

Women and Sexual Violence: A Study of Khitan Tradition in West Nusa Tenggara

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ABSTRACT

Khitan Perempuan is defined as female circumcision, which is known as a tradition that has been passed down from generation to generation. The implementation of this custom aims to preserve cultural values. Therefore, the community still considers the tradition of *Khitan Perempuan* as an obligation that is influenced by culture. However, numerous problems associated with the practice of *Khitan Perempuan* have caused controversy because of the procedure for implementing *Khitan Perempuan*. For example, the negative health impacts and the consideration of sexual violence. Thus, this study aims to describe the traditional practice of *Khitan Perempuan*. The method used in the study was descriptive qualitative. The Interviews are conducted to collect the primary data from six participants. Out of six participants, three traditional leaders and three medical experts were taken from three different customs; Suku Mbojo, Suku Samawa, and Suku Sasak in West Nusa Tenggara. The results of this study classify there were two factors that affect *Khitan Perempuan* applied by the people of West Nusa Tenggara. The two factors are cultural and religious. This study revealed two procedures to conduct *Khitan Perempuan*, first, by cleaning the female vital organs and injuring the tip of the female clitoris. In addition, sexual violence that occurs in women who are circumcised can be identified through the cutting that occurs during the circumcision process and some of the negative health impacts caused by the practice of circumcision.

Keywords: *Khitan Perempuan, Female Circumcision, Sexual Violence, Culture.*

1. INTRODUCTION

Female Genital Mutilation or female circumcision is part of the culture in countries that practice female circumcision. Female circumcision, according to WHO, is all actions/procedures that include partial or total removal of the female external genitalia or other forms of injury to the female genital organs for cultural reasons or other non-medical reasons. Experts from Egypt explained that FGM originally came from Egypt, which was intended as a celebration when a woman entered maturity. This practice was cultural acculturation between the Roman population, who at that time lived in Egypt, and the native Egyptians. So that female circumcision has become a tradition that is required to be done [1].

FMG is part of the culture in countries that practice female circumcision. The World Health Organization (WHO) recognizes that male circumcision does have health benefits. In contrast, female circumcision has not yet been found to have

health benefits but causes long-term health problems. Seeing this phenomenon, WHO urges health professionals not to practice FGM. That is evidenced by the Decree of the Minister of Health of the Republic of Indonesia Number 1636/Menkes/Per/XI/2010 concerning the prohibition of female circumcision because it is considered that female circumcision is not a medical act. Its implementation is not based on medical indications and has not been proven to be beneficial for health [2].

However, after the decree was declared, various parties had pros and cons. People who were pro consider that female circumcision was sexual violence, so they agreed to the regulation. Meanwhile, the people who were against the decree thought that circumcision performed on women had become a tradition carried out from generation to generation and would continue to be carried out to preserve the area's culture. In addition, the community also considered female circumcision to be or must be carried out as a recommendation from

religion. Most female circumcision is associated with traditions/customs and religious orders in Indonesia, especially Islam. In Islam itself, opinions about the implementation of female circumcision are divided into three, namely those who think it is sunnah (recommended), mandatory (must be implemented), and those who argue that female circumcision is purely a tradition, which is not related to religion [3][4].

Seeing the pros and cons that occurred in the community, the Minister of Health finally issued the Indonesian Minister of Health Regulation No. 6 of 2014 concerning the revocation of the RI Minister of Health Regulation No. 1636/Menkes/Per/XI/2010. One of the considerations is that female circumcision is based on considerations of custom and religion, not a medical procedure, so it does not need to be regulated. This shows that FGM is carried out only because of the cultural aspects and people's beliefs [2]

The results of health research conducted by Sulahyuningsih, Darob, and Safitric in 2020 showed that the proportion of girls aged 0-11 years who were circumcised was 51.2%, in addition, 72.4% aged 1-5 years. One of the provinces in Indonesia that is still attached to the FGM culture is West Nusa Tenggara. West Nusa Tenggara is included in the top 10 categories of provinces that still practice FGM in Indonesia. The prevalence of FGM in NTB is more than 60%. This shows that the practice of FGM is still high [2]. According to Sari, who researched in 2019 stated that the level of parental knowledge was also behind the existence of female circumcision from the results of the analysis that out of 90 parents with shared knowledge, they tended to do female circumcision as many as 56 parents (62.2%), compared to parents who did not perform female circumcision as many as nine parents (10%) [5]. In addition, according to Ahlian and Muamanah, mothers who have baby girls who will be circumcised express their fear of the impact that will arise when the child is an adult [6].

