Sugar-coating
Female Genital Mutilation
in United Nations documents
in English and Arabic:
a diachronic study
of lexical variation

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A Dissertation submitted to the Faculty of Humanities (Department of Translation and Interpreting), University of the Witwatersrand, in fulfilment of the requirements for the degree of Master of Interpreting and translation.

Supervisor: Professor Judith Inggs

Johannesburg, 2017
Declaration

I, Yasmin Raafat declare that this Dissertation is my own, unaided work. It is being submitted for the Master Degree of Interpreting and Translation at the University of the Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination at any other University.

Yasmin Raafat 08 day of March 2018.
Abstract

My struggle against FGM started around the age when most girls have already lost the fight. When I was seven, we were visiting our extended family when my cousin, who was ten, announced that I was not clean as I hadn’t yet been “purified”. My cousin was “purified” when she was seven, such is the norm, and by her logic I was therefore pronounced “unclean”. It was a surprise to me that I was not clean. I had showered and had not yet had any opportunity to soil my clothes. Sensing my confusion, my cousin explained that I needed to convince my parents to take me to the local “healer” or the doctor and to cut a part of my private area. Not wanting to miss an opportunity to advance my “purity” and probably more to fit in with my peer group, I confronted my father about this apparently galling oversight on his part. My father refused my request and told me not to be influenced by others. When I pressed him further he declined to elaborate, clearly uncomfortable with the subject matter. Purity. FGM. Taboo.

Ten years later, I started my own journey as an activist and surrounded myself with activists of many various political and social persuasions. There was always one topic that kept coming up in these myriad of beliefs, as topics with more notoriety often do: FGM. At the time, I was living with four other young women and not one of us had undergone FGM. Yet somehow, it still managed to capture us all in some way. A first cousin here, an aunty there, a grandmother’s opinion. We spoke of FGM as a barbaric brutal practice. During one such conversation, my mother who happened to be present announced (to my shame) that she thinks that every girl should be “purified”. She defended her claim saying she believed the girl will be “more promiscuous and a burden on her husband to satisfy her needs”. I was shocked.

I have learnt through my readings that FGM has four to five types depending on which parts are cut from the genitals. Girls who go through FGM have to be tied up for two weeks as a post operation procedure. When the girls enter adulthood only their husbands are allowed to cut their mutilated genitals apart to prove that they are “pure” and that they have not been touched by any other man.

FGM is practised mostly in North Africa but also in western countries as migrant groups immigrate to other countries. Fast-forward 10 years later and various governments around the world, including the Egyptian government, have banned the practice adding criminal
prosecution to anyone performing FGM, both doctors and healers. Egypt, which still has some of the highest rates of FGM in the world, has yet to convict anyone.

Still, the government banning FGM did at least do something. It helped to bring FGM out of the confines of closeted intellectual debates and into the public domain. The Egyptian public started to question FGM. Some argued that there is Hadith (a collection of teachings) by the prophet Muhammad that mentions purification is a Sunna (Muslim Law based on his words or acts) for girls, while others argue that they want to “protect their daughters” (from what?). This situation made me realize the power of the government in raising awareness and changing harmful traditional practices such as FGM.

I started reading more about FGM in Arabic and English and noticed that books use different terms in English and Arabic. The terms are never consistent and the literature is confusing. Further research on the UN campaigns and the terms used in English were always different to Arabic. There are even cases where the UN uses “mutilation” in English and “purification” in Arabic. There are others terms too, “circumcision”, “excision”, “cutting”, “damaging”. Every term has its own political, religious and social connotation. There is a need for this to be explored.

I have translated and interpreted for various organisations such as the United Nations, UNICEF, Pan African Parliament, universities and ministries across Africa. However, I am just one of the many new voices who are speaking out against FGM.

My aim is to have “female genital mutilation” as adopted by the UN and its agencies and for this term to be the one and only term used in all publications, while using the equivalent term in Arabic "بتر الأعضاء التناسلية للأنثى" Batr al Aadaa al Tansolya lel ontha. The Arabic term has the same gravity and connotation as the English term.

The UN has meetings on regular bases then publishes documents in English to be translated into the UN official languages on annual basis. Every year the UN releases between thirty and sixty publications. The research data will focus on the UN publications from the UN online library in English and Arabic, for the past twenty years since the adoption of the English term “Female Genital Mutilation”.
Acknowledgements

This research idea started before I commenced with the master degree 3 years. The research took a lot of emotional and mental efforts.

I wish to express my sincere thanks to my supervisor Prof Judith Inggs for all the support and for providing me with all the necessary documents.

My ultimate gratitude goes to my husband Tim Fechner for all the discussions over food and wine. Thanks for all your assistance, support, love and understanding.
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<td>ALA</td>
<td>African Leadership Academy</td>
</tr>
<tr>
<td>DGACM</td>
<td>United Nation Department for General Assembly and Conference Management</td>
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<td>FGM</td>
<td>Female genital mutilation</td>
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<tr>
<td>Hadith</td>
<td>a collection of teachings</td>
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<td>IAC</td>
<td>Inter African Committee on Traditional Practices Affecting the Harm of Women and Children</td>
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<td>Egyptian Ministry of Health and Population</td>
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<td>NCCM</td>
<td>National Council for Childhood and Motherhood</td>
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<tr>
<td>Sunna</td>
<td>Muslim Law based on the prophet Muhammed’s words or acts</td>
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<td>UN</td>
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<td>UNFPA</td>
<td>United Nations Population Fund</td>
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Arabic culture, like all cultures, is full of rich and varied communities, groups, histories and traditions. Drawing from a large well of diversity in the area, various social practices have cultivated and thrived in the Arab World. These social practices take root among communities because of their ability to cross cultural borders, yoking communities together with common “values”. While some social practices can help to unite the microcosms of society, others provide the framework on which great schisms grow. When these schisms culminate in an influential majority, one with the ability to legislate, lobby against change, and impede the autonomy of an individual, the ramifications can be devastating.

Millions of young girls in the Middle East, Asia and Africa go through female genital mutilation, which is known as ‘FGM’. The United Nations (UN) has condemned the practice as violating a series of well-established human rights principles including the principles of equality and non-discrimination on the basis of sex, the right to life when the procedure results in death, and the right to freedom from torture or cruel, inhumane or degrading treatment or punishment (World Health Organization 2008a). According to a United Nations Children's Fund report (UNICEF 2005a), 91% of girls in Egypt and 88% of girls in Sudan experience this procedure annually.

As a tool for advocacy, and for raising awareness on the significance of the subject, all UN agencies have agreed to use the term “female genital mutilation” (World Health Organization 2008a). The adoption of the term is meant to illuminate the brutality of the practice. While there is still some debate about the appropriate terminology for the practice, it is difficult to escape the fact that the largest, most coordinated, determined and well-funded organisation ever created for the protection of ‘human rights and international public health’, the UN (and its subsidiaries) advocate for the term ‘mutilation’. Perhaps the best example of this is the UN Interagency Statement on Eliminating FGM, which dedicates an entire chapter and annex to detailing the adoption of the term and its value in awareness raising (World Health Organization 2008a).
The term was first adopted at the third conference of the *Inter African Committee on Traditional Practices Affecting the Harm of Women and Children (IAC)*. Since 1991, the terminology ‘FGM’ has been widely used in UN documents (UNICEF 2005a). The term was also used in the 1997 Joint Statement of the WHO, the UNICEF, and the United Nations Population Fund (UNFPA) (World Health Organization, et al. 1997). It is surprising then to see that these same organisations (and more) have failed to enforce this hard-line language policy in official documents, publications and addresses which are translated or interpreted into other languages, specifically in this research, into Arabic.

Arabic language practitioners’ lexes for FGM include the words (*خشان* (khetan) which means “circumcision”, *(طهارة* (tahara), which means “purification”, *(قطع* (katt) which means “cutting”, *(تشوية* (tashweeh) which means “corruption - damaging” and the term *(التشر* (batr) which means “mutilation”.

The divergent ramifications of language planning discussed in this research paper are focused on the impact of culture, the role of policy makers, the role of language practitioners and how these integrated constituents combine to expedite social change. It is impossible to talk about groups of people without generalising. It therefore follows that it is impossible to talk about the culture of a group without generalising. This research aims to be as accurate and as specific as possible, but inevitably contains such generalisations. It is hoped that with proper critical analysis of existing language planning methodology, successful changes can be made in the culture and language policies surrounding FGM.

This research will focus on the translation of FGM from English to Arabic over twenty years in the United Nations. The first chapter focuses on the aim of the research, namely using effective terminology and awareness raising. The second chapter focuses on defining female genital mutilation, the UN structure and the quality of the UN translations. The third chapter focuses on data collection using UN documents in English and Arabic from 1996 until 2016. The fourth chapter deals with data analysis. The fifth chapter deals with the findings and recommendations. Lastly, the sixth chapter focuses on the conclusion.

1.1 Aim and rationale

My struggle against FGM started around the age when most girls have already lost the fight. When I was seven, we were visiting our extended family when my cousin, who was ten, announced that I was not clean as I hadn’t yet been “purified”. My cousin was “purified” when she was seven, as is the norm, and by her logic I was therefore pronounced “unclean”. It was a
surprise to me that I was not clean. I had showered and had not yet had any opportunity to soil my clothes. Sensing my confusion, my cousin explained that I needed to convince my parents to take me to the local “healer” or the doctor and to cut a part of my private area. Not wanting to miss an opportunity to advance my “purity” and probably more to fit in with my peer group, I confronted my father about this apparently galling oversight on his part. My father refused my request and told me not to be influenced by others. When I pressed him further he declined to elaborate, clearly uncomfortable with the subject matter. Purity. FGM. Taboo.

Ten years later, I started my own journey as an activist and surrounded myself with activists of many various political and social persuasions. There was always one topic that kept coming up in these myriad of beliefs, as topics with more notoriety often do: FGM. At the time, I was living with four other young women and not one of us had undergone FGM. Yet somehow, it still managed to capture us all in some way. A first cousin here, an aunty there, a grandmother’s opinion. We spoke of FGM as a barbaric brutal practice. During one such conversation, my mother who happened to be present announced (to my shame) that she thought every girl should be “purified”. She defended her claim by saying she believed the girl would be “more promiscuous and a burden on her husband to satisfy her needs” if she was not “purified”. I was shocked.

FGM is practised mostly in North Africa but also in western countries as migrant groups immigrate. I have learnt through my reading that there are four to five types of FGM depending on which parts are cut from the genitalia. Girls who undergo FGM have to be tied up for two weeks as a post operation procedure. When the girls enter adulthood only their husbands are allowed to cut their mutilated genitals apart to prove that they are “pure” and that they have not been touched by any other man.

Fast-forward 10 years after the reported incident with my mother and various governments around the world, including the Egyptian government, have banned the practice adding criminal prosecution to anyone performing FGM - both doctors and healers. Despite this, Egypt, which still has some of the highest rates of FGM in the world, has yet to convict anyone.

Still, the government banning FGM did at least do something. It helped to bring FGM out of the confines of closeted intellectual debates into the public domain. The Egyptian public started to question FGM. Some argued that there is Hadith (a collection of teachings) by the prophet Muhammed that mentions purification is a Sunna (Muslim Law based on his words or acts) for girls, while others argue that they want to “protect their daughters” The question then arises to
‘protect from what’?). This situation made me realise the power of the government in raising awareness and changing harmful traditional practices such as FGM.

I started reading more about FGM in Arabic and English and noticed that books use different terms in English and Arabic. The terms are never consistent and the literature is confusing. Further research on the UN campaigns and the terms used in English were always different to the corresponding Arabic translation. There are even cases where the UN uses ‘‘mutilation’’ in English and ‘‘purification’’ in Arabic. Other terms are also used namely, “circumcision”, “excision”, “cutting”, and “damaging”. Every term has its own political, religious and social connotation. Thus there is a need for this to be explored.

Currently, I work at the African Leadership Academy (ALA) in the strategic planning division where I manage the African Studies Department. ALA focuses on empowering African youth with quality education. I have been selected by The United Federation of African Women, which has a license from the UN, to be a chancellor for southern Africa through which I am able to address the different challenges that face African women. I am also a member of the UN activist linguist group in Egypt where we focus on the work of translation and terminology from English to Arabic. Through my work and affiliations, my aim is to advocate for one term in English and one term in Arabic to be used when addressing FGM by the UN and its agencies and for this terminology to be consistent in all meetings, publications and campaigns on FGM.

I have translated and interpreted for various organisations such as the United Nations, UNICEF, Pan African Parliament, universities and ministries across Africa. However, I am just one of many new voices who are speaking out against FGM.

My aim is to have ‘‘female genital mutilation’’ adopted by the UN and its agencies, and for this term to be the only term used in all publications, while using the equivalent in Arabic ﺛﺮ Batr al Aadaa al Tansolya lel ontha”. The Arabic term has the same gravity and connotation as the English term.

The UN publishes documents for regular meetings in English, which require translation into the other official UN languages annually. Every year the UN releases between thirty and sixty such publications. This research will focus on data from UN publications from their online library in English and Arabic over the past twenty years since adoption of the English term “Female Genital Mutilation”. Over the past twenty years the United Nations has implemented a number of policies in an attempt to eradicate FGM. These policies include education and awareness campaigns, cultural and literature analysis, and criminalisation of the practice. This research is an attempt to build on to the existing education and language policy of the UN as
well as analysing the effectiveness of current campaigns in Arabic and English. FGM is discussed explicitly in English in many research papers and books and the UN has a strong language policy regarding the terminology of FGM in its published works. Arabic speaking countries have some of the highest rates of FGM in the world, yet the Arabic literature on FGM remains limited. Comparatively, published Arabic works by the UN are inadequate when evaluated against their English counterparts. This research aims to expose the poor translation of the UN’s existing policies from English into Arabic and will help fill the gap in Arabic language analysis regarding FGM. It is hoped this will improve the quality of the UN’s efforts to eradicate FGM, especially with regards to the Arabic audience.

