of object relations theorists, hypothesizing internal object passing back and forth across empty space. Descartes dualism is therefore not only between mind and body as functional dimensions of being because his formulation insists on resulting dualism that are our conceptual inheritance: inner-outer, meaningful-measurable, idea-evidence, experience-behavior, thinking-brain processing, experience-reality, theory, subjective-objective, ect.*” (Brooke, 2018; p. 657).

In a different way than psychologists do, anthropologists they “*focus on female gender*” as a cultural and biological construct that is influenced by societal expectation, conventions, and beliefs instead of (Cavatorta & Fusaschi, 2020; p. 5). People, both men and women, are always sexualized and placed as objects in society, thus the social construction of the body and gender involves operations that can have unacceptable results but that must be examined in the context of their socio-historical becoming. (*ibid*, 2020; p. 6). The bodily experiences of women and girls can be examined by anthropologists in relation to “*sexuality, kinship, asymmetries of power between genders and generation*” (*ibid*, 2020; p. 6). They for instance, research how cultural perspectives on women's experiences with menstruation, childbirth, and sexual health influence these experiences. They also research socio-economic aspects of women's bodies, such as access to healthcare, education, and career possibilities. These aspects are fundamental in anthropological studies and as well as considerate while discussing the topic of FGM. NGO's focus point are menstruation, Childbirth, sexual health as they are reflecting FGMs consequences on women.

In fact, FGM violates all of these by causing physical harm to women's bodies through patriarchal structures. It is vital to first analyze the causes of this practice, including who engages in it and why, before explaining the effects of FGM and the actions of NGOs against the battle against it. FGM mainly manifests as customary practices carried out on girls and women. FGM has been practiced for decades, especially in developing nations, and is deeply ingrained in cultural beliefs and views. Because it has been passed down through many generations, it is difficult to modify. (Anyanwu, Torpey, Abiodun, Sanni, Anyanwu, 2022; p. 2). It is as well seen as a rite the passage for young women in particular cultures. As the authors Cavatorta and Fusaschi mentions, the use of the term "*circumcision*" establishes a proportionality which, according to gender studies, can only be grasped by considering each of the social and symbolic local sex/gender systems (Cavatorta & Fusaschi, 2020; p. 9). As mentioned from Cavatorta and Fusaschi it relates feminine practice with male circumcision, or with the formation of manhood (Cavatorta & Fusaschi, 2020; p. 9). Frequently women and girls are perceived as being weaker than men and needing to be controlled in patriarchal countries, both physically and culturally. The practice of FGM, which perpetuates patriarchal standards and expectations about women's bodies and sexuality, is frequently continued as a means of maintaining a girl's virginity and assuring her suitability for marriage. As Burtscher reflects in her paper the patriarchal system also has an impact on how FGM policy is carried out (Burtscher, 2012; p. 19). According to the anthropologist Ellen Gruenbaum FGM was always seen as delicate topic, it has caused outsiders to refer to it as a taboo topic that shouldn't be discussed (Gruenbaum, 2001; p. 15). It might be assumed that it has been kept a secret, which makes the term "taboo" associated with prohibited or hidden activities (Gruenbaum, 2001; p. 15).

Gruenbaum mentions that topics as sexuality and anatomy aren't a started to discussion with people coming from outside one's culture or social circle. Women do not debate sexuality among them, since it is controlled by men (Gruenbaum, 2001; p. 15). She continues by arguing that in settings where people feel safe and secure, it is not suppressed but is rarely brought up in mixed company. Second, it is commonplace and taken for granted among those whose daily lives include circumcision rituals and the reality of scarring, making it unlikely that it will be brought up by casual acquaintances traveling from other nations (Gruenbaum, 2001; p. 15). Therefore, it is unlikely that it will be brought up by passing acquaintances visiting from other countries because it is commonplace and accepted among people whose daily lives involve circumcision ceremonies and the reality of scarring (Gruenbaum, 2001; p. 15).

Men in positions of authority who oppose the practice may retaliate against women and girls because they perceive it as a challenge to their authority and cultural norms. The patriarchal system can also make it harder for women and girls to get access to proper information and healthcare, especially in places where women are not given the same possibilities for leadership and education as males. FGM is regarded in some societies as a way to preserve a woman's virginity, chastity, and modesty, since men have control over their bodies and the saying in the family (*ibid*, 2012; p. 8). It is also thought to lessen a woman's sexual urge and shield her from promiscuous behavior, “*uncontrolled sexuality would in the view of most men lead to unwanted pregnancies hence illegitimate children and in consequence social disgrace*“ (*ibid*, 2012; p. 19). It is seen as a rite of passage into adulthood and need for a girl to be accepted as eligible for marriage, the ritual is frequently continued (*ibid*, 2012; p. 21). “*As FGC is strongly linked to a girl's place in society, it is an initiation for her to enter society, but it is not an initiation ritual as such where girls spend some time in a secluded place with their educators and elder women as it is done, for example, in Sierra Leone*“ (*ibid*, 2012; p. 18).