However, nowadays, people still do circumcision with the traditional implementation process. This practice is mainly carried out by conventional circumcisers who have a role in society. The method of female circumcision is still carried out by traditional healers or certain women who are trusted by the community. According to Momoh, 2017 revealed that the tools that are often used in the practice of carrying out female circumcision in customary areas do not use proper and sterile instruments, which can lead to irregularities in the implementation of circumcision [7].

According to Heryani, Herinawati, and Diniyati, female circumcision causes a trauma that will always

exist in the life and mind of a woman who experiences it and appears as a very disturbing flashback. Psychological complications can be buried in the child's subconscious, which can cause behavior disorders, loss of confidence, and self-confidence as serious effects that can occur. Women's powerlessness, which has been controlled since childhood utilizing circumcision, is actually a result of social construction that has so far placed women in unimportant positions and gives less value to what their bodies do [8].

In addition, according to Meidianti, 2017, circumcision will make them unable to maintain stability in their sexual desire because their libido is cut [9]. Although according to Muawanah, Daryanti, and Triratnawa, 2018, female circumcision is desired by parents, it should not involve removing the prepuce and clitoris. This type of female genital surgery is the same as male genital surgery [10]. In addition, according to Purwosusanto, 2016, many studies show that women with circumcision tend to experience gynecological complications. Medical complications regarding female genital circumcision were carried out in Somalia and Mogadishu on 290 women aged 18-54 years, found that 88% of women experienced excision, 6.5% infibulation, and 5.5% clitoridectomy [11].

Based on the above phenomena, there are several impacts of female circumcision. This can be categorized in the form of violence against women. Sexual violence can be interpreted as a form of violence that can cause physical and psychological problems in children to threaten their lives [12]. Therefore, violence against children in Indonesia is an interesting case to study more deeply. Especially toward cases of sexual violence involving children, in this case, is female circumcision. So it is essential to know how the tradition of female circumcision is carried out by the community, especially in West Nusa Tenggara.

2. LITERATURE REVIEW

2.1. *Khitan Perempuan*

Female genital mutilation (FGM) or female circumcision is an action aimed at removing part or all of the external genital organs of a woman in the name of culture, custom, religion, or other reasons other than health reasons. WHO defines FGM as all actions/procedures that involve partial or total removal of the female external genitalia or other forms of injury to the female genital organs for cultural reasons or other non-medical reasons. FGM is done only because of the cultural aspects and people's beliefs [2].

Many research types in Indonesia show that the most female circumcision is associated with religion, traditions, or customs orders, especially Islam religion. In Islam religion, opinions about the implementation of female circumcision are divided into 3, namely those who argue that it is sunnah (recommended), mandatory (must be implemented), and the opinion that female circumcision is purely a tradition, which is not related to religion [3][4]. Female circumcision is done on baby girls aged 0-3 months. Islamic scholars believe that female circumcision is best done in the first days of her birth. Furthermore, if her intellect increases and she can understand and distinguish between good, bad, and circumcision, what has been done to both men and women will result in that they will not think about circumcision and do not feel sad or afraid.

Technically there are five kinds of female circumcision, ranging from simple to very cruel, namely: First, female circumcision is carried out symbolically by rubbing the clitoris, sometimes accompanied by a cleansing of the smegma. Second, circumcision is usually done by doing cuts, stabbing, and scraping the skin of the clitoris, and cutting off part of the prepuce until it bleeds. Third, female circumcision clitoridectomy is done by removing part of the clitoris. Fourth, Pharaonic circumcision is female circumcision that is done by cutting several genital tissues. Fifth, Infibulation is the cruelest form of circumcision by damaging the female genitalia by removing all parts of the genitals and clitoris so that sensitive nerves become infected and damaged [13].

