A submission to support Ministerial review of the grounds of application for refugee status, of whether a substantial risk of being subjected to circumcision (female) or other forms of genital mutilation in a woman's country of origin should be such a ground under Australian law.

Written by Greg Swensen in 1994 as part of Anti-Discrimination and Equal Opportunity Law unit at Murdoch University.

As female genital mutilation (FGM) has been practised for more than 2,500 years,[1] it is misleading and inaccurate to claim, as has been suggested, that it is a manifestation of Islam's barbaric treatment of women, as clearly FGM predates Christianity, Islam and Judaism.[2] It largely occurs in Islamic countries, primarily through the central belt of Africa, from Senegal to Somalia, and as far north as Egypt. Virtually all women in Mali, Sudan and Somalia are infibulated; it also flourishes in Yemen and Oman, and is known to be practised in Malaysia and Indonesia. While it has been observed that "the heavy emphasis on both the physical state of virginity within the Muslim religion and the importance of patrilineage leads to an institutionalisation of female circumcision in some regions as the best method of controlling 'purity,'"[3] any credible discussion of FGM should not impugn the beliefs or practices of Muslims.

The practice female genital mutilation has been defined as entailing

> "the total or partial cutting away of the female external genital organs with razors, ceremonial knives, or blades under non-hygienic conditions without anaesthesia".[4]

A more expansive definition is that

> "Female circumcision is actually a group of similar practices involving excision of varying degrees of the female genitalia. The practices range from clitoridectomy, removing the tip of the clitoris, or the entire clitoris, to infibulation, which involves excising all of the external female genitalia and suturing the sides of the vagina together using various methods".[5]

The former definition, by its emphasis on the lack of adequate medical standards, would appear to imply that with the proper observance of these conditions FGM may be justifiable. "If the practice could be done without negative health consequences, international law might actually become complicit in the practice, obligating states to ensure that it is performed under better health conditions",[6]

The data as to the medical, social and psychological consequences of FGM is considerable, and may be summarised as follows.

Short-term
- damage to and bleeding from adjacent organs and tissue (eg rectum and urethra);
- haemorrhage;
- shock from pain and blood loss;
- acute infection, septicemia or tetanus from use of non-sterile instruments and materials used to patch the wound;
- extreme pain; or
- death from blood loss and other complications.

Long-term
- Increased susceptibility to HIV infection and AIDS as subsequent intercourse requires re-injuring the genital area by cutting by instruments or tearing to achieve de-infibulation, for penetration to occur.

---

1 A large number of Pharaonically circumcised mummies have been discovered: Daly M. *Gyn/Ecology*. London, Women's Press, 1979, p. 162.

2 Bardach AL. "Tearing off the veil". *Vanity Fair*, August 1993.

3 Oosterveld V. "Refugee status for female circumcision fugitives: building a Canadian precedent". (1993) 51 *University of Toronto Faculty of Law Review* 282.

4 Ladjali M, Rattray TW, Walder RJW. "Female genital mutilation" (1993) 307 *British Medical Journal* 460.

5 Brennan K. "The influence of cultural relativism on international human rights law: female circumcision as a case study". (1989) 7 *Law and Equality* 373.

6 Engle K. "Females subjects of public international law: human rights and the exotic other female". (1992) 26 *New England Law Review* 1515.

- Neuromas may develop at the site of the excised clitoris resulting in chronic and unbearable sensitivity of the genital area.
- Vulvar abscesses and cysts may develop due to damage to the Bartholin gland causing secretions to accumulate.
- Urinary tract infections and urine retention due to occlusion and the process of urination is often prolonged and difficult.
- Menstrual difficulties (eg dysmenorrhoea and hematocolpus) and obstetric complications resulting in prolonged and obstructed labour and internal lacerations due to lack of elasticity of birth canal increasing the risk to mother of haemorrhaging from internal tearing and concomitant risk to the baby.
- Psychological trauma (eg chronic irritability, anxiety, depressive episodes, psychosis) and sexual difficulties.
- Scars may impair mobility through keloid formation (from hardening of tissue from scars) caused by a massive build-up of skin that has lost its elasticity.