3. Procedure and medical consequences of FGM

As WHO states Female genital mutilation is frequently supported by local institutions of power and authority, including traditional authorities, religious figures, circumcisers, elders, and even certain medical professionals (OHCHR et.al, 2008; p. 6-7). In fact, WHO explains that there is evidence that the amount of female genital mutilation performed by medical professionals has increased. Older women who themselves have undergone genital mutilation frequently function as gatekeepers in many countries because they view the procedure as crucial to the identity of women and girls. Women are more inclined to endorse the practice than younger women, and older women are more likely to consider efforts to stop the practice as an attack on their identity and culture. This is presumably one reason for this (OHCHR et.al, 2008; p. 6-7).

Moreover, due to the socio-economic and cultural background, serious consequences are reflected. According to Gruenbaum the use of “*unsterile instruments are used or if cleanliness is not meticulously attended to*” no recognized health advantages of FGM are (Gruenbaum, 2001; p:4). If the use of antibiotics, as well as the excisor's level of medical experience, would reduce both immediate and long-term consequences. Gruenbaum explains that “*the forms that include infibulation offer additional serious health consequences. Obstruction of menstrual flow can occur in cases in which the scar tissue obstructs the vagina, and an adolescent girl may find menses*

prevented, with the unsuccessful discharge backing up and distending her uterus” (ibid, 2001; p: 5). The use of non-sterile devices may result in contamination with viruses that cause hepatitis or AIDS, anemia, acute urine retention, urinary tract infection, sepsis, tetanus, and moderate to cataclysmic hemorrhage that kills many infants or girls. As reported by Ellen Gruenbaum, infibulation is frequently seen as the most painful ripping and unclean cut when it comes to the first sexual intercourse between husband in wife (ibid, 2001; p. 5). Often the husband executes the cutting, or the midwife is called for assistance. Infertility can also be brought on by “obstructed intercourse resulting from a tight introitus or painful intercourse (dyspareunia) and chronic pelvic inflammation that might affect penetration“ (ibid, 2001; p. 5). “The infibulated opening” causes additional problems throughout “pregnancy” and labor (ibid, 2001; p. 5). Furthermore, the anthropologist Gruenbaum reports that due to bad hygiene, the practice inflates vaginal and urinary tract infection leading to miscarrying the unborn child (ibid, 2001; p. 5). Infertility is a socially devastating condition throughout the places where circumcision is performed, and chronic pelvic infections are thought to be a key contributing cause in many cases (ibid, 2001; p. 5). Yet all these complication can also lead to hemorrhages and to death of the girl, women or even of the unborn child.

Gruenbaum states that *“psychological risks have also been discussed by some writers and de- picted in fiction“ (Gruenbaum, 2001; p. 7). It is known that the practice of FGM shows up in “young girls personality” or as bodily signs of agitation, repeated, bothersome recollections of the event, nightmares, phobias, and anxiety (ibid, 2001; p. 7). Women who have undergone FGM may experience flashbacks, sensory deprivations, or dreams that cause them to relive the cutting and feel fear and distress as if it were occurring to them again. This is referred to as having a traumatic memory but also can be related to a collective memory between other women and their own experience. As explained by “More research would be useful on female circumcision trauma in relation to later depression, fear of intimacy, and sexual dysfunction. Psychological consequences clearly can be expected to vary considerably, depending on cultural meanings that are taught and whether girls are prepared for the operations“ (ibid, 2001; p. 7). Childbirth and uncomfortable sex might set off traumatic memories in some women. In the same way, being reminded of the day of the cutting directly or indirectly through conversation, a television story, or by observing one's own body.*

Gruenbaum states that „*Reviewing the horrendous health risks, one can understand the intense outpouring of condemnation that ensued when the practices became more widely known by people outside the societies involved. That they have been nevertheless strongly defended and variously interpreted is the source of the intense controversy*“ (ibid, 2001; p. 7).

4. The role of NGOs

Non-governmental organizations are groups that are not affiliated with the government and are typically motivated by the needs of their constituents. The philosopher Lewis, the social policy specialist Nazneen and assistant Professor Nuno S. Themudo affirm in their study of “Non-Governmental Organization and Development” that when it comes to emergency response, democracy building, conflict settlement, human rights work, cultural preservation, environmental activism, policy analysis, research, and information providing, NGOs have also expanded their activities. (Lewis & Nazneen & Nuno, 2020; p. 1).

As the authors Lewis, Nazneen and Nuno annotate that there are no thorough statistics, thus it is challenging to estimate the number of NGOs or the amount of money they manage worldwide. The actual definitions of what an NGO is varies (Lewis & Nazneen & Nuno, 2020; p. 1). According to the professor Alnoor Ebrahim, NGOs have been evolving since the end of the Cold War (Alnoor, 2003; p. 1). Moreover, it is attainable to follow the background and roots of Nonprofits down to either a variety of intricate historic, social, and economic elements in many parts of the world They have been showing their interest “*among the international aid community to civil society organizations and institutions, and especially to development-oriented NGOs*“ (ibid, 2003; p. 1). As reported by Lewis, Nazneen and Nuno, in some nations, the term NGO has come to be adversely linked with groups committed to progressive change fueled by independent citizen activity, donor dependence, inefficiency, and corruption, or even all three. (Lewis & Nazneen & Nuno, 2020; p. 11). As they continue on reflecting what are the impact of NGOs, they explain that the majority of NGOs start out on a small scale and develop through time into larger, more sophisticated organizations (ibid, 2020; p. 15). To solve a problem, either one person undertakes initiative or a number of individuals with related viewpoints band together. An organizational framework develops around these initiatives over time, along with funding agreements, the employment of people, and relationships with governmental and other institutions (ibid, 2020; p. 15).