1.2 Research questions

In this research, I intend to answer the following questions:

- What language does the UN use when addressing FGM?
- Why does the UN need to address FGM?
- How many lexes for FGM have there been in English and Arabic in the past twenty years?
- To what extent was the UN able to execute and monitor the language used in texts concerning FGM?
2.1 What is female genital mutilation?

Millions of young girls in the Middle East, Asia and Africa undergo female genital mutilation, known as ‘FGM’. The United Nations (UN) has condemned the practice as violating a series of well-established human rights principles, including the principles of equality and non-discrimination on the basis of sex, the right to life when the procedure results in death, and the right to freedom from torture or cruel, inhuman or degrading treatment or punishment (World Health Organization 2008a).

After decades of research and prevention work, the World Health Organisation (WHO) has declared that:

Female genital mutilation has no known health benefits. On the contrary, it is known to be harmful to girls and women in many ways. The removal of or damage to healthy, normal genital tissue interferes with the natural functioning of the body and causes several immediate and long-term health consequences. (World Health Organization 2008a, p.1)

Despite this, according to UNICEF (2005a), 91% of girls in Egypt and 88% of girls in Sudan experience this procedure annually. Yoder and Khan state that 91.5 million girls and women over the age of 9 years in Africa are currently living with the consequences of FGM (Yoder & Khan 2008). These consequences include severe pain, excessive bleeding, chronic infection, urine retention, anaemia, malnutrition, abscesses, cysts, keloids, fertility and pregnancy complications – even death. Not to mention the lasting psychological damage to victims.

The practice is reinforced by many social conventions:

In every society in which it is practised, FGM is a manifestation of gender inequality that is deeply entrenched in social, economic and political structures. Like the now abandoned foot-binding in China and the practice of dowry and child marriage, FGM represents society’s control over women.

(UNICEF 2005a, p.5)
FGM’s historical evidence goes back thousands of years. It was practised in Australia by the aboriginals and by ancient African communities. Egyptian female slaves used to undergo FGM to prevent pregnancy. However, there is no evidence of FGM on Egyptian mummies during the third millennium BC (Jha & Anand 2017). The issue of FGM does not present itself in isolation to other human rights violations in a patriarchal society. Societies that practise FGM commit other crimes against women such as honour killings, child marriage, rape victims forced to marry their rapists (to preserve the family honour), inheritance inequality and other land ownership restrictions – particularly relating to Islam’s Sharia law.

FGM is in many ways the ultimate in sickening patriarchal oppression, it is indeed patriarchy incarnate, but it is and has not been the only form of cruelty in modern societies. Nor is it the only practice underpinned by a deep and often unspoken, incoherent fear of female sexuality.

(Burragge 2015, p.17)

In the past, one of the challenges with FGM was how international organisations perceived the topic to be a domestic issue carried out by families and local healers. Eventually, international organisations and global communities were able to acknowledge the severity of the matter and established a number of awareness raising campaigns. Most of the public is unaware of “International day of zero tolerance of Female Genital Mutilation” to eradicate the practice, while they are familiar with breast cancer awareness campaigns even though the number of women affected by FGM is far greater in countries that practise FGM (Jha & Anand 2017).

In 2012 around 17 countries, which included Burkina Faso, Djibouti, Uganda, Egypt, Ethiopia, Eritrea, the Gambia, Guinea, Guinea Bissau, Kenya, Mali, Mauritania, Nigeria, Senegal, Sudan, Somalia and Yemen, implemented new programs that included raising awareness and legislation to eradicate FGM by 2017. These campaigns have had limited effect on reducing the number of victims of FGM. If nothing is done soon the world will be faced with 15 million girls who have undergone FGM by 2020. (Jha & Anand 2017)

Traditional community customs have made FGM a common practice, which means that girls are frowned upon if they have not been mutilated. This affects their social status and desirability for marriage arrangements, which is still important in such communities. Practising FGM is justified for the following reasons:

- To reduce women’s sexuality in order not to be a burden on men;
- To be affiliated to a community;
• Womanhood initiation during puberty for young girls to become women;
• “Purity” to maintain the honour of the family (the girl’s virginity) until marriage and to secure a better dowry (payment made for the bride by the husband’s family to the bride’s family).

FGM is considered to be an act of honour, safeguarding protection and cleanliness to ensure that women and girls are “appropriate” for future marriages. Women are considered a traded commodity for the family and the future husband, and the amount of dowry and clan affiliation are critical during each arrangement. Girls, women and slaves present a commodity “value” to be transferred among families or between fathers and husbands. Some communities believe that cutting the part of a girl’s genitals that resembles a man’s part will make the girl cleaner and softer.

FGM is embedded in notions of purity and cleanliness and it has over the centuries been particularly evident in contexts where girls and women are seen as property owned and traded by men. FGM is a marker of chastity and sole ownership by a husband.

(Jha & Anand 2017, p.4)

However,

[c]ommunities that have employed a process of collective decision-making have been able to abandon the practice. Indeed, if the practising communities decide themselves to abandon FGM, the practice can be eliminated very rapidly. Several governments have passed laws against the practice, and where these laws have been complemented by culturally-appropriate education and public awareness-raising activities, the practice has declined.

(World Health Organization 2008a, p.1)

As a tool for advocacy, and for raising awareness on the significance of the subject, all UN agencies have agreed to use the term “Female Genital Mutilation (FGM)” (World Health Organization 2008a). Mutilation is a heavy word. It has gravity. The adoption of the word is meant to illuminate the brutality of the practice. Using this terms opens opportunity for debate. One of the “six key elements for change” mentioned in the 2005 UNICEF report is, “through non-judgmental, non-directive public discussion and reflection” (UNICEF 2005a).
As mentioned before, the best example of this is the UN Interagency Statement on Eliminating FGM, which dedicates an entire chapter and annex to detailing the adoption of the term and its value in awareness raising (World Health Organization 2008a).

In Annex 1: Note on Terminology, it states:

The word mutilation establishes a clear linguistic distinction from male circumcision, and emphasizes the gravity and harm of the act. Use of the word ‘mutilation’ reinforces the fact that the practice is a violation of girls’ and women’s rights, and thereby helps to promote national and international advocacy for its abandonment.

(World Health Organization 2008a, p.22)

It concludes by stating:

For the purpose of this Interagency Statement and in view of its significance as an advocacy tool, all United Nations agencies have agreed to use the single term ‘female genital mutilation’.

(World Health Organization 2008a, p.22)

The necessity for a linguistic and semantic distinction between the terms “circumcision” and “mutilation” was promoted from the desire to inspire opposition and to support eradication efforts. Feminist campaigner Fran Hosken first coined the term “female genital mutilation” to replace the term “female circumcision” in her work, The Hosken Report, and later in her many published essays (Hosken 1979).

Hosken’s work went on to influence many of the Western writers of the 1980s concerned about the practice of FGM, with Mary Daly going so far as to accuse the WHO of “refusing for many years to concern itself with the problem.,” and later stating that “when [the WHO] was asked in 1958 to study this problem it took the position that such operations were based on “social and cultural backgrounds” and were outside its competence” (Daly 1990, p.102). This type of critical social debate laid the foundation for the post-colonial critique which followed in the 1990s, in which scholars questioned the “anti-FGM discourse” for its supposed “imperialist narratives” and judgemental binary between the “West and the Rest” (Wade 2009).

Wade in a later publication sums up the situation, stating that FGM practices
…amplify the conflict in the conversation between feminism and postcolonialism because, unlike issues that are historical (footbinding), disturbing but rare (widow immolation), chosen by adults (cosmetic surgery), or impermanent (veiling), FGM(s) are ongoing, frequent, performed on children, and can involve extensive and irreversible bodily modification. It is difficult, then, and some would say unwise, to adopt the non-judgemental and non-interventionist approach that eases transcultural collaboration.

(Wade 2012, p.26-49)

Authors like Hosken and her contemporaries argued that the term “female circumcision” was not analogous to male circumcision and therefore should not be used to describe the plight of millions of women and girls. What they also highlighted was the “veil of secrecy” surrounding the topic. At the time, very little literature discussed the types of FGM, nor the extent of the problem. The UN responded, recognising that there were major gaps in understanding and the WHO pledged to focus on increasing knowledge and promoting technically sound policies and approaches to eliminate the problem (Toubia & Izett 1998).

In 1995, the WHO convened a Technical Working Group on Female Genital Mutilation in Geneva, Switzerland, which recognised the need for standardised classification for the types of FGM (Toubia & Izett 1998). The current WHO classification is described below:

Type I: Partial or total removal of the clitoris and/or the prepuce (clitoridectomy).

Type II: Partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (excision).

Type III: Narrowing of the vaginal orifice with creation of a covering seal by cutting and appositioning the labia minora and/or the labia majora, with or without excision of the clitoris (infibulation).

Type IV: All other harmful procedures to the female genitalia for non-medical purposes, for example: pricking, piercing, incising, scraping and cauterisation. (World Health Organization 2008a, p.4)

In contemporary literature, the WHO’s classification of the types of FGM sets the standard for the majority of publications. By instituting a standard classification system, the WHO countered some of the initial resistance to discussion and change. Through this classification system they
are firstly fighting against criticisms that they are ignoring the practice, refuting claims that FGM is not harmful or that it is “mild” at its most extreme. Secondly, they are allowing the reader to form their own sentiments on the practice through education. This information helps to highlight the differences between FGM and male circumcision and to challenge the status quo of acceptance of “circumcision”.

While there is still some controversy over the use of the terms "female circumcision" and "female genital mutilation", the UN’s position on the terminology has become increasingly clear. Since it was first endorsed by the Inter-African Committee on Traditional Practices Affecting the Health of Women and Children (IAC) during its regional meeting in 1990 (UNICEF 2005a), to the Interagency Statements in 1997 and 2008 (World Health Organization 2008a), each resolution has been accompanied by the growing body of data surrounding the wide-reaching negative impact of FGM.

The United Nations Fourth World Conference on Women, held in Beijing in 1995, was a cornerstone in the advancement of women and gender equality. In its entirety, the address captured the importance of national and regional particularities and various historical, cultural and religious backgrounds, stating that they should be considered only when they promote and protect all human rights and fundamental freedoms. Chapter II, paragraph 9, under the Platform for action states:

> The implementation of this Platform, including through national laws and the formulation of strategies, policies, programmes and development priorities, is the sovereign responsibility of each State, in conformity with all human rights and fundamental freedoms, and the significance of and full respect for various religious and ethical values, cultural backgrounds and philosophical convictions of individuals and their communities should contribute to the full enjoyment by women of their human rights in order to achieve equality, development and peace.

(World Conference on Women 1996, p.8)

This is the moment that the UN denounces culture as a primary source of gender based violence and exploitation. FGM is a topic that perfectly venerates both a traditional harmful practice and, as Lesley Obiora states, “a vital aspect of African cultural identity” (Obiora 1996). The significance of this statement should be allowed to settle in. It is an obvious challenge to the tremulous debate of culture vs harmful practices. Culture, the UN states, should be used to help women achieve equality, development and peace. It is not a shield to blunt the enjoyment of
the human experience. From this perspective, the statement is a weapon against some of the tactics that are used to silence criticism of FGM – i.e., accusations of “racism” or “interfering with the fabric of another culture”. It is also a response to prominent “imperialist narratives”, as discussed before.

International organisations, including the UN and its agencies, use various tools such as music, literature, drama and dance to educate communities about FGM. However, there is a need to tackle the issue of FGM using strategic collective methods, including critical language, in order to eradicate the practice. FGM is not only practised in North Africa and the Middle East with a prominent “dictator male dominant” society. It is also practised in democratic societies such as the United Kingdom, United States, Canada and Australia as a result of immigration (Burrage 2015).

International organisations made significant efforts to raise awareness to eradicate FGM globally through the years including:

1- In 1997, WHO, UNICEF and UNFPA produced a joint statement to eradicate FGM.

2- In 2007, UNFPA and UNICEF implemented a cooperative plan to eradicate FGM.

3- In 2008, WHO and nine UN agencies issued their Interagency Statement “Eliminating Female Genital Mutilation: An Interagency Statement”. The statement collected data on the history of the practice covering more than a decade.

4- In 2010, WHO, UN and its agencies issued the "Global strategy to stop health care providers from performing female genital mutilation".

5- In 2012, the UN adopted a resolution on the elimination of female genital mutilation.

6- Between 2013 and 2016, the UN and WHO documented the impact of FGM in thirty countries. The documents included the public views and religious beliefs on FGM.

7- In 2016, WHO, UNFPA and UNICEF produced a complete guide on FGM. (Jha & Anand 2017)
Despite the efforts mentioned previously, FGM remains a reality. Egypt’s population is 95 million and has one of the highest rates of FGM at 91%, with both Muslim and Christian populations practicing FGM as a religious or traditional practice. The religious aspect of FGM has made it particularly difficult to eradicate. As stated by the non-governmental Egyptian organisation, 28 Too Many, which is one of numerous organisations campaigning against FGM, “Egypt has the greatest number of women and girls who have experienced FGM of any country in the world” (28 Too Many 2017, p.1).

