Despite education, female circumcision st

John Mwaura Special to Sentinel-Voice NAIROBI, Kenya (PANA) - It is the month of

December, and school vacations in Kenya have begun for seven weeks- to give students time to celebrate Independence, Christmas and New Year's festivities.

For one young girl, the recess is a real joy and a special time for her. She will undergo a rite which will mark her passage from childhood to adulthood. She will undergo circumcision.

Not so for Gladys Mwari, who shivers at the thought of "facing the razor blade." She even contemplates running away from home to her aunt's, but a sharp rebuke from her elderly parents persuades her to stay home.

Jane Muthoni considers herself lucky. Though her parents have made all of the

preparations for the circumcision ceremony, a social worker in whom she confided her fears about the ceremony "abducts" her.

Every year hundreds of Kenyan girls undergo circumcision-also referred to as clitoridectomy, or female genital mutilation-according to UNICEF. Circumcision of women in some communities is held in the highest esteem. Those who practice it say the rite is meant to initiate girls into adulthood. Most girls in communities that practice it abandon school to get married.

The communities also believe that circumcision helps girls to remain virgins. Men who support the idea say the practice represses the sexual desire of women and is a way of curbing

Female circumcision,

however, has been associated with several fatal health risks such as hemorrhaging, infection and shock. Longterm consequences are sterility, menstrual irregularities, difficulties during intercourse, urinary tract infections and problems during childbirth. In addition, there are psychological effects which in many cases are subtle and buried within.

A Kenyan medic, Dr. O. Oburu, says the equipment used by local communities during circumcision in most cases is not sterilized, and can infect the initiated with disease including HIV/AIDS, hence the need to educate practitioners on the consequences of this outdated custom. A woman leader agrees, saying: "I underwent the ritual when I was a young girland the tools of (the) trade were not only rusty, but generally unhygienic. I now realize the dangers I faced after the ritual.'

Research carried out by the Programs for Appropriate Technology in Health says the practice gives some Kenyan girls the courage to have early sex as a test of their womanhood. According to the research, health workers found that some of the girls have to undergo another "cut" when they are married as their sex organs are stitched at the time of circumcision.

The practice is more common among the Somali of northern Kenya and in Somalia itself. It has become such a big issue in Kenya that those who are not circumcised in local communities are considered outcasts. "Today women of my age shun me. while men use derogatory terms to describe me," Anne, from Meru district, told PANA.

She flashed a newspaper and pointed to an item where seven middle-aged women have been arraigned in a court of law, accused of forcefully circumcising one of their agemates, a neighbor. "That's my home village and I know both the accused and the victim," she said.

Thousands of girls worldwide are subjected to the practice. In Kenya the removal of the clitoris and labia minora without stitching is common, while in other countries the wound is stitched together after the removal of the clitoris, labia minora and labia majora.

Campaigners against the vice and social workers say agencies have come up with programs wherein they sensitize the communities against the practice and instead "graduate" the girls to adulthood with certificates instead of the razor. At these seminars, the girls are educated on important issues of womanhood. Participants are upper primary and secondary school girls.

The new method of initiating girls into mature women is, however, meeting resistance from members of the communities where circumcision is prevalent. The communities, which include the Maasai, Kisii, Meru, Samburu and Pokots. believe that if a girl does not undergo the rite, the spirits of her ancestors will haunt her.

Some close relatives, like brothers and husbands of uncircumcised women, are also said to secretly arrange for their uncircumcised sisters and wives to receive the "cut" without the

BALTIMORE (AP) - An AIDS study conducted in Uganda has raised ethical concerns about whether uninfected sexual partners were put at risk by researchers.

Johns Hopkins University researchers tracked 415 heterosexual couples in several rural villages in which one partner was infected with HIV and one was not.

Despite receiving free condoms, the couples rarely used them.

During 30 months of observation, 90 people in the study caught the virus. The study found that the higher the level of HIV in the infected person's blood, the higher was the risk of passing on the virus through sex.

The study was presented at a conference in

The findings were published last Thursday in The New England Journal of Medicine with an editorial by Dr. Marcia Angell questioning the study's ethics.

"Most people agree that investigators assume some responsibility for their human subjects, but how much?" Angell wrote. "Our ethical standards should not depend on where the research is performed."

Angell said the manner in which the study was conducted "meant that for up to 30 months, several hundred people with HIV infection were observed but not treated."

In addition, she said, it was left up to the infected member of each couple whether to

inform the uninfected partner of the disease.

The study was approved by five ethics review boards, including one in Uganda, the researchers said.

"We gave them a better standard of care than is available to poor people in the U.S.," said Dr. Thomas C. Quinn, the study's lead author and a professor of medicine at Hopkins. "We would never have done this story if it was unethical."

Despite the ethical concerns, the study results could have important implications for the future of the AIDS epidemic in the United States, where drug treatment has lowered virus levels for many.

AIDS treatments in recent years have saved many lives, and public health experts speculate that they may have an additional benefit slowing the epidemic by making infected people less likely to pass the virus to others.

Drought

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the fall whether the next planting season would be successful.

Bertini plans to travel to the region on April 10, visiting Ethiopia, Djibouti, Eritrea the situation and to pressure governments at one of its aircraft. to give aid workers access to the needy.

Aid workers have often been prevented from reaching at-risk groups in countries such as Sudan due to fighting.

In southern Somalia on Thursday, the United Nations stopped its air and ground and Kenya, to try to raise awareness about operations after unidentified gunmen shot

No one was injured.

Education

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healthcare demands, both on the treatment side and on preventative technologies. Again- a high demand for science, math and the humanities.

Will urban minorities take advantage of this biotech revolution?

Following the prescription that seems to be in the pharmacopeia of practically every educational administrator and elected official alike, that is: "to put a computer on every desk in every classroom"- and in some rather ironic ways- misses the point when it comes to the real needs of primary and secondary education.

The goal of bringing technology to Urban America should not be to develop an army of technical braintrusts connected only in cyberspace, disconnected from other human beings or the essential elements that form the glue that keeps society together.

Instead, it should be to empower people to increase their effectiveness as they pursue occupational and personal goals that make their lives more meaningful and fulfilling.

Many interests involved in the current debate on education reform seem to miss this important point.

What will be even more challenging, as schools do get the hardware and software they desire, will be that technology changes the culture of learning dramatically, and

educators will require a major shift in their own teaching models, a shift for which they are ill-prepared today.

And so if we are really serious about education reform and are willing to leverage the future of our progress instead of mortgaging that of our children, we will recognize and acknowledge that many new models should be explored-including some form of vouchers (often used as a dirty word), charter schools, distance learning, higher standards and different organizational models even within public school systems.

The recent introduction of a flattened, decentralized organizational model by the interim Superintendent of the Los Angeles Unified School District is a courageous example of the response by new thinkers. Others will be needed.

In the end, to really transform education and create a better future for our children and our childrens' children will require a new brand of leadership.

That leadership must be devoid of selfserving political agendas but filled with the rewards of seeing young people grow up to make meaningful contributions to a changing

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