According to Sander and Sunantri, in 2020, the characteristics of the implementation of female circumcision are: (1) Cut a little of the skin above the vulva or farji (2) Cut a little bit of the clitoris, which is the skin covering the clitoris (3) Cut a little bit of the labia minora (4) Cut a tiny part of the clitoris that looks out [14]. Also, according to Sander and Sunantri, there are several factors behind the implementation of female circumcision. They are: (1) There is a belief that female circumcision is an ancestral tradition that must be preserved, (2) The belief about "suker" women save najis and dirt, (3) Sacred factors, social obligations, and functional [14].

The impact of female circumcision is that it results in infection and interferes with problems with childbirth, sexual intercourse, menstruation, shock due to sudden bleeding due to hemorrhaging, deviation of the forehead drainage due to the use of non-sterile tools, bleeding in the blood vessels such as the veins of the back of the clitoris, lack of orgasm due to cutting the clitoris, the emergence of anxiety due to not being able to satisfy the husband, menstrual disease due to failure of the surgical

process so that it is challenging to expel menstrual blood or obstruction of menstrual blood due to narrowing and increases the chance of infection with HIV (human immunodeficiency virus) because sperm cells are the cause of AIDS [15] The World Health Organization (WHO) also states, in the medical literature, female circumcision can result in physical and or psychological health hazards. Immediate complications can include bleeding, pain, and infection. Bleeding that occurs from genital circumcision can cause death if it is not treated.

2.2. Sexual Violence

Sexual violence is defined as a forced sexual act, which includes speaking, seeing, or touching the victim. Sexual violence is generally classified into two parts, namely physical and psychological. According to Utami, Nurwati, and Krisnani, violence against children is a deliberate act and causes harm to victims who are children, both physically and emotionally [16].

Sexual violence can be divided into two categories: 1) Familial Abuse (incest) is sexual violence perpetrated by people who are still related by blood or are part of the nuclear family, such as surrogate parents or lovers. Incest in the family and associated with violence against children is the first to seek involving acts to be able to stimulate the perpetrator sexually; 2) Extra familial Abuse is sexual violence committed by people outside the family environment [16].

The perpetrators of this category are adults who are pretty close and known to the child, and a relationship has been built between the perpetrator and the child. According Marrilac, there are other factors that cause sexual harassment and violence against children, which can be called external factors, including: 1) Socio-cultural factors, the increase in cases of immoral crimes or rape are closely related to socio-cultural aspects. As a result of modernization, an increasingly open culture and freer association have developed; 2) Economic factors that are difficult cause a person to have low education and will subsequently have an impact on whether or not the work obtained is good or bad. 3) Factors Mass Media is a means of information in sexual life [17].

3. METHODS

The primary method used in this research was qualitative, with data collection techniques using interview techniques.

3.1. Research Participants

The technique used in this research sampling was the purposive sampling technique. This study

involved six informants, consisting of three traditional leaders and three medical experts. The six informants consisted of two informants, divided into

three customs, namely the *Mbojo* Tribe, *Sasak* Tribe, and *Samawa* Tribe in West Nusa Tenggara.

Table 1 Participant's Information

P	sex	Age (y.o)	Tribe	
P1	Female	38	Mbojo	Medical
P2	Female	58	Mbojo	Traditional Figure
P3	Female	63	Sumbawa	Medical
P4	Male	73	Sumbawa	Traditional Figure
P5	Female	35	Sasal	Medical
P6	Male	50	Sasak	Traditional Figure

3.2. Research Procedurs

The research procedure used in this research was field orientation by looking at the conditions, situations, and information from people surrounding who knew the informant's tip in accordance with the research criteria. The researcher approached and asked for approval to be interviewed, and then the informant agreed with the agreement. Data collection was carried out by telephone interview at an agreed time and will maintain the confidentiality of the informant's data. Interviews were conducted by researchers by telephone because she saw the current conditions, which were still not conducive, and it was possible to conduct direct interviews due to the Covid-19 outbreak.