FGM is usually performed on young girls by local healers and has been practised in Egypt since the ancient Pharaohs’ era. Linking the practice with “local healers”, however, is misguided, as the practice is often carried out in primitive and unsanitary conditions, without anaesthetic. The initial fight against FGM by the international community led to the “medicalisation” of the practice, allowing medical professionals to perform the procedure to diminish the high rate of infections and death. More recently, however, international organisations moved towards banning FGM entirely.

Egypt had its first movement against FGM by medical professionals in 1920. Much later the National Council for Childhood and Motherhood (NCCM) adopted the fight against FGM and its consequences in 1999 (Jha & Anand 2017)

International organisations had to work through the unsettled political situations in Egypt during the Arab spring (the Egyptian revolution) in 2011 and resulting changes of governments. The main legislation on FGM in Egypt happened during the short Muslim Brotherhood presidency. In 2002, two death cases were reported which forced the Egyptian Ministry of Health and Population (MOHP) to respond by issuing a directive to medical professionals banning them from performing FGM.

Egypt legally banned FGM on the 16th of June 2008 with two amended pieces of legislation. Firstly, the Child Act No. 12 of 1996 was amended by Law No. 126 of 2008, which added Article 7-bis (a):

“With due consideration to the duties and rights of the person who is responsible for the care of the child, and his right to discipline him through legitimate means, it is prohibited to intentionally expose the child to any illegitimate physical abuse or harmful practice.”

Secondly, Law No. 126 of 2008 added Article 242-bis to the Penal Code:

“Without prejudice to the provisions of Article (61) of the Penal Code and
not withstanding any severer punishment in any other law, any person causing injury stipulating punishment as per article 241 and 242 of the Penal Code through female circumcision shall be punished by imprisonment for no less than 3 months and at no more than 2 years or a fine at no less than one thousand pounds and at no more than 5 thousand pounds.” (Jha & Anand 2017, p.24)

The new legislation meant that FGM was banned. However, the light sentence of only 3 months to 2 years imprisonment was hardly a deterrent. Consequently, the legislative amendments did not reduce the high rates of FGM in Egypt. Furthermore, the laws did not change the number of deaths due to FGM between 2007 and 2013 (Jha & Anand 2017).

Subsequently, former Egyptian president Mohamed Morsi signed two pieces of legislation into law under the constitution in 2013.

“The human body is inviolable and any assault, deformation or mutilation committed against it shall be a crime punishable by Law”.

And, Article 80:

“The State shall provide children with care and protection from all forms of violence, abuse, mistreatment and commercial and sexual exploitation.”

(Polimeno 2015, p.19)

Further amendments took place in 2016, with FGM declared a felony, with a harsher sentence of 5 years for any person practising FGM or mutilating any part of the female genital organ. However, there are still very few convictions as a result of the lack of integrity of Egypt’s judicial system and more needs to be done to educate community officials, as well as law enforcement and justice agents (28 Too Many 2017).

Medicalisation of FGM has consequently had the unwanted effect of ‘legitimising’ the practice. Doctors are of high social status and bound by the Hippocratic Oath to uphold ethical standards of hard-won scientific gains in medicine. Support from the medical fraternity to continue performing FGM, however, violates the trust between patient and doctor, who have a special obligation to their fellow human beings. “The medicalization of FGM in Egypt is a huge challenge in the campaign to end the practice; currently, 78.4% of incidences of FGM are carried out by a health professional” (Jha & Anand 2017, p.26). Moreover, families paying for
FGM create a good income for medical professionals and local healers, further compounding the situation.

Medicalised FGM is most common in the Urban Governorates and Lower Egypt, perhaps because easy access to health professionals and the funds to pay them is more common for families living there. Nearly two-thirds (64.5%) of girls and women aged 13-35 who have been cut underwent FGM either at home or at another house. 11.5% of those living in urban areas underwent FGM in a private hospital, compared to 2.7% of those living in rural areas. A study as recent as 2016 noted that ‘physicians are not discouraging the practice, giving legitimacy to a procedure that has serious medical risks.’ Medical professionals have an economic incentive to continue performing FGM, especially those in rural areas.

(28 Too Many 2017, p.4)

Egyptian gynaecologist Amani Refaat published a study titled “Medicalization of female genital cutting in Egypt” in the Eastern Mediterranean Health Journal in 2009. The study focuses on the medicalisation of FGM in Egypt, and covers the four main medical disciplines, namely surgery, medicine, obstetrics/gynaecology and paediatrics. The study was conducted to understand why medical professionals practice FGM. Refaat concluded that many do so to avoid families going to local healers. Refaat’s study also exposed a lack of sexual education among medical professionals. Participants were familiar with the biology of the female genitalia, but exhibited an obvious lack of knowledge of the sexual functions. Other factors that contributed to the medical fraternity continuing the procedure include ambiguity of religious texts on FGM, the indecisiveness of religious leaders on FGM, as well as the inconsistency of government legislations and execution of the laws on FGM (Refaat 2009).

Despite the attempted shift away from medicalisation, with harsher penalties for doctors, the implementation of these laws is still a constant source of disappointment. The first conviction of a doctor, following President Morsi’s legislation, was in 2013 following the death of a young girl from post procedure infection under Dr Raslan Fadl. Dr Fadl denied the allegation of manslaughter, but was nevertheless sentenced to two years in prison and his medical license revoked. However, Dr Fadl was only imprisoned for three months out of this five-year sentence. The girl’s father was also convicted, but appealed, resulting in a suspended sentence (Jha & Anand 2017). To this day there remain relatively few convictions of FGM practitioners.
Religion plays an important role in the perception of FGM by the doctor, the patient and the patient’s family. To illustrate, FGM is not only practised in Muslim communities, but it is also practised in Christian communities. As stated by Goeman Bind, an NGO think tank, the prevalence of FGM among women aged 15 to 49 according to their religion in Egypt is 81.4% of Muslims, 75.5% of Traditionalists/Animists, 66.1% of Catholics, 60.0% of Protestant, and 62.1% of non-religious status (Jha & Anand 2017).

Egypt is ruled predominantly by men in every aspect of life through the army, the power of imams, and Sharia laws. Al-Azhar is the main Islamic organisation that enforces Islamic laws. Furthermore, Egypt has no separation between Church (Islam) and state. Countries, such as Saudi Arabia, that implement Sharia (religious) law, obey the rulings of the Sunnah and Hadith (the sayings and teachings of the prophet Muhammed), which allow for cutting off a thief’s hand in public. The army and imams (Islamic leadership position) control mosques and the media, which provides a platform for the fatwas (Muslim’s legal rules) issued by imams. Different imams’ interpretation of the Hadith and Quran varies upon their personal agenda. While some imams are against FGM, others see it as a Sunnah, implying an obligation or duty. However, both groups do not deal with FGM as a core value and the topic does not create any tension or value judgment among imams.

There are various fatwas pro and anti FGM dating back to 1949. In 1996, Sayed Tantawi the Imam of Al-Azhar University in Cairo announced a ban on FGM. Then in 2006, Al-Azhar University in Cairo, in collaboration with a German human rights organisation, passed a resolution to ban on FGM as a harmful practice with regulations to punish the offenders. (GIZ 2011)

Anti FGM Muslim scholars, such as Sheikh Rashid Rida, wrote about FGM in 1904 as a harmful practice and said that it is not a Sunnah, as it is not mentioned in any hadith by the prophet. “In 2006, the Grand Sheikh of the deeply venerated Al-Azhar University and other Islamic scholars ruled that female genital mutilation is antithetical to Islam’s teachings” (Baig 2017).

While many scholars agree that FGM is not a part of Sunnah, other Muslim groups claim that FGM is an obligation. The latter view dominates in Muslim countries, and such scholars push for the practice to be legalised under Sharia law. Al-Hanabilah and Shafi’yyah, Muslim denominations, which are predominantly in Egypt and other surrounding countries, regard FGM as an “obligation” to women. Although religious leaders may not agree on the obligation
of FGM under Sharia, they remain open to all interpretations, making resistance efforts to FGM complex (No Peace Without Justice 2005).

Other Muslim countries such as Tunisia and Morocco do not practise FGM on girls because of the dominant belief that it is not mentioned nor confirmed in the Quran or Hadith. Furthermore, they believe that there is no proof that Prophet Mohamed “mutilated” or “circumcised” or “purified” his daughters. In contrast, countries such as Sudan, Eritrea and Egypt use the Quran and Hadith to prove the practice is an obligation for Muslim boys and girls. They base their FGM argument on the Hadith by Prophet Mohamed.

Abu Hurayrah said: I heard the Prophet (peace and blessings of Allaah be upon him) say: “The fitrah is five things – or five things are part of the fitrah – circumcision, shaving the pubes, trimming the moustache, cutting the nails and plucking the armpit hairs.”

Bukhari 5891; Muslim 527 (2017)

Abu al-Malih ibn ‘Usama's father relates that the Prophet said: "Circumcision is a law for men and a preservation of honour for women."

(No Peace Without Justice 2005)

The first Hadith includes circumcision as one of the Fitrah and the Fitrah is the “instinct” or the “primordial human nature”. The Hadith has made FGM a part of a natural process that girls have to undergo as a part of cleansing oneself. The second Hadith made FGM a part of women’s dignity and honour. Various hadiths have led to calling FGM “purification” in some countries such as Egypt, Sudan and Eritrea, while other countries call it “Sunna” which is the teachings of prophet Muhammed to emphasise that FGM is an obligation.

Another hadith, during a conversation between the Prophet and a local healer by the name of Um Habibah (or Um ‘Atiyyah), states: ‘When you cut, do not cut too much. That way you allow the woman more pleasure, and it is more pleasant for the man.’ Muslim scholars and imams use this hadith to justify FGM. This hadith, however, also demonstrates awareness in the religious communities of FGM and its impact on women’s sexuality. While some Muslims rely on this hadith, others rely on the Quran directly, interpreting verses about circumcision as an obligation that applies to both men and women equally. (GIZ 2011)

Religious leaders in various religions have endorsed the practice of FGM and use religion and culture as a shield to protect the practice. Their goal is to place it beyond the reach of
international criticism. Religious leaders have direct influence on communities, as they are the ones who cut the girls to be “pure”.

One of the most profound values relating to FGM is ‘purity’. The basic rationale for FGM in many practising communities is that it makes the girl child ‘pure’, so she can emerge into adulthood ready for the economic transaction which will result in her early marriage, and cleansed of the genital organs which are regarded as unclean, perhaps taboo.

(Burrage 2015, p.16)

In order to eradicate FGM, it is important that countries be aware of the various challenges that include language, legislation, traditions, communities, religious leaders and patriarchy. A summary of the challenges for the eradication of FGM in Egypt is below:

1- FGM is considered to be a religious act of “purity” which makes it harder to implement anti FGM laws. In Egypt, 90% of the population are Muslims and 10% are Christians. Both religions practice FGM as a religious and cultural norm (28 Too Many 2017).

2- FGM is a common practice, yet it is also a taboo, especially with government control on media and the lack of freedom of speech.

3- FGM is seen as a protection of women and girls - from their own desires. 48.7% of Egyptian men and 43.1% of Egyptian women believe FGM prevents adultery (28 Too Many 2017).

4- FGM has various terms in Arabic which lead to linguistic and terminology challenges between international organisations and the Arabic speaking public. While international organisations use FGM, the public most commonly uses “purity”.

5- The absence of quality sexual education in schools as a result of stigmatising cultural taboos relating to sexual education and beliefs that this will cause promiscuity.

6- FGM is medicalised, which means it is performed by local healers, circumcisers, health professionals and doctors, all of whom carry status in the community (Jha & Anand 2017).
7- The obvious lack of information on female genital functions within medical professionals, which resulted in the WHO implementing training programs to retrain 1,000 doctors per annum on FGM (28 Too Many 2017).

2.2 United Nations and Interagency Coordination – structure, goals, language policy and FGM

Since its founding in 1945, the United Nations (UN) has afforded its member countries the opportunity to balance both global interdependence and national interests when addressing international problems. Resolutions are based on the UN’s founding principles concerning justice, human dignity and the well-being of all people. The UN’s influence is such that the decisions made at the Assembly form the basis for governmental opinions across the world. At the heart of this effort is international coordination.

International coordination is a monumentally difficult task. Not only are there competing political and ideological differences, there are dissimilarities in almost every other aspect of human endeavour. From trade and financial relationships, access to information, gender equality, literacy and numeracy rates, population demographics, cultural history, to social progress and more. However, there is something more rudimentary at the core of international coordination: language.

The UN is proudly multilingual, with 6 official languages, a strategic policy framework, and various initiatives focused on increasing multilingualism internally.

The UN’s official languages, that is, Arabic, Chinese, English, French, Russian and Spanish, have been adopted and endorsed as a result of sixty years of international diplomacy. This diplomacy has fostered the need for translation and interpretation services between the official languages, and it is this specialised translational need that is the essence of the political and practical functioning of the Organisation.

It should come as no surprise then, that the UN is one of the world’s largest employers of professional translators and interpreters of its official languages. With over 1,000 staff at United Nations Headquarters in New York and almost 2,000 worldwide, including conference management staff at the United Nations Offices at Geneva (620), Vienna (174) and Nairobi (65), the Department for General Assembly and Conference Management (DGACM) is the largest in the United Nations Secretariat (United Nations 2010).
The UN and its structure, its goals and its experience all provide an important case study into language policy and translation. Before any analysis can be undertaken regarding the role of translation in social intervention, it is necessary to first examine the UN’s organisational structure, relevant accountability, as well as language and translation policies. For the sake of brevity, only the core structures relating to English-to-Arabic translations will be discussed. However, the process remains fundamentally the same for all the other official languages.

