# The Implementation of Constitutional Rights of Women in Yhe Practices of Female Circumcision in East Java

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## The Implementation of Constitutional Rights of Women in The Practices of Female Circumcision in East Java

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#### Abstract

Every citizen have the same rights at the same time in law and government, we called it equality before the law. In Indonesia this is recognized in the Indonesian Constutional 1945. Constitution of the State of the Republic of Indonesia which is currently undergoing changes until the fourth change (4th amendment). However, the implementation of the rights before the law on women issues often faced difficulties. This paper is intended to analyze how women have no protection of their rights in the issue of female circumcision. This paper based on research in 2 areas in East Java Province, that were 1) Bangkalan Regency, and 2) Situbondo Regency. The research was a qualitative research supported with quantitative data. The data collection was using indepth interview to 20 informants and interviews using questionnaires to 200 respondents. The research reveals that there were many things affect women's ability to access for the constitutional rights in the issue of female circumcision. This was effect the health condition of girls and women as the impacts of practices of female circumcision.

Keywords: Female circumcision, Law and women issues, Women's rights, Qualitative research

#### I. Back Ground

Female circumcision is one of the social phenomena in the world. Some terms are used to refer to female circumcision. These terms include female genitale cutting, female genitale mutilation, and female circumcision. However, to emphasize the impact of violence on this practice, the most widely used term is female genital mutilation. Furthermore, WHO (World Health Organization) divided the definition of female circumcision into four categories (WHO, 2006):

- Type I, cuts all parts of the clitoris
- Type II, partial clitoris cut,
- Type III, sewing or narrowing the mouth of the vagina (infibulasi),
- -Type IV, piercing, scratching the tissue around the vaginal opening, or inserting something into the vagina to cause bleeding.

The phenomenon of circumcision in women has pro and contra opinion. Some group of people support the practice of female circumcision and composed of religious leaders. Those who support the practice of female circumcision are based on the reason that female circumcision can make lower the libido when a girl grows up. Thus, women who have been circumcised are considered able to make lower their sexual desire so that they can maintain their honor until marriage. However, different reasons are expressed by some counter parties with the practice of this female circumcision. Many women's NGOs and human rights activists refuse and thinking that there is no benefit to women who have been circumcised. Polemic about the practice of female circumcision has long been happening in Indonesia, but until now this problem can not be resolved because of differences of opinion in some group of people

#### II. The problem is:

How the implementation the constitution right for the women circumcision in East Java?

#### III.The History

The practice of women's circumcision has actually been practiced by people in several countries around the world. Countries that practice many women's circumcision are countries with the majority Muslim population. These countries are Pakistan, Bangladesh, Malaysia, including Indonesia. However, each country has a different percentage. Based on the news quoted by femina.co.id, female circumcision practices are also widely practiced in the countries of North Africa, the Middle East, Southeast Asia, and some regions in the United States and Australia. According to the Amnesty International Institute, an estimated 2 million women and girls are circumcised each year.

The practice of female circumcision is also happened in some areas of Indonesia. Practice of female circumcision occurs in many areas in Indonesia, such as Banten, Yogyakarta, Madura, etc. For most people of Banten, circumcision must be performed when the child is at least 2 - 3 years old. When the obligation is not executed, the law is considered haram (unclean and kafir), so that all forms of worship that he did is considered illegitimate. Lampung community also has a similar tradition with the people of Banten, the tradition of female circumcision

performed when the woman aged 2-3 years. For the people of Lampung, women who are not circumcised then, it looks will look less beautiful and less luminous. The tradition of female circumcision in Lampung society is also referred to as 'circumcision senbai' (Mesraini, 2003). The same thing is also shown by the Banjar community. They engage in female circumcision activities at 40 days after born by reason of following the existing tradition and has been done for generations. They assume that not perfect only when the existing tradition is not continue by the next generation (Nurdiyana, 2010)

Another case with the practice of female circumcision performed by the community in Yogyakarta. They practice the practice of female circumcision as one form of Islamic religious worship. However, there are no sanctions that actually bind women who do not perform circumcision. Furthermore, in Madurese society, female circumcision is performed with the aim of being a ritual of Islamic belief purely without any prior cultural history. This happens because the culture brought from Java to Madura is not enough awake by the local community (Putranti, 2003).