One of the primary functions of NGOs has been aiding individuals that are in need. NGOs can provide vital services to communities all around the world, including healthcare, education, and emergency help. As a result, Lewis, Nazneen and Nuno argue that the mobilization of resources to deliver products and services to those in need is a key responsibility of the implementer function (Lewis & Nazneen & Nuno, 2020; p. 14). Service delivery encompasses a very broad variety of services carried out by NGOs in areas „*as diverse as healthcare, microfinance, agricultural extension, and emergency*“ assistance (*ibid*, 2020; p. 14). That happens because NGOs are multifarious organization with different ways to act and approach their roles. Also, in international territory. (*ibid*, 2020; p. 4). Lewis and Kanji explain that an NGO is typically characterized as a free citizen organization that is neither government nor driven by the profit incentive that drives the majority of commercial enterprises. But the actual world of NGOs offers us many expectations and unique situations (*ibid*, 2020; p. 4).

On this context NGOs also do research and analysis on social, environmental, or humanitarian issues. They may utilize their research to promote particular reforms and to help influence public policy and decision-making. This is crucial in areas like climate change, where NGOs have been crucial in bringing attention to how human activity affects the environment. Moreover, donations and fundraising efforts are essential to the success of NGOs. “*Some NGOs receive high levels of government funding and possess many of the organizational characteristics of large bureaucracies.*“ (*ibid*, 2020; p. 4). Others are casual, modest, and unprofessional. Some are quite professional, look like private profit-making organizations, and have distinct corporate identities. NGOs prove to be rather challenging to categorize analytically, as one might anticipate from a classification that places more emphasis on what they are not than what they are. As a result, there have been lengthy discussions regarding what constitutes an NGO, as well as the best methods for examining how NGOs function in the development sector (*ibid*, 2020; p. 4).

Nevertheless, NGOs endure worldwide critics every day. One of the reasons of these critics comes from the inefficiency of some opposers. They claim that NGOs are not achieving the requirement and their objectives. Often these are due to a lack of tools or even of experience on the field itself. The problem is resumed with the little knowledge to handle complicated issues, as well as the local contacts and understanding required to put effective ideas into practice into the region or countries that is aimed to provide help. For this matters I would like to study the work of NGOs in Vienna in their fight to erase FGM or to mild the practice in the understanding of the practice itself.

III. Analysis and discussion

In order to effectively address the challenges that people experience, NGOs frequently concentrate on social, environmental, or political issues. They exhibit a thorough comprehension of the key problems, significant players, and the actions required to effectively address these problems. This necessitates a thorough understanding of the topic, including familiarity with current trends, surveys, and best practices. Non-governmental organizations create and put into action recommendations for solutions to the problems they deal with in order to plan focused activities, build quality initiatives, and create actions.

1. Analysis of the role of NGOs in tackling FGM in Vienna

NGOs have demonstrated distinct functions on a range of levels and themes, as we highlighted in our previous chapter. In the months of January and February, 4 different NGOs in Vienna: Médecins sans Frontières (MSF), AKTION REGEN, FEMSüd and Wiener Programm für Frauengesundheit, focus on issues related to FGM. The researcher is interested in examining the efforts made by non-governmental organizations in Vienna to end female genital mutilation and their pledges to accomplish this goal.

According to Doris Burtscher, medical anthropologist at “Médecins sans Frontières (MSF) after a guided interview on the 9th of January, the NGO mostly deals with medical-related concerns. This entails assisting those who live in regions at risk for disease, poor sanitation, natural catastrophes, and armed conflict. The researcher draws the conclusion that the Organization in Vienna doesn't directly operate; instead, it focuses considerably more on outreach and training for those who wish to work in humanitarian help.

Therefore, Doris Burtscher emphasizes that Operational Support Unit in Vienna is also a fundraising and communication base giving support to the operations through evaluations and also through anthropological studies.

The anthropologist affirms by this following statement that,

“ this is the part where I am working with it was created by one of my colleagues in 2005 and it was quite new for MSF that we are also going to evaluate our projects. Do we meet the objectives? Is it appropriate in terms of finances, the performance and everything? So, this evaluation unit was

created in 2005 and since there was more and more requests also for looking into qualitative research involving communities doing initial assessments before starting a project. My colleague asked me if I would like to join the evaluation unit, and this was in 2011, but I work with MSF since 2001 was first and an expert means that I was going on mission, doing my study, analyzing, writing the report, and then the contract was over.” (interview with Doris Burtscher, January 9, 2023).

In conclusion from this conducted interview that MSF is educating people about their own rights, situating people in society, and assisting them in overcoming societal constructions and poverty. They therefore take a very vigorous preventative stance.