2.2.1 UN organisational structure

![UN DGACM organisational chart]

According to Cao and Zhao:

The UN uses and operates in six official languages in its intergovernmental meetings and documents. The UN Secretariat uses two working languages, English and French. Statements made in an official language at a formal meeting are interpreted simultaneously into the other official languages of the
body concerned by UN interpreters. If a delegation wishes to speak in a language that is not an official language, it must supply an interpreter to interpret the statement or translate it into one of the official languages. It is then rendered into the other languages by a relay system. Documents are produced in the six official languages and are issued simultaneously when all the language versions are available.

(Cao & Zhao 2008, p.39-54)

For matters relating to FGM, the in-session documents are the result of agreement reached through discussions between delegates. The documents are under the direct control of the DGACM who are responsible for translation and general language management.

Cao and Zhao (2008, p.41-43) further describe the provision process for documentation, summarised below:

1- Documentation programming and monitoring

2- Document control

3- Editorial control

4- Reference and terminology: “Documents often contain text based on material previously translated or references to resolutions or other published materials. The proper referencing of the texts helps ensure correct translation and speeds up processing. Increasing specialisation and in-depth consideration of technical questions means that new vocabulary is constantly being formed, and terminology lists in all languages must be kept up to date.”

5- Translation

6- Text processing and typographic style

7- Official records: “Editors ensure that all six language versions of resolutions and decisions and other official records comply with UN editorial standards and, operating in multilingual teams, play a crucial role in maximising consistency across languages”

8- Copy preparation and proof-reading
9- Publishing

More specific to translation, within the DGACM, there is the Documentation Division directly responsible for translation and various other support services. It includes the Terminology and Reference Service, which provides translators with the background information they need to do their work. The Division also provides reference and terminology services for authors, drafters, editors, interpreters, translators and verbatim reporters. It develops terminology databases that are available to users within the UN system and to the general public (Cao & Zhao 2008).

This organisational framework provides us with the critical lens with which we ought to view the UN and its subsidiaries in relation to the FGM discourse.

2.2.2 Terminology and Translation

Arabic language has various lexes for FGM including the words (ختان) (khetan) which means “circumcision”, (طهارة) (tahara), which means “purification”, (قطع) (katt) which means “cutting”, (تشوية) (tashweeh) which means, “distortion” and the term (البتير) (batr) which means “mutilation”. Each term has its own connotation which varies from medical to religious and cultural connotation as follows:

1- (Batr) (البتير) is a noun meaning “mutilation” or “amputation”: largely used by medical professionals and has a strong negative connotation, as shown with the example: {Arm amputation causes a huge disability} which translates to {البتير في الذراع يسبب إعاقة كبيرة} (Team 2018).

2- (Khetan) (ختان) is a noun meaning “circumcision”: used by the educated public with a neutral or pro FGM connotation, as in the example: {The circumcision for men or women is part of fitrah and Islamic Sharia} which translates to {وأن الختان بالنسبة للرجل أو المرأة جزء من الفطرة ووالشريعة الإسلامية} (Reverso Context 2017a).

3- (Katt) (قطع) is a noun meaning “cutting”: used by medical professionals and rarely used by the public. As per the example: {Surgeons, all we do is cut and sew} which translates to {الجراحون كل ما نفعله هو القطع والخياطة} (Reverso Context 2017d).

4- (Tashweeh) (تشوية) is a noun means, “distortion”: has a political connotation which is used largely by the UN and its agencies and rarely used by the public. As per the example: {Truth reflects on the world as it
really is, without distortion] which translates to {قد كان رمزاً للعندرة والطهارة} (Reverso Context 2017c).

5- (Tahara) (طهارة), is a noun meaning “purification”: largely used by the public as whole. As per example: {It was a symbol of virginity and purity} which translates to {فقد كان رمزاً للعندرة والطهارة} (Reverso Context 2017b).

6- (Jadea) (جدع), is a noun that means “stump”. It is neutral and rarely used by the public or international organisations. As per example: {In addition, cutting off, or removing, the genitals is looked upon as insurance of the child’s virginity and faithfulness} which translates to {كما أن جدع هذه أو} (Glosbe 2018).

Dr Fayyāḍ, a very prominent Muslim doctor in the Arab world, uses “Batr” in Arabic which translates as “mutilation” in English. Dr Fayyāḍ is a well-known Egyptian gynaecologist and scholar who advocates for the eradication of FGM in North Africa through his work as a gynaecologist and through his research. His main focus was advocating that FGM is not based or confirmed by the Quran or Hadith. In his book on FGM he analysed the challenge of FGM terminology in Arabic and English. Dr Fayyāḍ uses the term “Al Batr al tanasoly lel ontha”, (البتر التناسلي للأنثى) or “Female Genital Mutilation” as the book’s title and advocates for the term to be considered as the only accurate term in Arabic.

Dr Fayyāḍ (1998) endorses the UN adoption of “mutilation” in Arabic [My own translation from Arabic to English]:

وفي أثناء انعقاد مؤتمر الأمم المتحدة للمرأة في كوبنهاجن في عام 1980، بدأت المنظمات الغير حكومية في وضع قضية الختان على جدول الأعمال الدولي. وقد بنت المناقشات الحادة التي دارت بعد ذلك قضية الختان حساسة ومعقدة.

واتبعت وفود المرأة في كل مؤتمر للدفاع عن إلغاء الممارسات التقليدية الضارة. وخصوصاً ما أسميه (طقس البتر التناسلي الهمجي).

(Fayyāḍ 1998, p.42)

[Back translation: During the United Nations Conference on Women in Copenhagen in 1980, initiated by non-governmental organisations to put the circumcision issue on the international agenda, the heated discussions revealed that the circumcision issue is both sensitive and complex.}
The delegations of women targeted every conference to defend the abolition of harmful traditional practices, especially what they called (barbaric genital mutilation custom) (Fayyāḍ 1998, p.42).

The term “Female Genital Mutilation” was adopted on an international level, starting from 1991 to replace the old term “circumcision”. (Fayyāḍ 1998).

The UN acknowledged that the English term “Female Genital Mutilation” (FGM) is equivalent to the Arabic term, “Batr al Aadaa al Tansolya lel ontha” (المنصبة التناسلية للأنثى). Moreover, Dr Fayyāḍ confirms that the term’s adoption is accurate from English to Arabic because of the fact that FGM is the cutting of healthy skin and because of the lack of consent (Fayyāḍ 1998).

The UN and WHO analysed the language used when discussing FGM and found that there are three terms in English, “female circumcision”, “female genital cutting” (communities respond similarly to the terms “circumcision” and “cutting”) and “female genital mutilation”. Interestingly, the “Declaration: on the Terminology FGM; 6th IAC General Assembly, 4 - 7 April, 2005, at Bamako/Mali”, had this to say:

An issue of concern at the 6th General Assembly [has] been attempts to dilute the terminology Female Genital Mutilation (FGM) and replace it with the following: ‘Female Circumcision’, ‘Female Genital Alteration’, ‘Female Genital Excision’, ‘Female Genital Surgery’, and more recently ‘Female Genital Cutting’ (FGC).

Female Genital Cutting (FGC) does not reflect the accurate extent of harm and mutilation caused by all types of FGM. This terminology has been adopted by some UN specialized agencies and bi-lateral donors influenced by specific lobby groups largely based in western countries. These changes trivialize the nature of female genital mutilation and the suffering of African women and girls [and] made without consultation, [they] override the consensus reached by African women in the front line of the campaign as well as the millions of African girls and women who suffer in silence. We want the world to know that in 1990 African women [activists] adopted the term FGM at the IAC General Assembly in Addis Ababa, Ethiopia. They took this
brave mentality and behaviours of African people, [yet to insist] that this pain [is] integral to [empower] girls and women to address FGM [and to take] control of their sexuality and reproductive rights. Experience indicates that long-term change occurs [only] when change agents help communities to go through this painful process. Not to confront the issue is to [promote] denial of the gravity of FGM, thus resulting in mere transient change. We recognize that while it may be less threatening for non-Africans to adopt other less confrontational terminology in order to enter into dialogue with communities, it is imperative that the term FGM [be] retained. The term FGM is not judgmental. It is instead a medical term that reflects what is done to the genitalia of girls and women. It is a cultural reality. Mutilation is the removal of healthy tissue. The fact that the term makes some people uneasy is no justification for its abandonment. We would highlight that FGM was adopted [by] consultation and consensus [among] African experts [at] the first technical working group meeting held in Geneva in 1995 and gained worldwide currency and acceptance. The Beijing conference also adopted and used female genital mutilation.

(Burrage 2015, p.13-14)

IAC General Assembly participants confirmed the adoption of the term FGM in English and acknowledged the importance of having one term that describes the act accurately without any restraint. IAC participants went further to demand that all international organisations should use “FGM” as the only term in all documentation and legislation. In French “FGM” was adopted as “Sexual Mutilation” as an equivalent. The adoption efforts of the term in English and French are commended. However, Arabic, arguably one of the more important languages when it comes to FGM, has yet to see such scrutiny applied to such terms.

Some of the resistance to the term FGM stems from the victim/perpetrator complicity. International organisations argued that they could not call the women and girls who underwent FGM “victims” or “survivors” because by this definition, their parents and grandparents (who are themselves victims of FGM) are thereby the “perpetrators” or “criminals” (Burrage 2015).

The United Nations and its agencies adopted the term “Female Genital Mutilation” in English to eradicate the practice. According to Hilary Burrage (2015), the UN adopted the term mutilation help to protect young girls.
Moreover, as mentioned earlier, FGM is normally practised on children. It is clear that children are unable to give consent for a practice they cannot fully understand. The practice is at a minimum, an unnecessary permanent bodily modification, with far reaching negative consequences for the psychological and socio-cultural sphere. The term mutilation helps to highlight the issues surrounding consent. Burrage (2015) states that the UN should maintain the same terminology as in English in order to fulfil its mission in eradicating FGM.

Communities that practise FGM as a cultural and religious practice even refer to it as “purification”. Girls who did not go through FGM are called names like “unbelievers”, “impure” and ”unclean” (Ali 2008). The practice is reinforced by female parents and grandparents, most, if not all, who have been victims of FGM as well. Communities call the practice “purification” because they believe they are doing the right thing for the future of their girls.

Parents and grandparents genuinely want to protect their daughters by purifying them. Mothers and grandmothers are usually the ones holding their daughters down for them to be “purified” by the “local healers”. When the UN first proposed changing the language from “circumcision” to “mutilation”, there was some resistance from those communities who firmly believe that they are protecting their daughters by “purifying” them. Even in the present, there are those who hold the belief that terms like mutilation increase the resistance from the communities to confront the issue. To combat this, the UN introduced the term “cutting” to supplement “mutilation” in English to help engage with communities, while keeping the term “mutilation” at documentation and policy level.

As discussed previously under ‘From Circumcision to Mutilation’, the UN Interagency Statement published in 2008, has the clearest position on the terminology to be used for FGM.

While FGM has one term in English, it has at least five different terms in Arabic, with each term having its own connotation. This makes it difficult for translators when interpreting FGM from English to Arabic. Moreover, translators are a part of society, and cannot be without bias because they understand the text based on their knowledge and cultural background as illustrated in the next example included in full, both in English and Arabic:
Annex 1: Note on terminology

The terminology used for this procedure has undergone various changes. During the first years in which the practice was discussed outside practising groups, it was generally referred to as “female circumcision”. This term, however, draws a parallel with male circumcision and, as a result, creates confusion between these two distinct practices.

The expression “female genital mutilation” gained growing support from the late 1970s. The word mutilation establishes a clear linguistic distinction from male circumcision, and emphasizes the gravity and harm of the act. Use of the word “mutilation” reinforces the fact that the practice is a violation of girls’ and women’s rights, and thereby helps to promote national and international advocacy for its abandonment.

In 1990, this term was adopted at the third conference of the Inter-African Committee on Traditional Practices Affecting the Health of Women and Children, in Addis Ababa, Ethiopia. In 1991, WHO recommended that the United Nations adopt this term. It has subsequently been widely used in United Nations documents and elsewhere and is the term employed by WHO.

From the late 1990s the terms “female genital cutting” and “female genital mutilation/cutting” were increasingly used, both in research and by some agencies. The preference for this term was partly due to dissatisfaction with the negative association attached to the term “mutilation”, and some evidence that the use of that word was estranging practising communities and perhaps hindering the process of social change for the elimination of female genital mutilation. To capture the significance of the term “mutilation” at the policy level and, at the same time, to use less judgemental terminology for practising communities, the expression “female genital mutilation/cutting” is used by UNICEF and UNFPA. For the purpose of this Interagency Statement and in view of its significance as an advocacy tool, all United Nations agencies have agreed to use the single term “female genital mutilation.”
هذه الملاحظة الملازمة بشأن المصطلحات

لقد شهدت المصطلحات المستخدمة لهذا الإجراء مصطلحات أقل إعداداً للمجموعات المشاركة في استخدامها/اختصار الأعضاء التناسلية للأفراد في كل من اليونيسف وصندوق الأمم المتحدة للسكان، وأعراض هذا الانتهاك الشامل走私 the bị النظر إلى أحياناً بوصفها مادة للعدوى. القضايا جميع وكالات الأمم المتحدة على استعمال مصطلح واحد هو "تشويه الأعضاء التناسلية للأفراد".

وقد أكّدت علامة "تشويه الأعضاء التناسلية للأفراد" بأداءً لتزويدي من أواخر السبعينات، حيث إن كلمة تشويه تخلق مفهوماً غامباً وأصياً عن ختان الذكور، وأشعرني على خطورة وضرره هذا الفعل، وتزعززع كلمة "تشويه" وفق أن هذه الممارسة تعد انتهاكاً لحقوق الفتيات والنساء، وبالتالي فهي تشجع الدعوة على الصعود الوطني والدولي إلى الإبلاغ عنها.