The case against the practice of FGM appears to be overwhelming, because of its many catalogued adverse effects on girls and women. The term "genital mutilation" has had a relatively recent currency, and is a term that attempts to encompass the various forms of FGM, ranging from ritualised circumcision, circumcision by removal of the clitoral prepuce ("sunna"), clitoridectomy by excision of the glans of the clitoris and parts of the labia minora, or to its most extreme form of infibulation ("Pharonic" circumcision) by removal of virtually all the external female genitalia.[7] These practices have been described as "sado-ritual of initiation of girls into androcacy",[8] "a barbaric crime"[9] and "a barbaric practice".[10]

FGM has become a matters of increased concern in this country because over recent years we have resettled refugees from areas where one or more of the forms of FGM are prevalent. This means that such refugee women who come to Australia will require subsequent medical procedures, for instance, to be de-infibulated and re-infibulated after childbirth, as mandated by their culture.[11] Another concern about FGM is that girls and young women from families that have come from countries which routinely practice FGM, who even though they may have been born and grown up in Australia, or were brought here as young children, will be circumcised according to the specific traditions of their culture.

These concerns are not unique to Australia, as there are a number of other Western countries with documented cases of FGM involving refugees from African countries escaping persecution. [12] For instance, the first national conference on female genital mutilation in Britain was held in February 1989. At that time it was estimated there were up to 10,000 children at risk in the UK, based on an analysis of the size of immigrant and refugee populations from Somalia, Sudan, Ethiopia, and West and East Africa.[13] In Canada an 1992 amendment to the *Criminal Code* made it an offence for persons under 18 years of age to be removed from

---

7 See generally Armstrong S. "Female circumcision: fighting a cruel tradition". *New Scientist*; 2 February 1991 22; Family Law Council. Female *Genital Mutilation*. Canberra, Family Law Council, 1994; Slack AT. "Female circumcision: a critical appraisal". (1988) 10 *Human Rights Quarterly* 437.

8 Daly M. *Gyn/Ecology*. London, Women's Press, 1979, p. 175.

9 Harding R. "Cruel Cuts". *Bulletin*, 8 March 1994, p. 38.

10 Eoin Cameron (MHR), speaking in debate on introduction of a private member's bill by Trish Worth to legislate on FGM, Australia, Parliament, House of Representatives. *Daily Hansard*, 21 February 1994, p 899.

11 During 1991-1993 there were 1,601 females from Africa who arrived in Australia, of whom 470 (29%) were girls under 16 years of age: Family Law Council. *Female Genital Mutilation*. Canberra, Family Law Council, 1994, p. 12.

12 Lynch ME. "Male and female circumcision in Canada (letter to Editor)". 1993 149 *Canadian Medical Journal* 16; Mackay RD. "Is female circumcision unlawful?" [1983] *Criminal Law Review* 717; Oosterveld V. "Refugee status for female circumcision fugitives: building a Canadian precedent". (1993) 51 *University of Toronto Faculty of Law Review* 277.

13 Armstrong S. "Female circumcision: fighting a cruel tradition". *New Scientist*; 2 February 1991, p. 22.

Canada to be circumcised. In 1992 a Malian woman living in France was prosecuted for the infibulation of her one month old baby.

> "When her baby was born, the doctor warned her, 'Do not excise this child. It is against French law, and it will have terrible effects upon her health.' A month later she brought her bleeding child back to the clinic. She was infibulated, completely sewn up at one month old".[14]

An issue considered at the 1989 British conference was whether FGM constituted child abuse, as the *Prohibition of Female Circumcision Act 1985* had proved to be ineffective in stopping young girls being taken out of the country to be circumcised. To deal with this shortcoming the powers under the *Childrens Act 1989* are used for protective orders for girls considered at risk of child abuse because of the possibility of FGM. This may be a counterproductive approach as it labels the

> "families as child abusers, and therefore criminals, (and therefore) is counterproductive because it alienates immigrant groups rather than encouraging them to change. Most such families ... see the circumcision of their daughters as an act of love, not cruelty".[15]

The recently reported case of the infibulation of two young sisters in Melbourne, and the subsequent use of a Department of Health and Community Services protection order, further illustrates the difficulties in using the criminal law to prevent FGM.