The next interview that was conducted on the 6th of February brings the point of view of the next Viennese NGO, Dr Ines Kohl, an anthropologist working at AKTION REGEN explains that their main goals and principles are :

“We are an NGO for international cooperation. We have been founded about 33 years ago by gynecologist. And she has been working in Ethiopia, and she saw women suffering from many, many teenage pregnancies, so sliding from one unintended pregnancy into another. And that's why she founded AKTION REGEN and from the beginning. Our main focus lies on sexual and reproductive health and rights and family planning. And during the last years, we more and more focused on the rights issues because family planning and sexual issues are human rights. So that is new all you focus. And while since a couple of years we intensively work on FGM because our main area is East Africa and West Africa and both areas are really really concerned about FGM.” (interview with Dr. Ines Kohl, February 6, 2023).

Considering how the specialist introduce the organization, it is clear that this NGO focuses on assisting women and young girls in receiving education about their own sexuality and their future way of life, enlightening the main issues of the institutions and training people on the ground to become what the NGO calls RAIN WORKERS. It is intriguing to see that this Organization acknowledges the fact that FGM is a taboo subject. FGM is frequently cloaked in secrecy, making survivors or women in general reluctant to talk honestly about their experience. As analyzed by the researcher one of their main areas of attention is sexuality because it's important to understand one's body in order to make decisions about starting a family, be aware of one's own cycle and menstrual cycle, contraception methods and comprehend that sexual activity isn't something bad nor should

it be painful. This may exacerbate the taboo surrounding the subject. Women's sexuality is seen as something that should be managed and hidden in many African societies. Sexually active women or those who openly express their sexuality may be viewed as immoral or promiscuous. Social exclusion and discrimination may result from this. Due to the difficulty of discussing sexual topics in public, it is important to train the RAIN WORKERS to sensitize them to use appropriated terms whilst discussing sexuality. In general, the taboo around sexuality for women in African communities can have detrimental effects, such as restricting access to sexual health resources, escalating stigma and discrimination, and maintaining gender inequality. In addition to advancing gender equality and improvement the health and wellbeing of women, removing these taboos, and encouraging open communication and education about sexuality can assist. On the other hand, they work to stop FGM in order to safeguard these young girls. Yet, AKTION REGEN teaches professionals in the industry to help them become sensitive to the issues and work they will be doing. The researcher concludes that AKTION REGEN is an NGO that works in the field to effectively submerge into the communities and form relationships with the people (interview with Dr. Ines Kohl, February 6, 2023).

Additionally, FEMSüd, a clinic specialized in women health also contributes in great lengths to tackling FGM. Specifically in my conversation with Eljelede Omyma, a medical professional practicing in Sudan, the link between the practices of NGOs and reduction of FGM becomes more apparent. For instance, their fundraising activities and close ties to Stadt Wien helps them upscaling in Austria. Within FEMSüd offices and clinics it is a place for women's health where they can go for help if they are having problems with their health or issues related to violence. Because they have experts from numerous ethnic origins and can communicate in eight different languages, they advocate for a multicultural team Multiculturalism, help to relate to women in their own language and fully understand the problem they are dealing with.

Deepening the question of FGM, Eljelede Umyma enriches that:

“Different communities were practicing FGM and after that, we started as a doctor to speak about FGM, but not as a violence, not as human rights, not from social or political or religious aspect. I start to just connect the complications that women have with the FGM. Yeah. And the risk and the dangerous when the women are pregnant, and nobody knows about FGM, and they are in the hospital or giving birth at home as they used to. And also started to try to explain what

women health mean, which part of women is important and why. And I started to talk about reproductive health. And then, of course, we are talking about reproductive health, menstruation is one of it. Anatomy, women anatomy is one of it, our sexual life is one of it. So, we started, I started like this, and then when we started to talk about FGM, I figured out or it was clear for me it is not topic just to talk about it, just to consult women about it. They need help. They need care, medical care, that we can offer it in women health. So, we started, or I started the FGM ambulance. It was in our patient. Yeah. FGM should be special out-patient care.” (interview, Eljelede Umyma, February 13, 2023)

It is discovered that FEMSüd are very interested in the FGM issue. They try to approach women in a way that they understand how this practice is not a health benefit for them. They touch the topic by addressing in the right way and sensibelize their culture around topics that are restricted to them. Women feel protected and understood, because the specialists are all from the same country and do understand how they interpret the topic of FGM, sexuality, pregnancies and other more. They are aware of the needs of women and how to spread awareness of the issue. As a result of their expertise and the program's success, it can be implemented across Austria.

The third interviewer Alexandra Grasl – Akkilic working at Wiener Programm für Frauengesundheit assert that their primary function:

*„It is an important point for the City of Vienna to deal with this topic on a regular basis in the form of an advisory board, the FGM Advisory Board of the City of Vienna. It was established in 2007 and meets twice a year. On the one hand, people from the administration, i.e., from relevant departments, are represented here, from the integration area, from the women's area, from the health department, children, and youth advocacy of the city of Vienna, the human rights representative of the city of Vienna. And on the other hand, there are specialists for gynecology in this advisory board, but also representatives of midwives, institutions, or also professional associations of midwives, also from the Medical Association.”*⁵ (Alexandra Grasl-Akkilic, February 17, 2023)