وتم اعتام هذا المصطلح في عام 1990 في المؤتمر الثالث للجمعية المشركة بين البلدان الأفريقية المعتادة بمشاريع التنمية التي تعزز على مراعاة المرأة والفتيان في معددة أجزاء، إثيوبيا. وفي عام 1991 أوصت منظمة الصحة العالمية بأن تعمد الأم المشركة هذه المصطلح، وتم استخدامه على نطاق واسع فيما بعد في وثائق الأمم المتحدة وغيرها، وهو المصطلح الذي يستخدمه منظمة الصحة العالمية.

وتزداد من أواخر السبعينيات استخدام المصطلحات "دجع الأعضاء التناسلية للأفراد" "تشويه/دجع الأعضاء التناسلية للأفراد" في البحث من قبل بعض الكاملاة. ويعود تقبل هذا المصطلح جزئياً إلى الانتهاك من جانب الأشكال السلبية المتعلقة بـ "تشويه" وهو المصطلح الذي تفيد بأنه استخدم تكلم القدماء التي تمارس هذا التشويه وقد يعوق عملية التغيير الاجتماعي لخصوص من هذه الممارسة، ويعتبر عادة معرفة المصطلح "تشويه" على مستوى البلدان، وفي الوقت نفسه استخدم

My own translation from Arabic to English found in Annex 1: Note on terminology in Arabic translated back into English, goes on to state:

The terminology used for this procedure has undergone various changes. During the first years in which the practice was discussed outside practising groups, it was generally referred to as ‘female circumcision’. This term,
however, draws a parallel with male circumcision and, as a result, creates confusion between these two distinct practices.

The expression ‘female genital distortion’ gained growing support from the late 1970s. The word ‘distortion’ establishes a clear linguistic distinction from male circumcision, and emphasises the gravity and harm of the act. Use of the word ‘distortion’ reinforces the fact that the practice is a violation of girls’ and women’s rights, and thereby helps to promote national and international advocacy for its abandonment.

In 1990, this term was adopted at the third conference of the Inter-African Committee on Traditional Practices Affecting the Health of Women and Children, in Addis Ababa, Ethiopia. In 1991, the WHO recommended that the United Nations adopt this term. It has subsequently been widely used in United Nations documents and elsewhere and is the term employed by WHO.

From the late 1990s the terms ‘female genital excision’ and ‘female genital distortion/excision’ were increasingly used, both in research and by some agencies. The preference for this term was partly due to dissatisfaction with the negative association attached to the term ‘distortion’, and some evidence that the use of that word was estranging practicing communities and perhaps hindering the process of social change for the elimination of female genital distortion.

To capture the significance of the term ‘distortion’, and some evidence that the use of that word was estranging practicing communities and perhaps hindering the process of social change for the elimination of female genital distortion.

To capture the significance of the term ‘distortion’ at the policy level and, at the same time, to use less judgmental terminology for practicing communities, the expression ‘female genital distortion/excision’ is used by UNICEF and UNFPA. For the purpose of this Interagency Statement and in view of its significance as an advocacy tool, all United Nations agencies have agreed to use the single term ‘female genital distortion’.

The note of terminology is contained in the English version of the UN statement on FGM and yet the Arabic translation remained inaccurate with various terms included as illustrated above.
Arabic translators used ‘female genital distortion’ and ‘female genital excision’ every time ‘female genital mutilation’ was mentioned in the Interagency Statement.

The UN employs two words in English – ‘mutilation’ and ‘cutting’ – in addition to referencing the vestigial term ‘circumcision’. The same applies in Arabic, whereby the term ‘tashwee (تشويه)’ is meant to be analogous to mutilation, and ‘jadae (جدع)’ is comparable to excision. The vestigial term, circumcision, is referred to as ‘khetan (ختان)’. The annex also explains the less judgmental language (the inclusion of cutting) used by the UNICEF and UNFPA.

The reference the Annex makes to UNICEF should be further investigated. The most recent UNICEF report on FGM in 2005, used the term ‘Female Genital Mutilation’ in its English publication prior to the usage of the term in the WHO publication. However, in Arabic, Female Circumcision (ختان) is proudly displayed on the cover (highlighted in red). The cover for both publications is shown below.

Figure 2: UNICEF report on FGM (UNICEF 2005a, 2005c)

In the English version, the publication then goes on to state:

The expression “female genital mutilation” (FGM) gained growing support in the late 1970s. The word “mutilation” not only establishes a clear linguistic distinction with male circumcision, but also, due to its strong negative connotations, emphasizes the gravity of the act. In 1990, this term was adopted at the third conference of the Inter African Committee on Traditional Practices Affecting the Health of Women and Children (IAC) in Addis Ababa. In 1991, WHO recommended that the United Nations adopt this
terminology and subsequently, it has been widely used in UN documents. The use of the word “mutilation” reinforces the idea that this practice is a violation of girls’ and women’s human rights, and thereby helps promote national and international advocacy towards its abandonment. At the community level, however, the term can be problematic. Local languages generally use the less judgmental “cutting” to describe the practice; parents understandably resent the suggestion that they are “mutilating” their daughters. In this spirit, in 1999, the UN Special Rapporteur on Traditional Practices called for tact and patience regarding activities in this area and drew attention to the risk of “demonizing” certain cultures, religions and communities. (As a result, the term can be problematic. Local languages generally use the less judgmental terminology with practicing communities, the expression “female genital mutilation/cutting” (FGM/C) is used throughout this Digest.

(UNICEF 2005a, p1-2)

Comparing now to the Arabic version:

ولقد استعمل كلمة "بيتر" "بتعرف الفكرة القائلة بأن هذه الممارسة تعد انتهاكاً لحقوق الإنسان للأم مئنياً في أواخر السبعينيات من القرن العشرين. كلمة "بيتر" لا تحدد فحسب الفرق الثقافي الواضح بينها وبين تعبير "ختان الذكور" بل انها تؤكد أيضاً - بسبب مصادمتها السلبية تقريبًا - جسامة هذا الفعل. وفي عام 1990، تم استعمال هذا التعبير في المؤتمر الثالث للجنة غير الحكومية للممارسات التقليدية التي تمس صحة المرأة والطفل في أديس أبابا. أما في 1991، فقد اوصت منظمة الصحة العالمية بأن تعتزم منظمة الأمم المتحدة هذه المصطلحات، فقامت، نتيجة لذلك، تستعمل على نطاق واسع في وثائق الأمم المتحدة.

إن استعمال كلمة "بيتر" يعزز الفكرة القائلة بأن هذه الممارسة تعد انتهاكاً لحقوق الإنسان للأم مئنياً للفتاة والمرأة، وهو يساعد على دعم الدعوة إلى المستويين الوطني والدولي، نحو التخلص عن هذه الممارسة. لكن استعمال هذه الكلمة على مستوى المجتمع المحلي يمكن أن يكون مثيراً للجدال. اللغات المحلية تستعمل بشكل عام كلمة "قطع" الأماء التناسلية الخارجية للأنثى لوصف هذه الممارسة، وهي كلمة تتطلب قدرًا أقل من الحكم الشخصي. وبناء الأماء والمهام، بطريقة مفهومة متعاطفة، من الإبحار القائل بأنهم "بيترون" (أو "فيندون"، و"وشهوين") عضواً من أعضاء بنائهم.

وفي سياق هذه الروح، دعا المقرر الخاص للأمم المتحدة للممارسات التقليدية، في 1999، للتحلي بالصبر واللياقة بالنسبة للنشاطات التي تبذل في هذا المجال وللتثبيت إلى خطر انتهاك لحقوق
[Back translation: The expression “Female Genital Mutilation (FGM)” gained growing support in the late 1970s. The word “mutilation” not only establishes a clear linguistic distinction with “male circumcision”, but also, due to its strong negative connotations, emphasises the gravity of the act. In 1990, this term was adopted at the third conference of the Inter African Committee on Traditional Practices Affecting the Health of Women and Children (IAC) in Addis Ababa. In 1991, WHO recommended that the United Nations adopt this terminology and subsequently, it has been widely used in UN documents. The use of the word “mutilation” reinforces the idea that this practice is a violation of girls’ and women’s human rights, and thereby helps promote national and international advocacy towards its abandonment. At the community level, however, the term can be problematic. Local languages generally use the less judgmental “cutting” to describe the practice; parents understandably resent the suggestion that they are “mutilating” or “distorting” or “damaging” a part of their daughters’ bodies. In this spirit, in 1999, the UN Special Rapporteur on Traditional Practices called for tact and patience regarding activities in this area and drew attention to the risk of “demonising” certain cultures, religions and communities. (As a result, the term “cutting” has increasingly come to be used to avoid certain communities’ resentment. To capture the significance of the term “mutilation” at the policy level and, at the same time, in recognition of the importance of employing non-judgmental terminology with practicing communities to “female circumcision”, the expression “Female genital mutilation/cutting” (FGM/C) is used throughout this Digest while the term “female circumcision” will be used in Arabic).

This publication focuses on the accurate terminology to be used when addressing FGM. However, the document has two challenges that need to be addressed separately. The first challenge is the terms. The publication started with the term ‘female genital mutilation’ in English, which was translated accurately in Arabic to ‘female genital mutilation as “Batr al a’ada al tansolya lel ontha” (بينتر الأعضاء التناسلية للأنثى). The next two terms in English were also translated accurately from “mutilation” in English to “mutilation” (بتّر) in Arabic. Then the term
“cutting” in English was translated to “cutting” (قطع) in Arabic. The next term “mutilating” was translated to “mutilating, distorting, damaging” (أو "يشوهن" و"يتشوهن). Thereafter the term “mutilation” was translated to “cutting” (قطع) and “female genital mutilation/ cutting” was translated accurately again to “mutilation” (بتر).

The second challenge is the last paragraph which was translated completely differently to the original as shown in the back translation. The original English document explains that while the English term “female genital mutilation” is accurate, for the sake of the community, the term “female genital mutilation/ cutting” will be used in the document. The Arabic translated document adopted the term “female genital mutilation” in Arabic, then changed it to “female circumcision” to avoid offending the community. The term “female circumcision” has a strong acceptance connotation and defeats the purpose of issuing this publication.

There are many examples from the UN library to illustrate each term and translators’ choices to demonstrate the different connotation of every term on the UN documents.

Below an extract from a document published during the UN General Assembly fifty seventh session titled “Situation of human rights in Sudan” states:

71. Some sources reported unrelated information whereby, during a conference held in the Women’s College of Omdurman Islamic University in May 2002, sponsored by the Ministry of Guidance and Endowment, a female gynaecologist spoke in support 9 A/57/326 of "female genital mutilation" and recommended the introduction of “Islamic medical doctrine” in the training of medical personnel. A religious leader who also participated at the conference reportedly stated that "female circumcision" was an Islamic practice referred to in the Sunna.

(United Nations 2002c, p8-9)
[Back translation, 71. Some sources reported unrelated information whereby, during a conference held in the Women’s College of Omdurman Islamic University in May 2002, sponsored by the Ministry of Guidance and Endowment, a female gynaecologist spoke in support of "female circumcision" and recommended the implementation of “Islamic medical doctrine” in the training of medical personnel. A religious leader who also participated at the conference reportedly stated that "female circumcision" was an Islamic practice referred to in the Sunna.]  

The UN documented the power of religion and Sunna as per the Muslim gynaecologist’s request to not only medicalise FGM but to provide medical professionals with the necessary training and for FGM to be a part of medical records. English to Arabic translators translated “female genital mutilation” and “female circumcision” in English to “female circumcision” in Arabic in this paragraph which reflects on their inability to differentiate between both terms in Arabic and lack of knowledge to the terms’ different connotation.

Another example from the same document,

72. While acknowledging that the Government has not supported such a practice so far and praising efforts including by the civil society aimed at eradicating harmful traditional practices, the Special Rapporteur hopes that discussions such as the one held at the Women’s College will not result in a change of attitude on this issue, which would represent a setback in the fight for the eradication of "female genital mutilation".

(United Nations 2002c, p.9)

[Back translation, 72. While acknowledging that the Government has not supported such a practice so far and praising efforts including by the civil society aimed at eradicating harmful traditional practices, the Special Rapporteur hopes that discussions such as the one held at the Women’s]
College will not result in a change of attitude on this issue, which would represent a setback in the fight for the eradication of "female Circumcision".

English to Arabic translators translated “female genital mutilation” in English to “female circumcision” in Arabic. The challenge in Arabic is not in the lack of terminology but rather in the indecisiveness in implementing terminology that leads translators to choose any term depending on their background. Translators in the above paragraphs were not able to differentiate between the term "female circumcision” and "female genital mutilation".

In another document published during the UN General Assembly fifty third session agenda item 106 titled “Advancement of women titled under traditional or customary practices affecting the health of women”, English/Arabic translators used various terms such as distortion, circumcision and purification. Translators interpreted “female genital mutilation” to “female genital distortion” and translated “female circumcision” to “female purification” in Arabic. “Purification” is a very common term among the public and individuals who support FGM and has a strong connotation of acceptance as explained previously.

The next document is the UN General assembly fifty fifth session titled “Report of the human rights committee”.

198. The State party should take all measures, including legislation, to combat and eradicate the practice of “female genital mutilation”.

The translator in this document translated the term “female genital mutilation” to “female genital cutting” which has a medical connotation and is rarely used by the public.

The next document is from the UN general assembly fifty seventh session titled “Report of the Committee on the Elimination of Racial Discrimination”.