> "The girls, who first came to the attention of the department after an alleged assault by their father... Ms O'Brien (a spokeswoman for Women Lawyers Against Female Genital Mutilation) said the lobby group became involved in the case when they were told by the department that it did not consider the medical procedure was a protective issue. She said the group asked to be a party to the case so that it could provide the court with information on possible complications linked to genital infibulation".[16]

There has also been a reluctance to use the criminal law because it may drive FGM underground, and logically it should extend to the prohibition of the circumcision of male babies.[17] As recently as 1991 the Australian Law Reform Commission in its discussion paper *Multiculturalism: Criminal Law*, canvassed the options and concluded that special legislation should not be enacted, but instead preventive policies should be developed to deal with FGM. Paradoxically, the Commission had earlier in the discussion paper recognised there were

> "some cultural practices which may be unacceptable by international standards. While some customs and beliefs may justify exemptions from the general criminal law, there are other situations where an exemption cannot be considered because a real threat is posed to the rights of others. Female genital mutilation is a practice which cannot be subject to an exemption for this reason". [18]

However, there would appear to have been a recent fundamental shift in the thinking of Australian policy makers, as it has been reported at the March 1994 meeting in Perth of the *Health and Community Services Ministerial Council* that all States and Territories had agreed to "outlaw FGM as a culturally unacceptable practice".[19] We should not overlook the significance

---

14 Bardach AL. "Tearing off the veil". *Vanity Fair*, August 1993.

15 Armstrong S. "Female circumcision: fighting a cruel tradition". *New Scientist*; 2 February 1991, p. 26.

16 Weekes, P. "Court order for mutilated sisters". *Australian*, 1 March 1994.

17 In USA over 80% of all males are circumcised soon after birth, whereas in England and Wales only 6% of male infants are circumcised, it is virtually unknown in Scandinavia: Brigman WE. "Circumcision as child abuse: the legal and constitutional issues". (1984-85) 23 *Journal of Family Law* 337.

18 Australian Law Reform Commission. Multiculturalism*: Criminal Law. Discussion Paper 48.* Sydney, Australian Law Reform Commission, 1991, p. 21.

19 Cooper J, Irving M. "Ministers to ban female circumcision". *Australian*, 22 March 1994.

of the impetus for this approach coming via a forum of health ministers, as this is consistent with other views that characterisation of the health risks as the major issue from FGM is likely to be the most effective approach.

Art 25 of the *Universal Declaration of Human Rights* conceivably provides the foundation to a right to sexual and corporal integrity, as FGM constitutes a violation of a woman's right to control her body, and deprives her of her sexuality. The attraction of such a proposition is that "(m)ost African governments are more concerned with basic health and economic problems than with the arguably more elitist rights they associate with Western countries, such as political rights and fundamental freedoms".[20]

The recent statement by Dr Brendon Nelson, President of the Australian Medical Association also supports the proposition that FGM is best dealt with as a right to health and bodily integrity.

> "We do not support this and will be encouraging the Government to introduce and pass legislation which prevents this... We must always, of course, respect the cultural values and rights of human beings. But I think above all else we have to respect the health, welfare and integrity of human beings, and women particularly".[21]

In spite of the merits of this approach, it has been argued that the issue should be placed in the context of a broader set of concerns about the status of women. In many of the African societies in which FGM occurs, the 'logic' for circumcision must include acknowledgment of women's low social status, and that uncircumcised women may be ostracised as unmarriageable and face very bleak economic and social prospects because rights and privileges are contingent on membership of a group or community.[22]

The difficulty in dealing with FGM by using a rights framework is that the discourse on rights involves a Western political and philosophical tradition. For instance, Sinha argues that the formulation of human rights contains three elements that reflect Western values:

> "One, the fundamental unit of society is the individual, not the family. Two, the primary basis for securing human existence in society is through rights, not duties. Three, the primary method of securing rights is through legalism whereunder rights are claims and adjudicated upon, not reconciliation, repentance, or education".[23]

To rebut claims of ethnocentrism and to properly adjudge rights in non-Western societies it could be argued that a relativist approach should be followed, one which conceptualises each culture as having its own concept of human rights. Taken to its logical conclusion this could mean variations in standards between cultures arise because either (a) substantive human rights vary due to national differences, or (b) though there may be a set of substantive human rights, the meaning given to them varies between cultures.[24]

However, there seem to be serious disadvantages if the claims of cultural relativism are extended as FGM could be justified as culturally mandated and therefore beyond the reach of

---

20 Boulware-Miller K. "Female circumcision: challenges to the practice as a human rights violation". (1985) 8 *Harvard Women's Law Journal* 173.