Based on the news reported in Blora Daily (2015), there are still many people who do Blora Blood family do circumcision in women's daughter at the age of 36 days or when the baby is selapan. Based on the existing data, it is known that the female circumcision of the community in Blora is mostly done by a midwife, not a medical person who has been given permission to practice. However, some people also do so on medical personnel and along with ear piercing and earrings to look beautiful. Based on the narrative of village elders and midwives from Tunjungan sub-district, Blora, this female circumcision activity is a downward descending culture that should have been preserved by the community.

Based on research conducted by Nantabah, et al (2015), it can be seen that female circumcision is mostly done in West Java Province (14,7%), North Sumatera Province (8,1%), and East Java (7.3%). Female circumcision rates in West Java and East Java provinces are more or less influenced by Kyai and kharismatik clerics whose can affect people. The majority of reasons that Indonesians use in practicing female circumcision are religious reasons. Religionally, female circumcision is done to restrain women's lust for her femininity to stay up until they get married. However, different things are mentioned by dr. Sharifa Sibiani from King Abdulaziz University, Jeddah. Dr. Sharifa undertook a study of 260 women half of whom had been circumcised. He studied sexual behavior and their experiences during sex. The result, there was no difference in sexual arousal or libido among women who have been and are not circumcised (femina.co.id).

II.Pro and Contra in Women Circumcision

Female circumcision in Indonesia actually pro and contra until now. However, there are still many practices of female circumcision with a variety of reasons, ranging from religious reasons, cleanliness, until the reason to avoid the disease. However, in 2005 a workshop was held on the practice of female circumcision. These activities involve professional organizations, NGOs, national committees, and all aspects of the programs and sectors involved. Based on the workshop, it was agreed that the practice of female circumcision is not useful for health, even considered harmful or make hurt.

Considering that, the Directorate General of Public Health issued Circular Letter Number HK 00.07.1.31047a dated 20 April 2006 regarding Prohibition of Medicalization of Female Circumcision for Health Officers. With the circular letter, most of the baby girls born are no longer circumcised. However, in response to the prohibition of female circumcision, the Indonesian Ulema Council (MUI) issued a fatwa in response to it. Response is contained in Decision Fatwa Number 9A Year 2008 which states that female circumcision is glorified (makrumah) and prohibition of female circumcision is considered in contradiction with the syiar of Islam.

Furthermore, in response to the MUI fatwa, the Ministry of Health then issued Regulation of the Minister of Health (Permenkes) No. 1636 / Menkes / Per / XI / 2010 on female circumcision. Permenkes contains details of the stages that must be performed by medical personnel to practice the circumcision that is for women is done in accordance with the provisions of religion, service standards, and professional standards to ensure the safety and safety of circumcised women.

The polemic on the occurrence of Permenkes No. 1636 / Menkes / Per / XI / 2010 concerning the circumcision of the meeting reap some criticism from several parties to revoke the regulation. Insistence comes from several circles, ranging from Amnesty International to the Head of the Population and Gender Agency of YARSI University. This arises because the practice of female circumcision shows no benefit to women who underwent circumcision in childhood, as well as in adulthood.

Responding to criticism coming from some parties, then in 2010 the Ministry of Health again issued Permenkes. The regulation is stipulated in the Permenkes RI Number 6 of 2014 on the Revocation of Permenkes 2010. Permenkes is issued again by the Ministry of Health because circumcision in women is not proven to have benefits for those who are circumcised. Based on some explanations about female circumcision above, it can be seen how the practice of female circumcision still take place today although it has been known various negative impacts. In addition, polemics about female circumcision from religious and legal reviews become national and international topics. Based on this, a research study on how people respond to the phenomenon of female circumcision that has long been filled with pros and cons in its implementation is considered necessary, especially the assumption of the element of violence and deprivation of women's rights in the implementation.

If the practice of women circumcision is seen from feminist glasses, it can be seen that in fact the activity has seized reproductive rights on women. Because, women's circumcision has been deemed to have no benefit for women. According to Fatayat NU (2013), Muzaenah Zain, the implementation of women's circumcision with the wrong method, can lead to bleeding that leads to the death of the woman.