405. The Committee also invites the State party to provide fuller information in its next report on the following issues: (a) the situation of those who are particularly at risk, especially children victims of exploitation, talibé and garibou children, and women in rural areas; (b) measures taken to eradicate the practice of “female genital mutilation”; and (c) the impact of AIDS and
other endemic diseases and the measures envisaged to control and prevent them.

This was the first time the term “female genital mutilation” appears in Arabic in UN documents since 1996, which reflects on the translator’s knowledge of the correct term.

2.3 Translation quality

The UN has a system with six official languages to ensure that language planners, translators and revisers are using accurate language when addressing any matter, including FGM. Language planners implement the language policy, after which UN translators adopt the new terminology, and then revisers evaluate and monitor translations. As per the UN note on terminology, translators should be using “المثلثة” “AL Batr” in Arabic, which is “mutilation” in English on a policy and documentation level.

The United Nations implemented a language policy to have one term in English, namely “mutilation”. However, the UN publication as illustrated above has “mutilation” in English and “circumcision” in Arabic. The UN documents show that the UN has been consistent with using “mutilation” in English, while using a variety of terms in Arabic such as excision, purification, circumcision, cutting, mutilation and distortion. The translators use terms that do not serve the UN mission and are not a part of the UN language policy. UN translators used the term “mutilation” in English and translated it to “المثلثة” “AL Taharah” in Arabic, which means “purification”. “Purification” is the opposite agenda of “mutilation” and it is not a part of the UN language policy.

The UN is dependent on translation because of its six official languages. Translation has been defined by various researchers as the journey of finding a linguistic equivalent based on the language semantics and textual style. Translation can be described as the "a process of substituting a text in one language for a text in another" (Catford 1965). While Nida (1964)
defines translation as "the interpretation of verbal signs of one language by means of verbal signs of another" (Nida 1964, p.14).

Newmark (1981 p.7) states that translation is "a craft consisting in the attempt to replace a written message and/or a statement in one language by the same message and/or statement in another language". He added in (1988) that "translation is rendering the meaning of a text into another language in the way that the author intended the text" (Newmark 1988, p.5).

Anjad Mahasneh states that

Translation therefore is a transfer process from a foreign language or a second language to another language, the interpreting of the meaning of a text and a subsequent production of an equivalent text, communicating the same message in another language.

(Mahasneh, 2016, p.268).

According to Mahasneh, translation focuses on the equivalence in the target language. The equivalence of grammar, euphemism and context is crucial in the translation process.

Translation allows communication between cultures. Therefore translation cannot be conducted without deep knowledge of the culture of languages. Sapir and Mandelbaum state that the "environment and culture have a considerable influence on the language of speakers as is clearly seen in their vocabulary" (Sapir & Mandelbaum 1949).

Translation reflects the cultural background of the topic and the translator. Translation makes the culture available to other cultures. "What truly distinguishes translation is that it takes place in the context of the relations between two cultures, two worlds of thought and perception" (Delisle 1988, p.74).

Roxana Mares, cited in Ghussain and Al Latif, indicates the importance of translation and culture when she states:
[n]othing demonstrates the complexity of language and of specific texts more vividly and explicitly than translation. Further, nothing exposes good writing and bad writing as effectively as translation. Translation is important as a source of diffusion of knowledge of every kind. By understanding the development of every aspect of culture in other civilizations, people can also enrich their understanding of their own culture.

(Ghussain & Al Latif 2003, p.1)

Mares emphasises how significant deep knowledge of the target language and culture is in order to translate accurately from English to Arabic. She explains that the lack of knowledge in the target language leads to translation errors, especially, that the Arabic culture is different to the Western culture. Further, social norms and customs are different from Arabic culture and Western culture. Translators interpret the text depending on their understanding of the text and importantly, their cultural background which may lead to different translations of the same text (Ghussain & Al Latif 2003).

Anjad Mahasneh (2016, p.271), gives an example of the different culture and connotation of English and Arabic:

“In the West, a dog is considered a domestic pet, treated and taken care of as a member of the family, while in the Arab culture, the situation is different. Usually, dogs are not to be found at homes and are not treated as members of the family. Even though the term “dog” in both Western and Arab culture is denotatively identical, it has a negative connotation in the Arab culture, mostly for religious reasons: for example, if a Muslim touches a dog he has to make his ablutions before prayer”.

Translation is difficult because it is based on the deep knowledge of language and culture that impacts the translator choices. English to Arabic translators have to be familiar with the social norms, traditions, idioms, religious and political movements. English to Arabic translators speak colloquially with flexible unlimited lexicon and translate into standard classical Arabic, which has a limited lexicon. Furthermore, Arabic language is based on the Quran, which gives it an influential religious connotation.

FGM Arabic colloquial lexica, which is used by the public as a norm, is different to classical standard Arabic which is used by the UN. This creates a communication gap between the UN and the public. The UN and its agencies use “female genital mutilation” in English while the
public uses “female genital purification”. Moreover, colloquial Arabic has variations depending on the geographic areas. An Egyptian colloquial speaker does not understand a Moroccan colloquial speaker.

Language is an integral part of culture because the vocabulary of a language derives its meaning from its culture. Arabic is associated with specific cultural and social norms quite different from those, associated with other languages.

(Ghussain & Al Latif 2003, p.3)

Mahasneh (2016, p.270) states that “Arabic language is well known for being eloquent, expressive, clear, rich, rational, scientific, flexible, and emotive all at once and in many ways”. Arabic language is expressive, accordingly translators have to make conscious choices when choosing the equivalent to “female genital mutilation”. Arabic translators should be aware of the connotation of every term in Arabic. According to Mahasneh (2016, p.270) “connotative meaning includes the emotional associations which are suggested by lexical items, and is equivalent to emotive or expressive meaning”.

The role of the translator is to formulate the information into the other language depending on the audience requirements, text, connotation and context.

It is the role of the translator to understand the applications and connotations of words and determine suitable equivalents in specific contexts. The translator should decide whether to use the original term to preserve the essence of meaning of the culture-bound word or to use an appropriate translation equivalent.

(Ghussain & Al Latif 2003, p.4)

UN translators have a crucial role and their knowledge of topics is essential for quality translation related to international legislations. English to Arabic translators’ knowledge of terminology and connotation is core to the communication process in both languages. As stated by Said Faiq (2008, p.2), translation is not an easy neutral task and can lead to misinterpretation of the text. “Both literature and translation are highly culturally complex and charged and are not as innocent as they appear”.

English to Arabic translators working on FGM are not translating a term but rather translating a culture, a view and an opinion. If the translator believes that FGM is a deprivation of human rights, the translator will translate “female genital mutilation” to “Al batr Al tanasoly lel ontha”,

which has the equivalent derogatory connotation that includes cutting a healthy part of female bodies and the lack of consent. “Furthermore, the attitudes connotative meaning reveal about an object or an event may be favourable or unfavourable” (Ghussain & Al Latif 2003, p.270). The translator’s choice reflects on deep understanding, or lack thereof, on the topic and working with the UN on the same goals of eradicating FGM.

Connotative meaning according to Nida (1964, p.14), is “the aspects of author and the emotional response of a receptor, it can be bad or good, strong or weak”.

As explained by Nida (1964) and Mahasneh (2016), translation of a term or a topic will reflect on the translator views and biases. Furthermore, translators have the power of influencing their target audience by their choices. Translators who translate “female genital mutilation” to “female genital purification” in Arabic are biased toward mutilating women and girls either for religious or cultural reasons.

English to Arabic translators translating “female genital mutilation” to “female circumcision” in Arabic are biased toward the practice because they relate female circumcision to male circumcision as confirmed by the Sunnah.

As shown earlier, the UN Annex One note on terminology has “Female Genital Mutilation” in English while it has “damaging” and “excision” in Arabic. According to Juliane House (2001), numerous researchers, such as Catford (1965) and Reiss (1971), focused on the way in which quality of translation can be assessed in order to indicate “good” translation versus “bad” translation. House states that researchers have different approaches to translation quality depending on how they define the “meaning”. Researchers evaluate translation quality based on the text meaning or based on the situation, context and interpretation of the text (House 2001).

House (2001) states that translation quality evaluation cannot take place without taking cultural background and norms into consideration. Translation quality and evaluation have to consider the target audience and their culture. She discusses various types of research dealing with quality evaluation. Firstly, “behaviouristic views”, which focus on the target translation compared with the original text to indicate good and bad translation. Secondly, “mentalist views”, which focus on the target audience’s evaluation of the translation without considering the translators’ cognitive efforts. Thirdly, “functionalistic ‘Skopos’”, which focuses on evaluating the quality based on cultural background and norms.
The implications of poor translation when translating “female genital mutilation” as “purification” are financial, emotional and social. According to The European Commission’s Directorate-General for Translation (2015), translation quality has a direct impact on the targeted audience. Accordingly, poor translation has cultural, financial, reputational and legal consequences:

Success in promoting the abandonment of FGM/C also depends on the commitment of government, at all levels, to introduce appropriate social measures and legislation, complemented by effective advocacy and awareness efforts. Civil society forms an integral part of this enabling environment.

(UNICEF 2005a, p.14)

The translation role will be shown in the following examples taken from the UN library.

Example one: The UN General Assembly fifty third session agenda item 106 titled “Advancement of women titled under traditional or customary practices affecting the health of women” states,

33. Harmful traditional practices have been addressed by WHO since 1958, when the Economic and Social Council, in its resolution 680/BII (XXVI), mandated it to undertake a study of persistence of customs which subjected girls to ritual operations and of measures adopted or planned to end those practices. In 1982, WHO expressed its unequivocal opposition to the medicalization of traditional practices in any setting and stated that the involvement of health professionals in such practices could not be justified and would encourage the legitimization of such practices. This approach was reiterated in the context of "female genital mutilation" during the Netherlands Consultancy for Maternal Health and Family Planning Congress on "Female Circumcision" in 1992.

(Packer 2002, p.8)
Harmful traditional practices have been addressed by WHO since 1958, when the Economic and Social Council, in its resolution 680/BII (XXVI), mandated it to undertake a study of persistence of customs which subjected girls to ritual operations and of measures adopted or planned to end those practices. In 1982, WHO expressed its unequivocal opposition to the medicalisation of traditional practices in any setting and stated that the involvement of health professionals in such practices could not be justified and would encourage the legitimisation of such practices. This approach was reiterated in the context of "female genital distortion" during the Netherlands Consultancy for Maternal Health and Family Planning Congress on "Female Purification" in 1992.

Translators in this paragraph translated “female genital mutilation” to “female genital distortion” and translated “female circumcision” to “female purification” in Arabic, which reflects on their views on FGM. “Purification” is used among the public who support the mutilation of women and girls and perpetuate the practice. As stated previously, “purification” has a strong accepting connotation. Translators in this context are not working with the UN on the same agenda but rather creating and supporting opposite views. The misuse of terminology influences the impact of efforts the UN has invested in. Furthermore, the misuse of terminology supports the rates of FGM in Egypt and Sudan.

Example two during General Assembly Fifty-seventh Session Untitled “Report of the Committee on the Elimination of Racial Discrimination”:

440. The Committee notes with satisfaction the State party’s efforts to establish institutions for the protection of human rights, such as the Human Rights Committee, the Inter-Ministerial Committee on Human Rights and the Human Rights and Humanitarian Law Office, and notes the enhanced presence of women in public bodies, their access to ownership of property
and the banning of ‘genital mutilation’. It also appreciates the Government’s
efforts to settle the conflict in Casamance.

(United Nations 2002a, p.73)

[Back translation, 440. The Committee notes with satisfaction the State
party’s efforts to establish institutions for the protection of human rights, such
as the Human Rights Committee, the Inter-Ministerial Committee on Human
Rights and the Human Rights and Humanitarian Law Office, and notes the
enhanced presence of women in public bodies, their access to ownership of
property and the banning of ‘genital mutilation’. It also appreciates the
Government’s efforts to settle the conflict in Casamance.]

The translator in this paragraph translated “genital mutilation” accurately to “Al batr al
tanasoly”, which reflects on the translator’s deep knowledge of the topic and the translator’s
awareness of the right terminology that corresponds with the organisation’s views and targets.
In this way the translator’s accuracy has direct supportive influence on the organisational
message.

The next example is during a General Assembly Meeting Fifty-eighth Session, Item 112 of the
provisional agenda, “Traditional or customary practices affecting the health of women and
girls”. The meeting was held in 2003, many years after the adoption of the term “female genital
mutilation” in English. The meeting was held to address international efforts on eradicating
FGM and other harmful practises.

Example three:

9. Member States, including Denmark, Egypt, Germany, the Netherlands and
Norway, highlighted their cooperation with other Member States and non-
governmental organizations to combat harmful traditional practices.
Denmark reported that it provided financial support to the National Council
for Childhood and Motherhood in Egypt for the aforementioned ‘FGM’ Free Village Model’ project; the National Committee for the Eradication of ‘Female Genital Mutilation’ in Burkina Faso for its information campaigns and local committees; and to the Inter-African Committee on Traditional Practices in Benin for information campaigns, local committees and the education of ‘ex-circumcisers’. Denmark also supported a programme for the rehabilitation of women who had been branded as witches in Northern Ghana. Germany reported on its endorsement of the joint statement on ‘female genital mutilation’ by the World Health Organization, the United Nations Children’s Fund and the United Nations Population Fund. It also reported that it was assisting those three organizations through financial support, active advocacy of the goals of the joint statement in international organizations and bilateral policy dialogue. Germany supported several organizations and initiatives to combat ‘female genital mutilation’. Particular mention was made of a regional project covering Burkina Faso, Chad, Ethiopia, Guinea, Kenya, Mali and Senegal, which involved the use of information campaigns targeted towards girls and women, as well as towards those who perform ‘circumcision’. The Netherlands reported that it had introduced the resolution on traditional or customary practices affecting the health of women and girls at the fifty-sixth session of the General Assembly in 2001. It supported several projects in developing countries to combat harmful traditional practices through advocacy, lobbying and media campaigns. Norway indicated that it would continue to focus on ‘female genital mutilation’ in multilateral contexts and that it planned to intensify bilateral cooperation with African Governments working against ‘female genital mutilation’.