3.3. Data Collection

Data was collected by means of interviews. The researcher had prepared an interview guide that was used to assist the data collection process. The interviews were conducted in Indonesian or in the language of each tribe according to the language used

by the informants, such as the Mbojo language, Sumbawa language, and Sasak language. The frequency of data collection was done one to two times for each participant, with the duration of the interview ranging from 13 minutes to 53 minutes.

3.4. Data Analysis

Data analysis was carried out using thematic analysis, which was processed using the Nvivo12 program. The first step was to make a verbatim transcript of each participant, and then it was coded and categorized in order to get a research theme that was in accordance with the tradition of circumcision in West Nusa Tenggara.

4. RESULTS

Based on the data obtained showed that the custom of khitan perempuan. The result of this study were grouped into six categories: reasons for doing female circumcision, perpetrator, procedurs, positive impact, negative impact, sexual violance.

Table 2 Research Themes

The Custom of Khitan Perempuan	Theme	Participants
Reasons for doing female circumcision	Signs of a muslim	P2
	Sexual control	P2 and P6
	Gender equality	P4
	Preserving culture	P4
	Not recommended	P1, P3, and P5
Perpetrator	Wives of religious leaders	P2
	Shamans	P1, P4, and P6
	Medical (midwives and doctors) who have legality	P3 and P5
	Cutting	P1, P2, P3, and P5

Procedurs	Cleaning	P1, P3, and P4
	Scratching	P1, P3, and P6
Positive impact	Gathering event	P4
	Increase self-confidence	P4
	Maintaining reproductive health	P3 and P6
	Mantain chastity	P4 and P6
The Custom of Khitan Perempuan	Theme	Participants
Negative impact	Infection, damage to vital tissues, bleeding, childbirth disorders, decreased sexual desire, and urinary disorders	P1, P3, and P5
Sexual violence	Mental violence	P5
	Violence against female reproductive organs	P1, P3, and P5

4.1. Reason for Doing Female Circumcision

Sexual control. This is the main reason for female circumcision. P2 and P6 stated as follows:

"This circumcision will cause a woman's libido to decrease" [P6]

"So that her lust can be controlled a little too" [P2]

In addition, P4 said that there are 2 reasons for female circumcision, namely to preserve customs and as a form of gender equality.

"It's good that the community supports to keep implementing the existing cultural values like that, to maintain the integrity of the community." [P4]

"The meaning is for gender equality, so it doesn't differentiate between men and women." [P4]

Sign of a Muslim. That is the reason stated by P2, as he said:

"The difference between a Muslim or not, and also as a form of women's dedication to the family on the honor that she is a Muslim." [P2]

Contrary to the medical perspective. Each participant who in fact came from the medical field, whether P1, P3, and P5, all stated that female circumcision is not recommended in the medical world. The following are the statements of the 3 participants.

"The meaning is for gender equality, so it doesn't differentiate between men and women." [P4].

"From the past until now, the medical team has not accepted female circumcision." [P1]

"In medical terms, female circumcision is not justified by their understanding. They don't allow female circumcision" [P5]

4.2. Female Circumcision Procedurs

The results obtained from this study also show that there are 3 ways in the circumcision process, namely cutting, cleaning, and scratching. 5 participants said that female circumcision was cut. They said:

"The cutting or tosi is carried out by religious leaders using sharp tools." [P1]

"Someone cut... the clitoris itself." [P2]

"Circumcision by definition is cutting" [P3]

Another way is by being scratched. As stated by:

"Using a sharp knife to scratch, so it doesn't hurt the genitals too much."

[P5]

"That is scraping the skin covering the front of the clitoris using a sterile needle tip" [P3]

"scratch the female genitals" [P1]

Cleaning. The last way to do circumcision is only by cleaning the female genital organs. As stated by P3, namely:

"To clean the white dirt that is in the vagina." [P3]

"At the end it was wiped (cleaned) a little." [P3]

"The peak is rubbed a little." [P4]

4.3. Female Circumcision's Perpetrator

Based on the data above, people who have the right to circumcise women can be categorized into 3, namely wives of religious leaders, shamans, and medical experts. As already mentioned by P2 for spiritual leader, P1, P4 and P6 for shamans, then P3 and P5 for medical expert.