21 Cited in debate on introduction of a private member's bill by Trish Worth to legislate on FGM, Australia, Parliament, House of Representatives. *Daily Hansard*, 21 February 1994, p 895.

22 Engle K. "Females subjects of public international law: human rights and the exotic other female". (1992) 26 *New England Law Review* 1509; Howard RE. "Group versus individual identity in the African debate on human rights". In An-Naim AA, Deng FM (eds). *Human Rights in Africa - Cross Cultural Perspectives*. Washington DC, Brookings Institution, 1990.

23 Cited by Renteln AD. "The unanswered challenge of relativism and the consequences for human rights". (1984) 7 *Human Rights Quarterly* 517.

24 Teson FR. "International human rights and cultural relativism". In Claude PR & Weston BH (eds). *Human Rights in the World Community - Issues and Action*. Philadelphia, U Pennsylvania P, 1992.

the recognised universal human rights contained in instruments ratified under the aegis of the United Nations, to which many countries are signatories. Art 1(3) of *UN Charter* states the major purpose of the UN is to achieve international cooperation in encouraging and promoting "respect for human rights and for fundamental freedoms for all without distinction as to race, sex, language, or religion". This provision also supports the notion of inviolable universal human rights.

Provisions in a number of these instruments appear to specifically support the proposition that FGM seriously transgresses a number of universal human rights:

UN Universal Declaration of Human Rights
Art 3: Everyone has the right to life, liberty and security of person.
Art 5: No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.
Art 15: Everyone has the right to a standard of living adequate for the health and well-being of himself.

Convention on the Rights of the Child[25]
Art 30: guarantees the right of children belonging to ethnic, religious or linguistic minorities to enjoy their own culture
Art 24(3): State parties shall take all effective and appropriate measures with a view to abolishing traditional practices prejudicial to the health of children.

Declaration on Violence Against Women[26]
Contains broad definitions of gender-based violence against women - specifically mentions FGM and other harmful traditional practices as gender based violence that results in or is likely to result in physical, sexual or psychological harm or suffering to women.

Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW)[27]
Arts 2(f) and 5: Violence based on inferiority[28]
Art 5 (a): Social and cultural patterns based on the idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for men and women.
Art 10(h): Access to educational information on health and family planning.
Art 12: Violence as a health risk.
Art 12(2): Discrimination in relation to pregnancy etc.
Art 16(1): Discrimination in relation to marriage and family relations.

International Covenant on Civil and Political Rights[29]
Art 9: Everyone has the right to life, liberty and security of person.

Convention Relating to the Status of Refugees and the Protocol Relating to the Status of Refugees (the Geneva Convention)
Provision of protection by signatories to any persons who "Owing to well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion".[30]

---

25 Ratified by Australia in 1989.

26 Adopted by UN General Assembly in December 1993 - supported by Australia.

27 Ratified by Australia and came into force in 1984 as schedule the *Sex Discrimination Act 1984*.

28 This provision extends to traditional attitudes under which women are regarded as subordinate contribute to practices involving violence towards or coercion of women, eg forced marriage, dowry deaths, acid attacks, FGM, family violence and abuse: Evatt E. "Eliminating discrimination against women: the impact of the UN Convention". (1991) 18 *Melbourne University Law Review* 435.

29 Adopted as schedule to the *Human Rights and Equal Opportunity Commission Act 1986*.

30 To fall within this definition of refugee, it would be necessary for a female's opposition to FGM to be construed as persecution due to political opinion, or that for females FGM is a form of gender-specific persecution: Family Law Council. *Female Genital Mutilation*. Canberra, Family Law Council, 1994;

There are also a number of other conventions that have been ratified by African countries. These are the *African Charter on Human and Peoples' Rights* and the *Inter-African Committee Against Harmful Traditional Practices Affecting Women and Children*.[31] The UN has specifically investigated FGM, for at the 1981 session of the *Sub-commission for the Prevention of Discrimination and the Protection of Minorities*, a comprehensive report was presented by the London-based Minority Rights Group. In 1982 the *Sub-commission* resolved to examine circumcision and other traditional practices harmful to the health of women and children, and published its report in 1986. The Sub-commission concluded