⁵ Interview 17.02.2023, original: „Was schon ein wichtiger Punkt war von der Stadt Wien, dieses Thema eben wirklich regelmäßig zu behandeln in Form eines Fachbeirat eben der FGM-Beirat der Stadt Wien. Und der wurde 2007 quasi ins Leben gerufen und trifft sich zweimal jährlich. Einerseits sind hier Personen aus der Verwaltung, also aus relevanten Fachgebieten oder Ressorts vertreten, aus dem Integration Bereich, aus dem Frauenbereich, vom Gesundheitsamt, Kinder und Jugend Anwaltschaft der Stadt Wien, die Menschenrechtsbeauftragte der Stadt Wien. Und auf der anderen Seite sind in diesem Beirat Fachärztin für Gynäkologie vertreten, aber auch Vertreterinnen von Hebammen, Einrichtungen oder auch Berufsvertretungen der Hebammen, auch von der Ärztekammer.“

In conclusion the City of Vienna manages and trains a plethora of professionals, including gynecologists, teachers, and some top human rights officials. It is evident that they aim to raise awareness among the influential groups in our city so that they can give pregnant women and young children the finest care possible to properly inform and explain how to handle girls or women who have been affected by the practice.

Furthermore, it is worth analyzing the trajectory of when the NGOs in Vienna first became active and when they began their campaign to end female genital mutilation.

As the interviewer explained:

“ When MSF was founded, it was in 1971 and in of a few doctors and I don't know if there was one, a journalist, but MSF in general was founded in Vienna was opened in '94.” (Doris Burtscher, January 9, 2023)

In addition to this, the interviewer expanded on their mission and work's focus:

„Any activities going into female genital mutilation and of course we still study in Tschad, the idea of us going also towards prevention. It's, it's not the strongest field of MSF. I mean, it becomes more and more important for our projects because prevention is easier than treatment sometimes and cheaper as well. Also, in terms of HIV and AIDS, and so for prevention, the idea was in Tschad to collaborate with local organizations who are already working with women to protect them from genital mutilation“ (Doris Burtscher, January 9, 2023)

It was determined that although MSF in Vienna does not focus heavily on FGM, the prevention of FGM in communities in Africa, it is nevertheless working to achieve this goal globally. They are considering increasing the preventive as one of the main strategies of reducing FGM :

AKTION REGENs interviewer reflected on the difficulty of spreading information about FGM :

“As far as I know from the beginning because our founder, Maria, as a gynecologist, of course, she has been aware, and then they started. But it was always hard how to touch the topic because

it's such a ... it's a taboo topic. And if you start a session with anti-FGM ideas, people go, they, they shut up and you closed that kind of dialog. So, a couple of years ago, I don't know, five or five years ago, our gynecologist, she has developed a specific tool which is the clitoris tool. And this was the start of our beginning was becoming more engaged in FGM because now we try to explain that the clitoris is not that visible, tiny little part, but it is an organ, and you can cut an organ and it is the actual end of the penis.“ (Dr. Ines Kohl, February 6, 2023)

The CLITORIS TOOL, one of the many tools used by AKTION REGEN to teach to young girls, women, and men what the female anatomy looks like, is displayed in the first image. The purpose of the tool is multi-faceted, but one of the main aims is to attempt and sensitize the audience and educate them using clear visuals, bringing them closer to their own bodily anatomy and comprehend the biological and health significance of this particular organ. AKTION REGEN also successfully spreads information about the practices' negative effects, including the suffering and discomfort it creates for future family planning and sexual experiences.



Figure 1: The CLITORIS of AKTION REGEN



Figure 2: A RAIN WORKER explaining the Clitoris to young girls, women, boys, and men.

The works of FEMSud has been somewhat more recent than AKTION REGEN. Since 2007, FEMSüd has been engaged in its opposition to FGM. The study concluded that Austria has been actively engaged in the battle against FGM for more than ten years.

The Wiener Programm für Frauengesundheit declares that:

*„And on the other hand, the Vienna Program for Women's Health, in recent years, or actually since 2004, since 2001, has taken up this issue and also worked on it in the form of analyses in the health sector times.“*⁶ (Alexandra Grasl-Akkilic, February 17, 2023)

It was found that they have been actively involved in the fight against FGM for the past ten years and are working to find ways to end the practice by creating programs and providing a lot of support for women in Vienna.

⁶ Interview 17.03.2023 original: „Und andererseits hat das Wiener Programm für Frauengesundheit, in den letzten Jahren oder eigentlich seit 2004, seit 2001 dieses Thema aufgegriffen und auch in Form von Analysen im Gesundheitsbereich mal bearbeitet.“

As the previous interviews reflect, the fight against FGM in Vienna has been active for the past ten years in a variety of areas. The majority of these Organizations collaborate closely and began their battle against FGM at roughly the same time, which indicates that the concern over FGMs arose on an international scale and could only get the necessary funding in 2000s. The interviews offer consideration into the timing and global focus in the fight against FGM, and the relevance of multiculturalism in order to have a better understanding of the cultural aspect of the practice. Additionally, interviewing the medical professionals unraveled the techniques and information production in order for women to familiarize themselves with their own bodies and to better understand the medical repercussions of FGM practice.

2. The importance of understanding the culture in the NGOs in Vienna

It is fundamental to focus more specifically on the culture of the practice how it affects the efforts of diminishing its dangers. Understanding a culture, analyzing a culture and especially having an objective approach is important to be able to have a holistic view on a problem. Given that the Western understanding of the culture existing outside of our own societal and cultural framework is often misguided, approach to FGM has to be local-specific and contextualized within each of the countries tackling FGM.