"If a woman is the wife of a religious figure or wei lebe" [P2]

"Women shamans, special women in society itself." [P4]

"Only shamans or in community customs." [P1]

"Only traditional birth attendants could perform female circumcision" [P6]

"Permitted to perform circumcision on condition that they have a license to practice (medical personnel)". [P3]

"Only skilled doctors or midwives who are already professionals are allowed." [P5]

4.4. Positive Impact and Negative Impact of Female Circumcision

In addition, this study also shows the benefits of female circumcision, including maintaining the chastity of women. As P4 and P6 say this.

"Efforts to be holy. If it is interpreted, people who take clean shower many times if they have not performed ablution, then they are not considered holy. Therefore, circumcision in religion must also be carried out as an effort to be holy." [P4]

"Female circumcision is a way to protect women's chastity" [P6]

"Preservation of women's chastity by reducing their sex desire" [P6]

"Cleaning the whiteness that sticks to the clitoris." [P3]

Besides that, reproductive health is also one of the benefits of female circumcision.

"Female circumcision is required because it is to maintain women's reproductive health. Because the female genital which is being circumcised is the part of the disease" [P6]

Self-confident. Another participant said that female circumcision could affect the self-confidence of the circumcised women.

"So basically she has an identity, believes herself is existing. It is important to believe in herself that she is a woman" [P4]

Civic consciousness. Furthermore, P4 stated that the female circumcision tradition became a forum to promote civic consciousness among community groups.

"The cultural value is that we could meet community groups at the event" [P4].

Furthermore, 3 other participants mentioned the negative impacts caused by female circumcision, namely infection of the genital organ, damage to vital tissues, bleeding, childbirth disorders, decreased sexual desire, and urinary disorders.

"If it is cut, it causes infection because it could damage the vital tissues for women, bleeding, it could become infected, it causes difficulties in giving birth" [P3]

"Causing bleeding due to the cutting of clitoris blood vessels or blood vessels ... experiencing problems in having sex, damaging susceptible genital tissue, especially could cause a decrease in sexual desire, could also experience problems in childbirth, urinary disorders, infections and other adverse effects." [P5]

"Can damage the clitoris and harm the female reproductive organs, infection, pain, urinary disturbances, and bleeding due to cutting blood vessels in the clitoris." [P1]

4.5. Sexual Violence of Female Circumcision

In addition, the circumcision tradition is also indicated as sexual violence, mental violence, and sexual control for women. Sexual violence as stated by P1, P3, and P5

"From a health perspective, this could be a form of sexual violence." [P1]

"Obviously, that includes violence." [P3]

"The main reason for medically removing female circumcision is that there is an element of sexual violence." [P5]

Mental violence. P5 said as follows:

"Women can experience bad mentality." [P5]

5. DISCUSSION

The results of this study emphasize that the main reason for doing female circumcision in the customary review is as a form of sexual control, as explained by P2 and P6. Furthermore, P4 stated that another reason was: as a form of gender equality and as an effort to preserve hereditary customs. Female circumcision is also a sign that she is a Muslim, according to P2. Previous research has also shown that among the motives for implementing female circumcision is one of the requirements to become a Muslim in Islam [18]. Another similar reason is to keep women from being wild, in this case it is closely related to sexual control [19][14]. Other research also mentions that society is widely believed that cutting the clitoris could reduce a woman's libido, prevent premarital sex, immorality, and prostitution [18]. In addition, the practice of female circumcision has become a deeply rooted tradition that must be preserved [18][20][21][22]. However, other studies have shown different results, that female circumcision does not significantly affect sexual control and female sex behavior [23]. While, P1, P3, and P5 did not recommend the traditional custom. Other studies also stated that no reason to continue advocating the tradition of *Khitan Perempuan* [24][25][26].