(United Nations 2003a, p.5)
[Back translation; 9. Member States, including Denmark, Egypt, Germany, the Netherlands and Norway, highlighted their cooperation with other Member States and non-governmental organisations to combat harmful traditional practices. Denmark reported that it provided financial support to the National Council for Childhood and Motherhood in Egypt for the aforementioned “Female Circumcision’ Free Village Model” project; the National Committee for the Eradication of ‘Female Genital Distortion’ in Burkina Faso for its information campaigns and local committees; and to the Inter-African Committee on Traditional Practices in Benin for information campaigns, local committees and the education of ‘ex-circumcisers’.

Denmark also supported a programme for the rehabilitation of women who had been branded as witches in Northern Ghana. Germany reported on its endorsement of the joint statement on ‘female genital distortion’ by the World Health Organization, the United Nations Children’s Fund and the United Nations Population Fund. It also reported that it was assisting those three organisations through financial support, active advocacy of the goals of the joint statement in international organisations and bilateral policy dialogue. Germany supported several organisations and initiatives to combat ‘female genital distortion’. Particular mention was made of a regional project
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The translator in this article used “female genital distortion” in Arabic instead of “female genital mutilation”. Then translated “female genital mutilation” in English to “female circumcision” in Arabic. As explained previously “female circumcision” has a positive pro FGM connotation, which does not reflect on the UN’s tremendous efforts and firm stance. The inconsistency of the translation of FGM in this example, is in the same document and within the same paragraph. Translators’ inconsistency could be a result of ambiguous language planning by the UN, lack of glossaries, or translators’ biases.

Example four: during a meeting by the Committee on the Elimination of Discrimination against Women untitled “Consideration of reports submitted by States parties under article 18 of the Convention on the Elimination of All Forms of Discrimination against Women:

‘Female genital mutilation’

341. The Government provides funding to States and Territories for educational activities to prevent the practice of ‘FGM’ in Australia and to assist those women and girls who have undergone the practice. The Royal Australian College of Obstetricians and Gynaecologists has developed a booklet, ‘Female Genital Mutilation: Information for Australian Health Professionals’, for medical practitioners and health professionals providing services to women and girls who have undergone or are at risk of ‘female genital mutilation’. The College has also developed related curriculum materials.

(United Nations 2003a, p.77)
The Government provides funding to States and Territories for educational activities to prevent the practice of ‘Female Genital Stumping (circumcision)’ in Australia and to assist those women and girls who have undergone the practice. The Royal Australian College of Obstetricians and Gynaecologists has developed a booklet, ‘Female Genital Stumping’: Information for Australian Health Professionals, for medical practitioners and health professionals providing services to women and girls who have undergone or are at risk of ‘female genital stumping’. The College has also developed related curriculum materials.

The translator in this example used a new term that is rarely used by the public or by the UN. The term “Jadea” (ﺝﺪع) means stump or revision of stump. The translator then added between brackets “circumcision” to describe the act in the title and the paragraph. The translator’s choices of terms are ambiguous.

Example five: during The Convention on the Elimination of All Forms of Discrimination against Women by the Committee on the Elimination of Discrimination against Women Thirtieth session 2004:

14. Ms. Abasiya (Ethiopia) said that, although ‘female genital mutilation’ had been criminalized, changes in attitudes and raising awareness of its impact would be more effective in ending it. Mothers performed ‘it’ on their daughters, and women should therefore be targeted in efforts to raise awareness. The low rate of contraceptive use could also be attributed to tradition, which viewed contraception as killing a child. Nevertheless, contraceptives were distributed free of charge. Each local council was
training two women as health extension workers to provide information about women’s health, which should begin to have an impact.

(United Nations 2004c, p.4)

14. السيدة عباسية [إثيوبيا] قالت إنه على الرغم من تجريم عملية "تشويه الأعضاء التناسلية للفتات" فإن تغيير السلوكيات ورفع مستوى الوعي هنا أكثر فاعلية في القضاء على هذه الممارسة. وقالت إن الأمهات يمارسن "الختان" على بناتهن، ولذلك يجب أن تستهدف النساء أساساً في حملات التوعية. وقالت إن النسب المنخفضة لإستخدام موانع الحمل تعزى أيضاً إلى التقاليد التي تنظر إلى موانع الحمل على أنها قتل للأطفال، ومع ذلك توزع الواقفات من الحمل مجاناً. ويقوم كل مجلس مهما بتدريب إثنين من النساء كمرشدات صحيات لتقديم المعلومات والارشاد بشأن الصحة النسائية، وأن هذا الجهد بدأ يثمر.

(United Nations 2005, pp.4–5)

This example is very frustrating because the translator not only translated “female genital mutilation” to “female genital distortion” in Arabic, but translated “it”, referring to “female genital mutilation”, in the same paragraph to “female circumcision” in Arabic. This example reflects on the way in which the translation process is not sufficiently monitored nor evaluated.

Female Genital Mutilation (FGM)

Female circumcision or the ‘female genital mutilation’ is a widely exercised cultural practice in Eritrea. Campaign with the aim of minimising its stance was launched during the armed struggle but in vain since it is not easy to change the attitude of men and women towards ‘FGM’, which is strongly related with marriage and sexual satisfaction of men. People still think that ‘FGM’ is useful, in the "fact" that it keeps genitalia clean and preserves virginity. There are three generally practiced types of ‘female circumcision’, ‘infibulation’, ‘clitoridectomy’ and excision that are enforced on girls as early as seven years of age. Despite its long-term psychological and physical strain, its unimaginable pain and medical complications (problems during sexual intercourse and delivery) it is still predominant in the Eritrean communities.


Back translation: ‘Female Genital Mutilation (FGM)’

Female circumcision’ or the ‘female genital mutilation’ is a widely exercised cultural practice in Eritrea. Campaign with the aim of minimising its stance was launched during the armed struggle but in vain since it is not easy to change the attitude of men and women towards ‘FGM’, which is strongly related with marriage and sexual satisfaction of men. People still think that ‘FGM’ is useful, in the "fact" that it keeps genitalia clean and preserves virginity. There are three generally practiced types of ‘female circumcision’, ‘infibulation’, ‘clitoridectomy’ and excision that are enforced on girls as early as seven years of age. Despite its long-term psychological and physical strain, its unimaginable pain and medical complications (problems during sexual intercourse and delivery) it is still predominant in the Eritrean communities.

(United Nations 2004b, p.60)
infibulation, ‘girl circumcision’ and ‘excision’ that are enforced on girls as early as seven years of age. Despite its long-term psychological and physical strain, its unimaginable pain and medical complications (problems during sexual intercourse and delivery) it is still predominant in the Eritrean communities.

This example is the most accurate example, because the translator translated “female genital mutilation” in English to the accurate term in Arabic “Al batr al tanasoly lel ontha” then translated “female circumcision” to the accurate term in Arabic “khetan al enath” and, translated “excision” accurately to “istesaal”. The translator was able to differentiate between “mutilation” and “circumcision” in Arabic. The translator was able to identify the organisation’s needs and support meeting its goals. However, the translator then translated “clitoridectomy” in English to “girl circumcision” in Arabic to indicate the removal of a girl part.

Unfortunately, the UN translation of FGM has not improved over time and has remained inconsistent, as illustrated in example below of the UN Commission on the Status of Women, Fifty-ninth session, 9-20 March 2015. Follow-up to the Fourth World Conference on Women and to the special session of the General Assembly entitled “Women 2000: gender equality, development and peace for the twenty-first century”:

(d) Violence against women: Governments should enforce all the laws which ensure the protection of women against all acts of violence and take integrated measures to prevent and eliminate violence against women.

‘Female Genital Mutilation’: Governments should set all the laws for the prohibition of ‘Female Genital Mutilation’.

(United Nations 2014a, p.1)

(ع. العنف ضد المرأة: ينبغي للحكومات أن تتخذ جميع القوانين التي تكفل حماية المرأة من جميع أعمال العنف وأن تتخذ تدابير متكاملة لمنع العنف ضد المرأة والقضاء عليه.

ختان البنات: ينبغي أن تسنم الحكومات قوانين تمنع ختان البنات.

(United Nations 2014b, p.3)
(d) Violence against women: Governments should enforce all the laws which ensure the protection of women against all acts of violence and take integrated measures to prevent and eliminate violence against women.

‘Female circumcision’: Governments should set all the laws for the prohibition of ‘Female circumcision’.

English-Arabic translators continue to use “female circumcision” instead of “female genital mutilation” twenty years after the UN and its agencies adoption of the term “female genital mutilation”.


Women’s rights, gender equality and women’s empowerment

48. The Government has intensified its efforts to eradicate ‘female genital mutilation (FGM/excision)’ through the National Programme to Combat ‘Excision’, which has dealt with more than 1,080 cases of complications following ‘excision’ and resulted, with the assistance of religious leaders, in more than 8,000 women who carried out ‘excisions’ in almost 1,200 villages abandoning the practice.

(United Nations 2017b, p 10)
48. The Government has intensified its efforts to eradicate ‘female genital distortion’ (Female genital circumcision) through the National Programme to Combat ‘circumcision’, which has dealt with more than 1,080 cases of complications following ‘circumcision’ and resulted, with the assistance of religious leaders, in more than 8,000 women who carried out ‘circumcision’ in almost 1,200 villages abandoning the practice.

UN translators in November 2017 used the term “female genital distortion” to translate “female genital mutilation” from English to Arabic and used “excision” in English, which was translated to the term “circumcision” in Arabic, with resulting positive connotation. Furthermore, the UN used “excision” to address FGM in English. The UN and its agencies should use the term “female genital mutilation” in English and its equivalent in Arabic, in line with its own policy to eradicate FGM and to avoid the confusion.

UN translators should be selected on their qualifications and ability to translate or interpret. The UN should use one term in English and one in Arabic. The UN should select translators who agree with its agenda and should offer translators proper training on terminology. Translation quality is crucial for the UN agenda. The UN has to create glossaries to ensure that translators using the right terminology from English to all of the other five official languages. However, the publications above prove the poor quality translation in some publications from English to Arabic.
Chapter 3

Methodology and data collection

This research project is based on the empirical analysis of publications relating to FGM produced by the UN and its agencies and the terminology used to describe FGM in English and Arabic. Since 1997, the UN’s position on the term ‘mutilation’ has been clear and it has consistently encouraged the use of the term as a tool for advocacy. Therefore, this research aims to prove that the organisation and its agencies has not consistently used the term when translated into Arabic. Publications relating to FGM since 1996 were critically reviewed, covering twenty years of literature, comparing and contrasting the use of the term ‘mutilation’ in English and Arabic, drawing on articles available on the UN library website.

Every year the UN and its agencies hold regular meetings and publish between twenty to sixty documents on FGM in English, which are then translated into Arabic. For the purpose of this research, I collected all the documents published for the twenty years since the UN adopted the term FGM in English. Thereafter I counted the number of times FGM is mentioned in every English document. Then, I compared the same document in Arabic to check all the different terms used in Arabic. The data from a twenty year period was analysed to compare the different terms used by the UN.

I used the UN library to collect the documents published annually on FGM.

“The United Nations iLibrary is the first comprehensive global search, discovery, and viewing source for digital content created by the United Nations.

It provides librarians, information specialists, scholars, students, policy makers, influencers and the general public with a single digital destination for seamlessly accessing publications, journals, data, and series published by the United Nations Secretariat, and its funds and programs.

United Nations iLibrary offers an extensive list of features that deliver flexibility, speed, and efficiency such as intuitive navigation, integrated
search results, granular content, citation tool, DOI identification, and multilingual content.”

(United Nations 2017)

Research data included all documents published by the United Nations since 1996, the year in which the term “Female Genital Mutilation” appears more than once, as long as the original document is published in English. The articles were collected and compared with the corresponding published Arabic article. I then counted the number of times *Female Genital Mutilation* was written in English compared to the number of times *mutilation, damaging, cutting, circumcision, or excision*, was used when translated into Arabic. The articles were then checked for the English terms *circumcision, cutting and excision*, although these will not be the main search terms, as a frame of reference or justification for the appearance of such terms in Arabic.

A translation key was created, to help represent the terms used in English and the terms used in Arabic. English terms were allocated an alphabet symbol from A – D: A Mutilation, B – Circumcision, C – Cutting, D – Excision. Arabic terms were numbered from 1 – 6: 1 – Damaging, 2 – Circumcision, 3 – Cutting, 4 – Purification, 5 – Mutilation, 6 – Reduction. This means, for example, if the term in English is Female Genital Mutilation, and in Arabic it is translated to Female Circumcision, it was recorded as A3 each time it appears in this format.

The documents analysed were restricted to those that include the use of the word *mutilation* more than once in order to identify the different terms used in Arabic within the same document. Furthermore, I only used documents translated from English to Arabic.
Chapter 4

Analysis

Analysing the data over 20 years we are able to see the trends in terminology that translators practice regarding Female Genital Mutilation, and the correlation to its prevalence and change in attitudes in Arabic speaking countries. Included in this analysis is data recorded by UNICEF on Female Genital Mutilation available per country.