Changing a tradition and culture is a very complex undertaking. With this in mind, this thesis delves into the institutional cultures of four different NGOs and demonstrated their approach and understanding of this delicate practice. Furthermore, I provide insight into how NGOs perceive people`s culture and how they reconcile often opposing cultural practices with women`s physical health.

According to the Doris Burtscher, the terminology of the act itself can be a complex and emotive issue:

“We said we need to also somehow to be neutral, you know, because mutilation is or is already a judgmental term. You mutilate someone, so you hurt someone. So, when you hear the women talking, they don't want to hurt their child. But in their idea, it is to make the child compatible or to make the child or the girl part of the society like they understand it. Of course, this is also a question of cultural relativism. How much do we accept? Yeah. So, in that sense, MSF is not going into cultural relativism and says, okay, it's their culture, they are doing it, they are doing it

for this and that reason. So, it's okay for us. No, we do not support it because cultural relativism has also limits.” (Doris Burtscher, January 9, 2023)

The study concluded that it's critical to utilize language that doesn't judge or mislead the community in order to comprehend the practice's culture. In the process of the analysis having a thorough understanding of the cultures of the people it allows an organization to interact with them more successfully. It makes it easier for locals to recognize and interact with the NGO by allowing the Organization to use suitable language, expressions, and behaviors that are well-known to the community. The extent to which they can comprehend and tolerate the practice of FGM is thought to be constrained.

The interviewer enlightens that:

“So, if it is harming someone, you cannot support it all. But the women said, ‘we would like not to do the female genital/cutting mutilation for our children or girls’, but the social pressure and to social convention is so strong that yeah, they might have a difficult life after that. So not finding a husband not being accepted in society.” (Doris Burtscher, January 9, 2023)

In conclusion the interviewer reflects on the somewhat contradictory notion of the brutality of FGM, with the connotations of the act as clean, within the given social context :

“In Tschad, the mutilation had to deal with the idea of being clean, you know, so pureness or they name it also like that sometimes to make the sexual organ more clean, more pure.” (Doris Burtscher, January 9, 2023)

With this assertion, it became clear that the cultural activities are damaging to people, but their deep rootedness cannot easily be eradicated. As previously mentioned, the FGM practice contradicts the woman's conception of herself, prevents her from learning about her sexuality, and denies her the ability to make any decisions regarding her body on her own. The practice itself becomes generational, a ritual of repetition and engrained within

the value system. In their culture not being cut means being impure, dirty, and not accepted socially.

On the other hand, the Dr. Ines Kohl of AKTION REGEN declares that:

“While the most important aspects, first of all, seeing what has been done on the ground in the global South, because they have been working much longer on that issue. So, we need their expertise in the global know-hows in order to fight against it. Secondly, including all stakeholders and especially bringing men on board to make them aware of what does it mean for a girl, for a woman to bring young men on board a specific marriage partners and give them some keys in their hand that they can resist the pressure from older generation and make awareness, especially in the global laws, because we have much more force, we have the funding and we can then support initiative on the ground to fight against it.” (Dr. Ines Kohl, February 6, 2023)

According to the interviewer, nothing would have been possible without efforts to collaborate:

“As I've mentioned before, we give the information, we prepare, the issues we teach, but we always contact our local partners and ask them what else do you need, what kind of topic do you need. And together with them, we draft our curriculum, we draft our workshop manual, we draft the content, you know, and then it is their responsibility because we have local trainers to give it in the right person in the right way, because there are a lot of NGOs having volunteers.” (Dr. Ines Kohl, February 6, 2023)

According to the report, it is essential to be aware of the FGM-related work that has previously been done in Africa. Many NGOs in the global South have been continuously involved in a variety of areas, including interventions in the health sector, community mobilization, empowering women and girls, and legal and policy framework. The contributions and improvements will be obvious throughout the entire world as well as throughout the communities as we gain more information about how to respect others and collaborate with them. As the interviews show, the involvement of men in the raising of awareness is a key component that NGOs genuinely desire. Men are generally in roles of

control, and exercise political and social control in the majority of villages where FGM is practiced. Men can determine to have their wives, daughters, or other female family members had the procedure done. This may be brought on by cultural perceptions of women's sexuality, marital compatibility, and family honor. As demonstrated through the line of interviews, the practice may improve or perhaps become milder if men become more active and educated about its effects. To conclude the research investigated that most of the NGOs build a

FEMSüd shows a similar approach. The interviewer affirms that:

“To use the language and the understanding of other who are practicing FGM, so you can fight against it. Not use your own opinion, your own point of view, your own understanding, your own values. Yeah, because you are not the one who did the circumcision. So how you can apply your own idea about it is better to understand them and to listen, to listen. Why they are practicing FGM. So, you can find the strategy against it“ (Eljelede Umyma, February 13, 2023)

The interviewer reflects in order to reconcile the Western framework of thinking, NGOs have to place an effort in sharing certain common values:

“We connected with something that value for us and for the women. We connected with our beliefs. We connected with our tradition. But not talking as Western society who have other values, other criteria and other way of understanding and seeing this.” (Eljelede Umyma, February 13, 2023)