> "that female circumcision is a custom with serious consequences for physical and psychological health... The report stated that, because the evolution in traditional societies has deprived female circumcision of its former role, the practice is 'at variance with new standards defined by various international instruments relating to human rights'".[32]

This report lends credence to the proposition that by dealing with FGM in terms of a simplistic dichotomisation into traditional and modern societies, and as African versus Western, we may overlook culturally relevant factors. Many African nations are undergoing profound social and economic change in the post-colonial stages of their history eg the bitter civil wars in Ethiopia, Somalia and the Sudan, as well as in west African states. This process of change has been variously described as a transition from mechanically organised societies based on homogeneity to those that are organically organised and based on social heterogeneity (Durkheim); from traditional to rational-legal forms of social organisation (Max Weber); or from a society based on status to a society based on contract (Henry Maine).

> "Wherever such social changes occur, the communalist, role-oriented notion of personhood breaks down (especially among males) to be replaced by the values of secularism, personal privacy, and individualism". [33]

In supporting the existence of a set of universal human rights we should be cognisant of some flaws in some of the instruments. For while the *CEDAW* recognises that women's specific rights differ from men's , because of the role of pregnancy and child rearing, and the significant amount of work that women perform in the non-monetary sector of most economies (Arts 12(2) and 14(1), the *Geneva Convention* by comparison, which would be used by women seeking refugee status to avoid FGM, has been largely built around male-oriented concepts of persecution. Persecution of refugees is not defined in the Geneva *Convention*, however the UNHCR

"(f)rom Article 33 of the Convention, it may be inferred that a threat to life or freedom on account of race, religion, nationality, political opinion or membership in a particular social group is always persecution. Other serious violations of human rights - for the same reason - would also constitute persecution": Office of the United Nations High Commissioner for Refugees. *Handbook on Procedures and Criteria for Determining Refugee Status Under the 1951 Convention and the 1967 Protocol Relating to the Status of Refugees*. Geneva, UNHCR, 1979.[34]

Oosterveld V. "Refugee status for female circumcision fugitives: building a Canadian precedent". (1993) 51 *University of Toronto Faculty of Law Review* 277.

31 Ladjali M, Rattray TW, Walder RJW. "Female genital mutilation" (1993) 307 *British Medical Journal* 460.

32 Brennan K. "The influence of cultural relativism on international human rights law: female circumcision as a case study". (1989) 7 *Law and Equality* 390.

33 Howard RE. "Group versus individual identity in the African debate on human rights". In An-Naim AA, Deng FM (eds). *Human Rights in Africa - Cross Cultural Perspectives*. Washington DC, Brookings Institution, 1990, p. 170.

34 Cited by Oosterveld V. "Refugee status for female circumcision fugitives: building a Canadian precedent". (1993) 51 *University of Toronto Faculty of Law Review* 295.

In a discussion by Valerie Oosterveld of the possibility of a woman claiming refugee status on grounds of torture under the *Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment,* that for FGM to be considered as persecution, the *Geneva Convention* definition requires a connection between a state and the refugee, ie that a claimant must be unable or unwilling to avail herself of the protection of her country.

> "It is hard to imagine a situation in which the threat of, or the performance of, female circumcision will ever be directly attributable to the state. The most likely scenario is one in which a woman is pressured by her family or community to undergo the procedure, and the state does not provide any adequate legal recourse to protect against these pressures, or to punish the perpetrators after the fact".[35]

On the basis of these concerns it is suggested that it may be quite difficult for a woman to seek refugee status by reliance on either the *Geneva Convention* or the *Convention Against Torture* as a basis to establish a ground because of the restrictive nature of the rights. That women in particular would appear to be substantially disadvantaged on most of the grounds, is a serious criticism of the way the system of international rights are ineffectual with respect to a harmful practices like FGM. The present review should address these shortcomings and ensure that the systemic barriers that are likely to be faced by women seeking refugee status on the grounds of genital mutilation are recognised and dealt with in future revisions of policies and procedures.

35 Id at p. 299.

Bibliography

Alibhai SMH.
"Male and female circumcision in Canada (letter to Editor)". 1993 149 *Canadian Medical Journal* 16

Armstrong S
"Female circumcision: fighting a cruel tradition". *New Scientist*; 2 February 1991 22-27.