Figure 3: Percentage of “mutilation” and its translation into Arabic per year

As seen in Figure 3, in 1996, the terms *tashweeh* (تشويه)/distortion appears in 58% of publications when translating the English term *mutilation*, *khetan* (اختان)/circumcision is used 31% of the time, and *batr* (البتر)/mutilation is used 11% of the time. All three terms compete to be the dominant translation term in Arabic. Over the next four years, *tashweeh* (تشويه)/distortion slowly rises in popularity, while the other two terms decline. Importantly, *khetan* (اختان)/circumcision usage falls by almost half (31%, down to 17%) and *batr* (البتر)/mutilation almost entirely disappears. Suddenly, in 2000, *khetan* (اختان)/circumcision makes a large resurgence, exceeding even the initial recorded level of usage, and challenging the term *tashweeh* (تشويه)/distortion (53% vs 45%). *Khetan* (اختان)/circumcision again increases in usage as the Arabic translations of these texts do not use the correct Arabic terminology. Ultimately, it appears that *khetan* (اختان)/circumcision is on the decrease and *tashweeh* (تشويه)/distortion has become the dominant term in Arabic when translating FGM from English.

Figure 4: Number of times “mutilation” was translated each year

Figures 5 to 8 below illustrate the prevalence of FGM in four North African countries: Egypt, Sudan, Eritrea and Mauritania between 1995 and 2015. Each chart also contains comparative percentages of women between 15 and 49 years of age who feel that FGM should continue.

Figure 5: Egypt - Prevalence of FGM and its attitudes (UNICEF 2016a)

Figure 6: Sudan - Prevalence of FGM and its attitudes (UNICEF 2016e)
When we relate this data to the attitudes of Arabic speakers who practice FGM, we can speculate on the impact of the Arabic terminology. While there are a multitude of factors governing attitudes towards FGM, as discussed earlier in this paper, Egypt and Sudan are particularly interesting case studies as predominantly Arabic speaking nations. Sudan practices more severe forms of FGM at higher rates, yet positive attitudes towards the practice are lower than in Egypt whose overall prevalence of FGM is relatively high (93% prevalence in Egypt vs 87% in Sudan). Sudan also has English as a second official language, much like Eritrea whose attitudes supportive of FGM have declined rapidly from 1995 to 2010. Arabic speaking countries who are more proficient in English are less likely to be isolated from Western criticisms of FGM and the associated terminology used in English. Whereas those Arabic countries who do not use English as a working language are more likely to be surrounded by the echo chamber terminology of FGM. As the data from the UN shows, and as much of the literature in this paper is at pains to demonstrate, *tashweeh* (تشويه/distortion) is not severe enough a term to make any lasting impression on attitudes towards FGM. In the last recorded statistics for Egypt, comparing the rates from 2014 to 2015, both prevalence of FGM and attitudes supporting the practice saw small increases, not decreases. Egypt is one of three countries (Ethiopia and Indonesia being the other two) who together account for half of women affected globally by FGM (UNICEF 2016c).
Figure 9: Comparison between the translated terms mutilation/circumcision” and “circumcision/circumcision” per year

At the point of this comparison, tashweeh (تشويه)/distortion is almost exclusively in use in official texts from the UN, yet its impact on Arabic speaking countries is almost negligible, as some of these gains may be also be attributed to the decline in the use of khetan (ختان)/circumcision, a very “pro” FGM term. By comparison, whenever the term circumcision is mentioned in English, along with the term mutilation, the translations showed a heavy bias towards making all the terms into khetan (ختان)/circumcision in Arabic. Every year, mutilation in English was translated into khetan (ختان)/circumcision in Arabic, more times than circumcision in English was translated correctly into khetan (ختان)/circumcision. If the UN is not able to make significant inroads into prevalence of FGM and attitudes supporting the practice in countries most affected by FGM, then further changes have to be made.
Chapter 5

Findings and recommendations

The research reported on in this dissertation has focused on FGM, particularly in Egypt and North Africa, with specific emphasis on the translation of the terminology from English to Arabic in the United Nations. Female Genital Mutilation is an ancient practice observed in Egyptian mummies, and continues to be a scourge in various countries such as Mali, Eritrea and Kenya. Egypt has one of the highest rates of FGM, with 91% of women and girls affected, while 88% of women and girls in Sudan undergo the procedure on annual basis (Jha & Anand 2017).

The UN and WHO classifies FGM into four different types, from mild to severe. Type I is referred to as a “clitoridectomy”, Type II is called “excision”, Type III is “infibulation”, while type IV includes pricking, piercing, incising, scraping and/or cauterisation. None of these types have any proven health benefits, and for this reason the WHO states that:

Female genital mutilation has no known health benefits. On the contrary, it is known to be harmful to girls and women in many ways. The removal of or damage to healthy, normal genital tissue interferes with the natural functioning of the body and causes several immediate and long-term health consequences.

(World Health Organization 2008, p.1)

FGM is a deprivation of human rights and frequently coincides with other forms of violence against women, including early marriage and honour killing. The UN and its agencies dealt with FGM in the past as a domestic matter or a culture issue, which made it difficult to eradicate. Practicing communities dealt with the practice as a taboo or sensitive topic which kept the matter in the dark under a culture of silence. Communities practice FGM for various reasons, including to protect their girls, to use the girls as a commodity by men paying bigger dowry for girls who have been cut, to control women’s sexuality, to prevent girls from looking like boys, to maintain the girl’s virginity and purity and to ensure being part of the community. Furthermore, FGM has 4 types that vary from mild to severe, with varying long lasting psychological and health complications.
FGM is a challenge to eradicate because of various reasons such as; culture, religion, legislation, medicalization and terminology. International communities made tremendous efforts to eradicate the practice which included WHO, UNICEF and UNFPA joint statement in 1997. WHO, UNICEF and UNFPA produced a cooperative plan in 2007 then issued another interagency statement in 2008 untitled “Eliminating female genital mutilation: an interagency statement” then, the adopted FGM resolution in 2012 and produced complete guideline on FGM in 2016. The efforts included legislations, awareness raising and terminology changes by adopting the term “female genital mutilation” in English instead of “female circumcision” as per the UN Interagency statement.

\[(Jha \& Anand 2017, p.10)\]

FGM was medicalised in Egypt, which made it more common and harder to eradicate. Egypt made efforts to eradicate the practice by adopting the international agreement and passing national legislation to ban the practice. However, the legislation is yet to be fully implemented.

A major challenge in Egypt relates to FGM being called Sunnah. This gives it a religious connotation, making it harder for communities to abandon the practice. FGM is mentioned in a hadith as a part of “purity”, which is the reason for it to be known in Egypt as “Tahara”, meaning “purity”. FGM is practiced widely under the term “purification”, making it harder to eradicate because communities see “purifying” as a means to protect girls.

The terminology has been a challenge in Egypt, making it harder to eradicate the practice even with international organisations’ tremendous efforts. My recommendation is to stop using “purification” in Arabic as an equivalent for FGM in English. More accurately, the equivalent of FGM in Arabic, which is “Al batr al tansaoly lel ontha” should be used.

The United Nations has six official languages, namely Arabic, Chinese, English, French, Spanish and Russian. The UN has a complex structure to accommodate all member states with various languages. The UN uses translators, interpreters, advisors and editors to ensure that all documents are available in all official languages. Cao and Zhao (2008) describe the UN translation process as including documentation, monitoring, editing, referencing, translation, typography, evaluation, proof-reading and publishing.

The UN purposefully adopted “Female Genital Mutilation” as a heavy term with strong negative connotations to support efforts to eradicate the brutal custom. The UN chose this term
to differentiate between “female genital mutilation” and “male circumcision”. Further, the UN chose the term to supersede cultural arguments in opposition to FGM. The UN has identified the practice as a deprivation of human rights. As stated by WHO in Annex 1: Note on Terminology:

The word mutilation establishes a clear linguistic distinction from male circumcision, and emphasizes the gravity and harm of the act. Use of the word ‘mutilation’ reinforces the fact that the practice is a violation of girls’ and women’s rights, and thereby helps to promote national and international advocacy for its abandonment.

(World Health Organization 2008a, p.22)

The UN and WHO endorsed the term “Female Genital Mutilation” in the Inter-African Committee on Traditional Practices Affecting the Health of Women and Children (IAC) in 1990 (UNICEF 2005a), then in the Interagency Statements in 1997 and 2008 (World Health Organization 2008a) and during the United Nations Fourth World Conference on Women, held in Beijing in 1995.

Translating FGM into Arabic is a complex task for trained and untrained translators because of the variety of terms with the different connotations. The terms vary between terms in favour of the practice with positive connotation, while other terms are against the practice with negative connotation. Translators translating “female genital mutilation” from English to Arabic use; (ختان) (khetan) which means “circumcision” and is neutral or pro the practice, (طهارة) (tahara) which means “purification” and is pro the practice, (جرج) (Jadea) which means “stump” with a neutral connotation, (قطع) (katt) means “cutting”, is neutral and does not suit the context of the topic, (تشويه) (tashweeh) means “distortion”, is against the practice yet has a political connotation and lastly the term (البتر) (batr) means “mutilation”, is against the practice and is the most accurate to “female genital mutilation” in English.

The translation for FGM in Arabic was established by Egyptian gynaecologist and Muslim scholar, Dr Fayyād, in 1998. He stated that the term was adopted by the UN in 1991. Dr Fayyād explained that “Female Genital Mutilation” in English has the equivalent term in Arabic which is, “Batr al Aadaa al Tansolya lel ontha” (بتر الأعضاء التناسلية للأنثى). He stated that the term was adopted to replace what he described to be the “old term” of “circumcision” in English and (ختان) (khetan) in Arabic. However, the UN annex with the focus on terminology did not translate “Female Genital Mutilation” in Arabic correctly and used various terms as per
previous examples. The terms fluctuate in their connotation depending on the translator knowledge of the topic and their personal bias.

Translation from one language to another plays a crucial role in the UN system because it facilitates communication between member states. Translation includes transforming the meaning from one language to the other and from one culture to another.

The UN adopted the term “female genital mutilation” in English as per the interagency statement,

For the purpose of this Interagency Statement and in view of its significance as an advocacy tool, all United Nations agencies have agreed to use the single term ‘female genital mutilation’.

(World Health Organization 2008, p.22)

However, this translation has not been consistent in Arabic. English/Arabic translators use different terms in ways that do not serve the organisation’s agenda towards eradicating FGM. Translators transfer the meaning, the culture and the connotation. The Western culture is different to the Arabic culture, which poses the challenge to translators when translating FGM from English to Arabic. FGM in Arabic has various terms with different connotation as stated earlier. The terms vary from colloquial Arabic spoken by the public to the standard Arabic indicated by the UN. Translation of FGM in Arabic reflects on the translator’s views. The translator who sees FGM is a deprivation of human rights will translate it to “Al batr Al tanasoly lel ontha”. A translator who is pro FGM will call it either “tahara”, which means “purification” or back translate it to “female circumcision”.

House (2001) focused on the translation quality to identify good and bad translation depending on cultural background and social norms. Bad translation has various implications including legal, financial and cultural. Despite the UN holding campaigns to eradicate FGM, translators still translated “Female Genital Mutilation” in English to “female purification” in Arabic. Translators used the right terminology at times, however it was not consistent. Translators varied the terminology used for FGM within one document, one paragraph and sometimes even within one sentence.

UN translators used different terminology as per previous examples shown. My recommendation is for the UN to use “Batr al Aadaa al Tansolya lel ontha” (بنتر الأعضاء التناسلية للأنثى) in all the documentation. The term should be implemented through glossaries, and should
be the only term in the UN dictionary. The usage of one term in English and Arabic will avoid confusion and assist the organisation to reach its goal of eradicating FGM.

My recommendation is that UN translators should be chosen upon their views on the topic and not only their qualifications. Additionally, the UN should provide translators with the necessary training to understand the issue of FGM. The UN has to create glossaries to guarantee that translators are using the accurate FGM terminology when interpreting from English to Arabic.
Female Genital Mutilation is a harmful practice that affects millions of women and girls across Africa. The United Nations and its agencies declared FGM a violation of human rights. Although laws against FGM were enacted in various countries, such as Egypt and Sudan, these are not implemented. Despite the term “Female Genital Mutilation” being adopted in English to support the eradication of FGM, Arabic translators continue to use various terms that support the practice.

Over the past twenty years the United Nations has implemented several policies in an attempt to eradicate FGM. These policies include education and awareness campaigns, cultural and literature analysis, and criminalisation of the practice. This research is an attempt to build on the existing education and language policy of the UN as well as analysing the effectiveness of current campaigns in Arabic and English. The research focused on FGM as discussed explicitly in English in many research papers and books, including the UN’s strong language policy regarding the appropriate terminology of FGM in its published works. This dissertation highlighted that Arabic-speaking countries have some of the highest rates of FGM in the world, yet the Arabic literature on FGM remains limited. Even published Arabic works by the UN are inadequate when compared to their English counterparts. English to Arabic translators since 1996 have not been consistent with FGM terminology. In order to eradicate FGM, English to Arabic translators should use “Female Genital Mutilation” in English and the Arabic equivalent “Batr al Aadaa al Tansolya lel ontha” in all documents.

This research aimed to expose some of the poor implementation of the UN’s existing policies of translation from English into Arabic, and will help fill the gap in Arabic language analysis regarding FGM. It is hoped this will improve the quality of the UN’s eradication efforts, especially with regards to the Arabic audience.
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Appendices

6.1 Ethics clearance