It was determined that NGOs have the desire to introduce Western culture through the Global South., whether directly or indirectly. It is preferable to approach the various groups according to their own perspectives. Moreover, the relationship between the NGO and the community being assisted may suffer as a result of misunderstandings and miscommunications brought on by a lack of cultural awareness and sensitivity. For instance, words, colors, and symbols may have various connotations depending on the culture. For an NGO to avoid insulting or provoking the community it serves, it must be aware of these subtleties. Knowing a culture also demonstrates respect for the customs and

values of the locals. Respecting and integrating within the local culture increases an NGO's chances of being accepted and trusted by the community, which can foster the development of enduring partnerships. In order to promote knowledge and completely comprehend the significance of the culture and its practices, it is beneficial if the campaigns stem from the communities themselves.

To conclude, designing successful intervention that respect local traditions, pinpoint the underlying reasons of the practice, which caters to particular cultural customs and beliefs, and encourage community involvement all depend on an awareness of the cultural context of FGM. This is essential for preventing FGM and enhancing the wellbeing of women and girls in impacted communities.

IV. Discussion

1. Limitations

While researching female genital mutilation and the role of NGOs, there are various restrictions that can pose an issue. FGM is a tradition that has been carried out for many years in various cultures all over the world. As a result, it has an impact on many women and girls' health and affects all parts of their personal identity. Organizations have been actively engaged in the battle against FGM for a while. The investigation led to the conclusion that efforts had been made in Vienna to raise awareness of the practice. To provide instruction to women, girls, and especially men, they have developed a variety of mapping workshops. While offering solutions targeted at ending the practice, they have been actively pressuring activists, teachers, and health takers. Yet, there are significant limitations to what NGOs in Vienna may do to stop FGM, which I discuss further.

Reaching out to the targeted populations is one of the key challenges faced by Organizations in combating FGM in Vienna. Due to the distant locations of many FGM villages, it is difficult to conduct education and awareness-raising campaigns. Moreover, some communities are hostile to outside assistance, and NGOs in Vienna could encounter cultural obstacles in their efforts. Reaching the communities and people most impacted by FGM can be very difficult for NGOs due to access issues and cultural barriers. The difficulty of long-term participation was another

restriction of NGOs in Vienna in tackling FGM that the researcher examined. Successful interventions necessitate ongoing communication with the impacted communities, which can be challenging given the financing and resource constraints. NGOs in Vienna may struggle with a shortage of money, which might restrict their capacity to interact with communities for a longer period of time. Hence, interventions might not be maintained long enough to result in noticeable improvement. Thus, it was shown that the NGOs in Vienna have a strong will to continue this fight among African communities and encourage new projects in the upcoming years. In addition, creating treatments that are culturally acceptable may provide difficulties for NGOs in Vienna. Interventions may be viewed as insensitive and improper if they don't consider cultural traditions and beliefs. Community acceptance and involvement are frequently necessary for initiatives to be successful. On that account, in order to create relevant interventions that are both successful and culturally sensitive, NGOs in Vienna need to understand the cultural and economic contexts under which FGM happens. It has been also a challenge for the NGOs in Vienna to establish who and where the practice may have been done in Austria. They try to inform and raise awareness amongst the migrant women and their community to not persevere the practice in Austria due to the restrictions and regulations posed by the law within the European Union.

Finally, NGOs in Vienna may have difficulties due to the absence of support from governments and other institutions with funding capacities. Many parties, including government organizations, religious authorities, and community leaders, must work together to address FGM. The support given to NGOs working in this field may be constrained by governments who do not view FGM as a serious public health concern.

NGOs in Vienna have achieved great strides against FGM, yet a few of these flaws still manifest due to a number of constraints. Adapting to local communities is one of the most difficult aspects, given the drastically different sociocultural structures within which NGOs stem from and the local communities exist in. When all the involved parties fail to adhere to the rules and regulations of the NGOs in Vienna, things may get complicated. The fact that they haven't advanced doesn't follow from this. During the past ten years, the numbers have, in fact, been surprisingly declining. The number of pregnancies as a result of FGM has changed, according to AKTION REGEN, who discussed this after promoting their slogan and involvement in Kenya. FEMSüd also demonstrated that if we begin to understand the culture of these women, it will

help them grasp what is right and wrong even more. In fact, they adopt the stance of not criticizing their customs or behaviors while educating them about the impact they have on the education of young women and girls. It would be important if some NGOs would educate and spread awareness to young generation about the topic. Technology is one of the most powerful tool in our generation. As Margaret Bachlechner, a Kenyan activist and a coworker of AKTION REGEN states in her interview, spreading information through social media help the world or the young people to cooperate, to promote and connect people: *“One aspect of considering to work on FGM is now to put it in the media, talk about openly without, I mean, no hiding behind the scenes. The empowering the woman, culture the child to come out and talk for herself and give that support to her. How can you give support to a woman in that aspect as a culture should give her education. This is the only tool she has.”* (Margaret Bachlechner, February 20, 2023)