Based on the data from this study, it also shows that according to the narratives of traditional leaders and medical experts, there are 3 people who could practice female circumcision. P2 said that the wife of a religious figure was justified in doing this. Meanwhile, P1, P4 and P6 said that the charlatan had the right to circumcise women. Previous research related to female circumcision in Egypt also stated that 91.3% of the circumcision procession was dominated by nonmedical personnel [27]. Meanwhile, P3 and P5 said that only medical experts who have legality are allowed to perform female circumcision. Furthermore, the study also stated that doctors circumcised women, but only 8.7% of all cases. While 78.6% of women in Nigeria report that nurses or midwives are the operator of the procedure of Female Genital Mutilation [28][29]. This is done to prevent complications and other incidents. However, the negative impact on women's sexuality is unavoidable [27].

Based on the data obtained from this study regarding the procedure for performing female circumcision, there are several types of circumcision methods that are applied, namely: P1, P2, P3, and P5 say by cutting, and P1, P3, and P4 say only by cleaning. In addition, P1, P3, and P6 also mentioned another method of female circumcision, namely by

only scratching. Previous research said that the circumcision type is by scraping and cutting the clitoris and labia minora either partially or entirely [30][31][32]. The gentlest ordinance is a method that is in accordance with the teachings of Islam as the majority of religions in the 3 tribes [33]. World Health Organization stated that there 4 procedures to do female genital mutilation, there are: excision of the prepuce, with or without excision of part or all of the clitoris, is referred to as type I. Excision of the clitoris with partial or total removal of the labia minora is referred to as type II. Type III refers to the removal of part or all of the external genitalia, as well as the stitching or narrowing of the vaginal opening (infibulation). All other non-medical procedures that cause harm to the female genitalia, such as pricking, piercing, incising, scraping, and cauterization [34].

Furthermore, based on the data obtained regarding the positive impact of female circumcision, there are 4, namely: P4 calls it a civic consciousness and increases self-confidence, P3 and P6 as an effort to maintain reproductive health, and maintain chastity according to P4 and P6. Previous research has stated that among the benefits of female circumcision is cutting the clitoris and balancing sexual libido, which is if left untreated will result in various types of inflammation. Beautify the sacred lust, avoid large or constriction of the clitoris, minimize inflammation of the urinary tract and inflammation of the genital organs. That the cause of inflammation of the urinary tract and genital inflammation is due to the proximity of the clitoris to the opening of both. This proximity causes the accumulation of bacteria [35]

Meanwhile, the negative impacts of female circumcision are infection, damage to vital tissues, bleeding, childbirth disorders, decreased sexual desire, and urinary disorders as stated by P1, P3 and P5. Previous research also said that among the complications caused by female circumcision are: dysuria, cysts of vulva, infection of vulva, keloids, bleeding, and narrowing of introitus [36]. 30% of circumcision cases have complications, there are: bleeding, sexual dysfunction, and delivery-related issues [37]. Additionally, P5 states that another negative impact of this Circumcision practice is violence against women's mental. This is in line with previous research that revealed other long-term health consequences include psychological and psychosexual disorders [28][38][27]. Female genital mutilation has psychological effects on women because it causes emotional trauma, psychological trauma, physical depression, aggression, and alienation, urological incontinence, HIV/AIDS, Hepatitis B, and other blood-borne diseases [39][40].

6. CONCLUSION

The findings from this study illustrate the the following reasons for conducting traditional female circumcision: sexual control, gender equality, proof as a Moslem, and an effort to preserve hereditary customs. Female circumcision can be executed by three people: the wife of a religious, the charlatan, and the medical expert. Several types of circumcision methods are explicitly used for this study regarding the procedure for performing female circumcision: cutting, scratching, and cleaning. There are four types of positive effects of female circumcision: civic consciousness, increased self-confidence, women's health, and purity. Infection, damage to vital tissues, bleeding, childbirth disorder, decreased sexual desire, urinary disease, and mental violence against women are all negative impacts of female circumcision. The established measures that the Khitan Perempuan process is regarded as sexual harassment.

AUTHORS' CONTRIBUTIONS

This research is expected to contribute to society in general who still apply the tradition of female circumcision that does not reduce education and information on the negative impacts. Furthermore, it becomes a significant consideration not to support this policy on eliminating sexual violence against women.

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