

Genital Stretching and AIDS/HIV in Africa

News

Posted by: niccosan

Posted on : 2008/10/22 13:00:00

Padua Working Group on Female Genital Mutilations .University of Padua

Genital Stretching (GS) is an expansive genital modification improperly classified by WHO inside the Female Genital Mutilation (FGM) forms (4th type)1. Ritual GS2 is a traditional practice of the Central-Eastern and Southern African populations settled on the migration ways of the ancient Khoisanid populations3, who possessed labia minora elongation as an hereditary trait.

At present, this morphology is an acquired trait, highly rated in Africa as it enhances coital pleasure and facilitates orgasm. Usually traditional caseworkers teach manipulation to the girls consigned to their care, following their psychological maturation towards a full sexuality thanks to prescriptions that very often stimulate sexual promiscuity. Here we show that a logistic link between this tradition and HIV diffusion in Africa exists . During field campaigns we found in Buganda region (Uganda)4, in Western and Eastern Kasai and Kivù (Congo Democratic Republic)5, and in central-southern Malawi6, a "leopard's spots" diffusion for ritual GS, connected to the single ethnic groups. Correspondingly, the higher percentages of viral infection are found exactly inside the populations practicing ritual GS7,8,9,10 The map8,2, shows that all the African regions interested in the expansive rites lie inside the area of higher diffusion for HIV, with peaks in South Africa and Botswana, still today inhabited by the last Bushmen's heirs. This connection does not appear among the northern tropical areas of reductive FGM forms (the focus of infibulation in the Horn of Africa is found where the viral infection is almost absent), while in countries with sporadic cases of excision (Ivory Coats, Nigeria and Ethiopia) the percentages of HIV infection are quite poor. WHO underevaluates the importance of ritual GS and considers less harmful by comparison with excision or infibulation for the health of women. Here we show that ritual GS, however, is an important sociocultural determinant linked to HIV diffusion in Africa.

1. WHO. Female Genital Mutilation. Report of a WHO Technical Working Group, July 17-19th, Geneva (1996).
2. Grassivaro Gallo, P. Il longinifismo rituale nell'Africa dei Grandi Laghi. In: di Giovanni, P. La continuità possibile. Pp. 285-303. Volume in onore di A. Rigoli. Fotograf, Palermo (2008).
3. Grassivaro Gallo, P., Tita E. & Viviani, F. At the Roots of Female Genital Modifications (FGMo). In: Bodzsar, E.B. & Susanne, C. Human Evolution: Facts and Factors. Pp. 159-169. Biennial Books of the EEA. Eotvos University Press, Budapest (2006).
4. Grassivaro Gallo, P. & Villa, E. Ritual labia minora elongation among the Baganda women of Uganda. Psychopathologie Africane 33:213-236 (2005/2006).
5. Grassivaro Gallo, P. Tsiala Mbui, N. & Mulopo Katende, C. L'opinione maschile sull'"Elongation des petites lèvres" in RDC. (2007). www.scienzaonline.com/sessuologia/opinione-maschile.html
6. Grassivaro Gallo, P. & Moro, D. Modificazioni Genitali Femminili in Malawi. Primo resoconto di un'indagine sul campo. In: Grassivaro Gallo, P. Manganoni, M. Pratiche Tradizionali Nocive alla Salute delle Donne. Pp 73-86. UNIPRESS, Padua 2006.

7. STD/AIDS Control Programme Ministry of Health, Uganda 2003 (www.health.go.ug).
8. www.unaids.org (2004)
9. www.who.int (2004)
10. National AIDS Commission. Estimating National HIV Prevalence in Malawi from Sentinel Surveillance Data, Technical Report, Malawi 2003 (www.policyproject.com)

Grassivaro Gallo P., Endrighi L., Viviani F.