#### III. The Risk of Women Circumcision

In addition, there are still many risks that women face after undergoing circumcision. Such risks can occur in the short and long term. Here is the long-term risk and short-term risk caused by the practice of women's circumcision as reported in the compass daily (2016):

#### 1. Short-term risk

- Infection of all pelvic organs that leads to sepsis.
- Tetanus that can cause death.
- Gangrene that can cause death.
- Extraordinary headaches that can lead to shock.
- Urine retention due to swelling and sputum in the urethra.

#### 2. Long-term risk

- Prolonged pain during sex.
- The penis can not enter the vagina so it requires surgery.
- Sexual dysfunction (can not reach orgasm during sex).
- Menstrual dysfunction resulting in hematocolpos (accumulation of menstrual blood in the vagina), hematometra (accumulation of menstrual darh in the womb), and hematosalpinx (accumulation of menstrual blood in the fallopian tubes).
- Chronic urinary tract infection.
- Urinary incontinence (unable to hold urine).
- Can occur abscesses, dermoid cysts, and keloid (hardened scar tissue).

Therefore, many women activists, NGOs and women's organizations support the prohibition of female circumcision practices in Indonesia. In addition, basically many perpetrators of female circumcision who perform these activities only to continue the culture that has been there and has been done for generations. A deeper and holistic study of female circumcision through various research approaches.

#### IV. Approaches to Women Circumcision Habbit

In addition, development activities can be said to succeed if the community voluntarily and consciously involve themselves in the program activities. However, if there are communication programs often run unilaterally by program planners and public policy makers. The problem of bureaucratic character seems to move according to arithmetic. While the escalation of the problems of nation and state move in the geometrical progression. Imagine, how many communication activities that are less attention to the condition of the audience and the context of the local community communication system. Both formal institutions such as law or informal ones such as customs, values, habits and norms that affect communication among citizens. Worse yet, the approach used is also the old approach, when it involves the community as a leader (opinion leader) as; local / local languages or traditional customs and media meeting forums, are often merely ceremonial. As a result after the activities and events then also over what is delivered.

Public consultation is often still addressed erroneously as a notice to the public and asked for an opinion, is finished. However, there is still a policy product that does not fully adopt important matters in public consultation (or rather just information dissemination). Whereas public consultation is an event to exchange dialogue and hear opinions and solve various problems that may exist between two parties.

It is at this point that a new approach is really up to date. Not just forcing the old paradigm to be wrapped with technology or a new way. The new approach requires two things, the first open mind, namely openness to any differences that arise and then in an equal position to determine the best way out. And second, sustainability, whether a policy will be sustainable and can last for a certain period of time and adjust to the level of ongoing development? A thing that may be difficult when there is a momentary orientation and the interests of a mere project without any desire to fight for much greater importance. So that every public policy can be found its way out in a wise way and not just wrap the old things with "clothes" newer.

Broadly speaking, the importance of this research is based on several conditions in the management of information and communication program of local government in handling female circumcision. For example, there are still obstacles in building quality information systems and public communications. How to package an information and information management system that the public needs and has quality, accurate and attractive. Because with the information in accordance with public needs and acceptable then the public satisfaction will be achieved. With quality information then the credibility of local government agencies will be more reliable in the eyes of the public.

#### V.The Result

Bangkalan District

1. Implementation of the Practice of Circumcision in Girls in the Family

No. Percentage Frequency Performance (%)

- 1. Yes, Implement 100
- 2. Not Conducting 0

Total 100

2. Reasons for Practicing Circumcision in Girls

No. Reasons for Frequency Percentage (%)

- 1. Tradition 65
- 2. Ordered by Parents 18
- 3. Already Circumcised Directly by Medical Personnel / Dukun 17