Australia, Parliament, House of Representatives
Daily Hansard, 21 February 1994, p 891.

Australian Law Reform Commission.
Multiculturalism: Criminal Law. Discussion Paper 48. Sydney, Australian Law Reform Commission, 1991.

Bardach AL
"Tearing off the veil". *Vanity Fair*, August 1993.

Boulware-Miller K.
"Female circumcision: challenges to the practice as a human rights violation". (1985) 8 *Harvard Women's Law Journal* 155.

Brennan K
"The influence of cultural relativism on international human rights law: female circumcision as a case study". (1989) 7 *Law and Equality* 367.

Brigman WE.
"Circumcision as child abuse: the legal and constitutional issues". (1984-85) 23 *Journal of Family Law* 337.

Cooper J & Irving M
"Ministers to ban female circumcision". *Australian*, 22 March 1994.

Daly M
Gyn/Ecology. London, Women's Press, 1979.

Donnelly J
"Human rights and human dignity: an analytic critique of non-western conceptions of human rights". (1982) 76 *American Political Science Review* 303.

Donnelly J
"Cultural relativism and universal human rights". (1984) 6 *Human Rights Quarterly* 400.

Donnelly J.
Universal Human Rights In Theory and Practice. Ithaca, NY, Cornell University Press, 1989.

Engle K
"Females subjects of public international law: human rights and the exotic other female". (1992) 26 *New England Law Review* 1509.

Evatt E
"Multiculturalism and family law". (1991) 5 *Australian Journal of Family Law* 86.

Evatt E
"Eliminating discrimination against women: the impact of the UN Convention". (1991) 18 *Melbourne University Law Review* 435.

Family Law Council.
Female Genital Mutilation. Canberra, Family Law Council, 1994.

Harding R
"Cruel Cuts". *Bulletin*, 8 March 1994, p. 38.

Harvard Law Review
"What's culture got to do with it? Excising the harmful tradition of female circumcision". (1993) 106 Harvard *Law Review* 1944.

Hayter K
"Female circumcision - is there a legal solution?" [1984] *Journal of Social Welfare Law* 323.

Howard RE.
"Group versus individual identity in the African debate on human rights". In An-Naim AA, Deng FM (eds). *Human Rights in Africa - Cross Cultural Perspectives*. Washington DC, Brookings Institution, 1990.

Kirby M.
"The Australian use of international human rights norms: from Bangalore to Balliol: a view from the Antipodes". (1993) 16 *University New South Wales Law Journal* 363.

Kleinig J
"Cultural relativism and human rights". In Tay AES, Connelly, Wilkins R (eds). T*eaching Human Rights*. Canberra, Australian Government Publishing Service, 1981, pp 111 - 118.
Kluge EH.
"Female circumcision: when medical ethics confronts cultural values". (1993) 148 *Canadian Medical Journal* 288.
Ladjali M, Rattray TW, Walder RJW.
"Female genital mutilation" (1993) 307 *British Medical Journal* 460.
Lynch ME.
"Male and female circumcision in Canada (letter to Editor)". 1993 149 *Canadian Medical Journal* 16
Mackay RD.
"Is female circumcision unlawful?" [1983] *Criminal Law Review* 717.
McCloskey HJ
"What ought to be taught about rights?" In Tay AES, Connelly, Wilkins R (eds). T*eaching Human Rights*. Canberra, Australian Government Publishing Service, 1981, pp 83 - 93
Oosterveld V.
"Refugee status for female circumcision fugitives: building a Canadian precedent". (1993) 51 *University of Toronto Faculty of Law Review* 277.
Renteln AD
"The unanswered challenge of relativism and the consequences for human rights". (1984) 7 *Human Rights Quarterly* 514.
Slack AT.
"Female circumcision: a critical appraisal". (1988) 10 *Human Rights Quarterly* 437.
Teson FR
"International human rights and cultural relativism". In Claude PR & Weston BH (eds). *Human Rights in the World Community - Issues and Action*. Philadelphia, U Pennsylvania P, 1992.
Walker A
Possessing the Secret of Joy. New York, Harcourt Brace Jovanovich, 1992.
Weekes P
"Court order for mutilated sisters". *Australian* 1 March 1994.