EPIDEMIOLOGICAL, MEDICAL, LEGAL, AND PSYCHOLOGICAL ASPECTS OF MUTILATION/AT-RISK GIRLS IN ITALY

A Bioethical Focus

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ABSTRACT

As a result of immigration from Africa, Italy has become host to people from cultures that traditionally practice female genital mutilation. According to indirect estimates, 4,000 to 5,000 genetically mutilated girls may be living in Italy today.

From a 1993 epidemiological study in which we interviewed 327 obstetrician/gynaecologists (Ob/Gyns), we collected data from 18 Ob/Gyns on 42 mutilated girls. The patients, primarily from East Africa, presently were living in nearly all regions of Italy.

Between 1993 and 1997, an additional survey of 30 Ob/Gyns permitted us to collect case studies on 73 mutilated girls. The cases, analysed through a qualitative methodology, permitted us to investigate some areas of interest, giving us information on the different ways female genital mutilation is performed in Italy; the impact on the health service of the short- and medium-term physical consequences of female genital mutilation; the victim's fear of the operation; the post-operative psychological consequences of female genital mutilation; and the first two legal cases reported to the authorities.

Due to wide-spread media coverage, a ban on female genital mutilation has now apparently been included in the goals of the Italian Committee on Bioethics.

INTRODUCTION

Female genital mutilation has deep roots in the traditions of many sub-saharan countries. Populations that practise female genital mutilation, with their recent and consistent immigration patterns, have diffused this cultural practice to developed countries. Some have even requested the performance of female genital from the health services

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in their adopted countries. This is what has occurred in Italy, where emigration from East Africa has become very intense as a result of the conflicts in Somalia in 1990.

Many countries of immigration are now facing serious public health problems related to female genital mutilation. The presence of female genital mutilation in Western countries is spreading. For this reason, we are now able to indicate on a map the countries in Europe where female genital mutilation is practised (Fig. 1). Female genital mutilation among immigrant populations is not limited to Europe, but is also found in other areas of the globe, including North America, Australia, and New Zealand.

Female genital mutilation presents Western doctors with a deontological dilemma. Most doctors refuse to participate in female genital mutilation, thereby causing the family of the girl in question to resort to clandestine operations. In this way, the underground market, sheltered by a conspiracy of silence, is becoming more and more widespread. The commercial transactions in the female genital mutilation trade amount to several million lira for each operation. Under these conditions, it is not difficult to postulate the existence of cases of severe complications and fatalities, along with their subsequent legal complications and consequences.

In Italy, there are no specific laws banning female genital mutilation, even though, according to article 5 of the Civil Code and article 583, c2, p3 of the Penal Code, female genital mutilation can be construed as being illegal for children and adults.

The Italian populace, however, has been made aware of the problem of female genital mutilation through newspaper and other mass media reports. These reports highlight isolated cases of female genital mutilation carried out in the country of origin on girls who otherwise reside in Italy. Frequently, however, such cases are misreported and misunderstood by news commentators.

Our intention has been to document the presence of sexually mutilated girls in Italy among immigrants at a time in history when Italy is rapidly becoming a multi-ethnic nation. One reason for conducting this study is to highlight the severity of the problem and to alert medical, political, and social authorities so that appropriate measures can be taken to protect at-risk girls.

1. SUBJECTS AND METHODOLOGY

In 1993, we carried out the first epidemiological survey in Italy in order to assess the involvement of obstetricians in female genital mutilation among African immigrants.

We surveyed a total of 327 medical professionals, most of whom were interviewed at the National Conference in Venice and at the Sexology Conference in Modena. The survey was conducted by means of a questionnaire, and, when the opportunity arose, by an in-depth interview. In particular, several items in the questionnaire asked those obstetricians who had had sexually mutilated women as patients (46% of the total) for information regarding any sexually mutilated girls they had examined professionally. Eighteen (5.5%) of the obstetricians answered positively. They provided data on 42 sexually mutilated girls. The replies to the questionnaire were analysed using quantitative methods.

During the interviews, those obstetricians who were most interested in cooperating also gave an in-depth interview. Through these in-depth interviews, we obtained the