2. Implications

The efforts of NGOs in Vienna have indeed been incredibly useful throughout the fight against female genital mutilation. Their initiatives were of strong influence in a number of different ways. NGOs in Vienna have largely contributed to increasing understanding of the consequences of FGM and educating communities about its risks it has on women’s health and their bodily autonomy. In addition to educating and training women and girls, community leaders, and medical professionals, they have undertaken awareness-raising activities. Following they have been pushing the legislation of the practice to be illegal in Africa as in every part of the world, since the activity has been detected also in various parts of the globe where communities have migrated to. It can be discussed that governments, community leaders, and other stakeholders are working in close cooperation with NGOs is important to secure that FGM is going against any violation of human rights and is prohibited by law. Groups have also fought to ensure that FGM offenders are prosecuted and that these laws are upheld. This has contributed to a decrease in the frequency of FGM in several nations. What the researcher debates is that NGOs in Vienna give to the communities impacted by FGM the tools they need to stop the practice. NGOs in Vienna engage directly with them. To alter attitudes and ideas that support FGM, they engage in community mobilization, education, and conversation. Organizations also collaborate with traditional elders, religious leaders, and other powerful community members to advance the rejection of FGM. NGOs have been successful in encouraging community

ownership of the battle against FGM through their activities, which has contributed to the intervention's sustainability. FGM survivors can get help from organizations in the form of medical care, psychiatric counseling, and legal representation like the MSF and FEMSüd and Wiener Programm für Frauengesundheit. The several Organizations in Vienna that were investigated spend time teaching the public how to recognize if a woman or a young girl has been coerced into having the surgery done. In order to safeguard young women during the cutting season, AKTION REGEN constructed a camp in Kenya. Organizations in Vienna developed FEMSüd residences where women can openly discuss their experiences and find comfort in the medical facilities to be able to reintegrate back into society.

V. Conclusion

Based on the literature review and analysis, it was shown that FGM is an entangled issue that has for many centuries been rooted in cultural beliefs and practices. It has been reported that the practice of FGM has existed since the time of the pharaohs. Many historians and archaeologists claim to have discovered evidence of the practice's prevention on mummies that date back more than 3000 years. Female genital mutilation as we have seen throughout this Bachelor thesis is a practice that is detrimental and also downplays a woman's authority over her body, particularly her ability to understand and educate herself about her own body and an open and healthy sexuality.

Despite the decreasing prevalence of FGM over the years, it still is a problem in many communities, in particular sub-Saharan Africa and the Middle East. FGM has negative effects that can be both physical and psychological. Pain, bleeding, infection, and even death are examples of physical impacts whereas trauma, worry, and sadness are examples of psychological effects. FGM has also been related to a variety of issues concerning reproductive health, such as difficulties giving birth and sexual dysfunctions. FGM has been outlawed through a variety of means, including legislation, activism, and education. Nonetheless, additional work must be done to totally eradicate this hazardous behavior. It is necessary to develop policies that address the underlying causes of FGM. For this reason, governments, civil society organizations, and international organizations must collaborate.

Moreover, NGOs in Vienna, have been fighting against FGM since the late 2000's. Their main goal was to have a significant role in research, community empowerment, advocacy work, and raising public awareness. NGOs in Vienna work with governments, community leaders, and other stakeholders to make sure that FGM is recognized as a violation of human rights and is prohibited by law. This was done in order to empower communities impacted by FGM and to put an end to the practice. To alter attitudes and ideas that support FGM, organizations mobilize the community and engage in education, conversation, and dialogue. The abolition of FGM is promoted by NGOs in Vienna in collaboration with traditional leaders, religious figures, and other powerful community members. The sustainability of the interventions has been made possible by NGOs' ability to establish community ownership of the battle against FGM.

Big corporations have pledged to abolish FGM by 2030. It is an ambitious goal but if NGOs push the work on the community mobilization, campaigning, and education, then it wouldn't be impossible for the practice to end. Moreover, charities have pledged to provide medical attention, psychological therapy, and legal help to FGM survivors. To aid survivors of FGM to tell their stories and recover from the trauma of the procedure, safe places are being created.

Still, if you consider all of the factors mentioned in this thesis it is very ambitious to say that the practice is going to be eliminated. There is still a long way to go before FGM can be completely eradicated. Traditions are ingrained in cultural practices and beliefs. Therefore, changing the way communities understand the significance of bodily and female autonomy might take some time, which leaves opportunity for FGM to still continue. Therefore, it is especially important for governments to encourage community-led initiatives, as well as involvement, and for NGOs in Vienna and all around the world to keep up their efforts.

This practice has been hidden long enough from the societies and the world, since it has been and still is a topic that is not openly discussed in the mainstream dialog of modern culture. The stigmatization of culture towards women's bodies has made it harder for anthropologists and activists to break this vicious circle of patriarchal societies and control over women's sexual freedom. It's a complicated problem that encompasses deeply rooted cultural and societal notions of femininity, sexuality, and gender roles when it comes to the stigmatization of women's bodies in relation to FGM. FGM is frequently regarded as vital for marriageability, purity, and chastity and is typically seen in these societies as a rite of passage that signifies a girl's transition

to womanhood. Women that do not undergo the practice are viewed by their society as impure, unfaithful. They are pushed aside by the community in which they live.

To conclude this Bachelor thesis, we could ask ourselves if it is possible to eradicate a tradition that is so rooted culturally ?

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