Total 100

3. Victim Practice Circumcision in Girls in the Family

No. The circumcision victim and did not perform

- 1. Girls 67 33
- 2. Siblings 100 0
- 3. Nephew Female 86 14



- 4. Actors Who Ordered the Practice of Circumcision in Girls in the Family
- No. Actors that Ordered and Actor Doesn't Ordered
- 1. Parents 56 44
- 2. Grandfather / Grandmother 83 17
- 3. Uncle / Aunty 68 32
- 4. Self Desire 8 92
- 5. Medical Personnel 43 57
- 5. Sanction Enforcement If Not Implementing the Practice of Circumcision in Girls
- No. Description
- 1. There are sanctions 76
- 2. No sanctions 24
- 6. Sanctions Provided If Not Implementing the Practice of Circumcision in Girls
- No. Type of Frequency Percentage Sanction (%)
- 1. Certain Sanctions (Suppressed by Families) 76
- 2. Social Sanctions (Digunjingkan) 0
- 7. Actor Who Sanctions
- No. Actor Frequency Percentage
- 1. Neighbors 0
- 2. Parents 76
- 8. Knowledge of the Law of the Practice of Circumcision in Children
- No. Description Frequency Percentage (%)
- 1. Obligation 69
- 2. Not Required 31
- 9. Age of Children Usually Circumcised
- No. Age Frequency Percentage (%)
- 1. Live After Birth 57
- 2. Age 0-7 days 23
- 3.0-40 days 20
- 10. Actors Who Practice Circumcision in Girls
- No. Correcting Actor Frequency Percentage (%)
- 1. Dukun Bayi 91
- 2. Midwife 9
- 11. Implementation of the Practice of Circumcision in Girls in Respondents
- No. Description Frequency Percentage (%)
- 1. Yes to do circumcision 100
- 2. Not doing circumcision 0
- 12. Circumcision Age



No. Age Frequency Percentage (%)

- 1. Immediately After Born 69
- 2. Age 0-7 days 31
- 13. The Most Active Family Members in Governing the Practice of Circumcision in Girls

No. Actor Frequency Percentage (%)

- 1. Natural Mother 14
- 2. The mother-in-law 28
- 3. Grandmother 47
- 4. Aunt 11
- 14. Implementation of Circumcision Practice on Respondent's Children

No. Description Frequency Percentage (%)

- 1. Yes to circumcision 96
- 2. Not doing circumcision 4
- 15. Age of Respondent's Children When Circumcised

No. Age Frequency Percentage (%)

- 1. Directly After Birth 75
- 2. Age 0-7 days 21
- 16. Reasons Children Respoden Circumcised

No. Reasons for Frequency Percentage (%)

- 1. Not to Be Reproved by the Family 32
- 2. It has been done directly by TBA 28
- 3. Self Desire 3
- 4. Following Tradition 33

#### Situbondo

1. Strengthening Information Introduced by Actors

No. Percentage Frequency Information (%)

- 1. Proposition 27
- 2. Religious Lecture 58
- 3. Health Information 15
- 2. Knowledge of the Health Impact of the Practice of Circumcision on Girls

No. Impact Frequency Percentage (%)

- 1. Being Clean and Healthy 56
- 2. No Excessive Lust 44
- 3. Knowledge of the Circumcision Instruction Act on Girls

No. Description Frequency Percentage (%)

- 1. Yeah, know 6
- 2. Not knowing 94



- 4. Implementation of the Practice of Circumcision in Girls in the Family
- No. Percentage Frequency Performance (%)
- 1. Yes, Implement 69
- 2. Not Implementing 31
- 5. Reasons to Practice Circumcision in Girls
- No. Reasons for Frequency Percentage (%)
- 1. Tradition 34
- 2. Ordered by Parents 18
- 3. It has been circumcised Directly by Medical Personnel / Dukun 17
- 6. Victims of Circumcision Practice in Girls in the Family
- No. The circumcision victim and that girls did not perform circumsion
- 1. Girls 3 and 97
- 2. Brother 28 and 72
- 3. Nephew Female 17 and 83
- 7. Actors Who Order the Practice of Circumcision on Girls in the Family
- No. Actors Yes, Ordered Not Ordered
- 1. Parents 18 and 82
- 2. Grandfather / Grandmother 38 and 62
- 3. Uncle / Aunt 25 and 75
- 4. Self Desire 5 and 95
- 5. Medical Personnel 14 and 86
- 8. Sanction Enforcement If Not Implementing the Practice of Circumcision in Girls
- No. Description Frequency Percentage (%)
- 1. There are sanctions 0
- 2. There are no sanctions 100
- 9. Knowledge of the Law of the Practice of Circumcision in Children

No. Description Frequency Percentage (%)

- 1. Compulsory 23
- 2. Not Compulsory 77
- 10. Age of Children Usually Circumcised
- No. Age Frequency Percentage (%)
- 1. Directly After Born 100
- 2. Age 0-7 days 0
- 3.0-40 days 0



- 11. Actors Practicing Circumcision in Girls
- No. Correcting Actor Frequency Percentage (%)
- 1. Doctor 76
- 2. Midwife 24
- 12. Implementation of the Practice of Circumcision on Girls in Respondents
- No. Description Frequency Percentage (%)
- 1. Yes to do circumcision 65
- 2. Not performing circumcision 35
- 13. Circumcision Age
- No. Age Frequency Percentage (%)
- 1. Directly After Born 65
- 2. Age 0-7 days 0
- 14. The Most Active Family Members in Governing the Practice of Circumcision in Girls
- No. Actor Frequency Percentage (%)
- 1. Natural Mother 14
- 2. Mother-in-Law 18
- 3. Grandmother 27
- 4. Aunt 6
- 15. Implementation of Circumcision Practice on Respondent's Children
- No. Description Frequency Percentage (%)
- 1. Yes doing circumcision 39
- 2. Not doing circumcision 61
- 16. Age of Respondent's Children When Circumcised
- No. Age Frequency Percentage (%)
- 1. Directly After Born 39
- 2. Age 0-7 days 0
- 17. Reasons Children Respoden Circumcised
- No. Reasons for Frequency Percentage (%)
- 1. Not to Be Reproved by the Family 7
- 2. Directly Conducted by Medical Personnel 18
- 3. Self Desire 3
- 4. Following Tradition 11
- 18. Reinforcement Information Introduced by Actors
- No. Percentage Frequency Information (%)
- 1. Theorem 47
- 2. Religion 36
- 3. Health Information 17



19. Knowledge of the Health Impact of the Practice of Circumcision on Girls

No. Impact Frequency Percentage (%)

- 1. Being Clean and Healthy 50
- 2. No Excessive Lust 50
- 20. Knowledge of the Act of Practice of Circumcision on Girls

No. Description Frequency Percentage (%)

- 1. Yes, know 12
- 2. Not knowing 88

#### VI. Analyza

Factually, despite efforts to improve public access to public information, there has been a significant gap between expectations and reality. In addition to institutional issues, human resources, geographically many limitations of public access to information such as between border areas and cities and various other. This condition leads to the uneven situation of public access to public information that hampers the development of potential and public participation in government programs.

Moreover, today's information movement is not only fast and actual, but has also been globalized, simultaneously, and interactively. All that thanks to the presence of multimedia, print media, and electronic media, such as radio, television, internet, and news phones are no longer constrained by periodicity. While in the institutional context, the policy of regional autonomy brings the impacts of various nomenclatures, duties, and functions of information and communication institutions in the regions. The next consequence is the feedback mechanism of policy implementation as a material of policy formulation and improvement of government performance, not yet managed well. Not to mention, there is still a variety of interpretations on the limits and mechanisms of public information acquisition and not public information, because the laws and regulations that are mutually exclusive have not yet been completed.

Initially the circumcision of girls who developed and maintained in the community legalized by Permenkes Number 1636 Year 2010. Habits of female circumcision given the legal umbrella so that its implementation in accordance with the rules in force, so as not wild in the implementation. In the regulation of the minister of health it is stipulated that circumcision must be upon request and not in the form of cutting (genital mutilation) but a scratch. It's just that the stroke is still potential to cause injury, bleeding and infection. These risks should be shared with the parents of the circumcised girl.

Female circumcision remains in the community. It's just that they do it from time to time without any definite knowledge of female circumcision. The parents do not know what the benefits are and do not see directly the implementation. Parents never ask the midwife about this circumcision. The practitioner of circumcision is a midwife.

When pregnant women enter two months of pregnancy, the midwife comes to the residence of the expectant mother to raise the content ("junjung"). Massage to arrange for the baby in the womb either located in the womb is done again at seven months pregnant. A proactive birth attendant approaches pregnant mothers in order to perform a baby bath as well as circumcise. This is done as if it were a package.

What is the purpose of circumcised girls, you do not know. The phenomenon that exists in society so that the girl is not passionate about high sex. Not binal

At the time of delivery, a midwife who can help deliver, may be a midwife. After two weeks of birth, the baby dukun comes to bathe the baby, take care of the umbilical cord and perform the circumcision. Baby mother can not bear to see the procession of circumcision. According to respondents, dukun baby smearing with turmeric just like that.

In the past, circumcision was done by scratch that can cause injury, blood and infection. At this time, most young women, young mothers do not circumcise their children. The mother is educated in high school, choosing to give birth in a midwife and has no relationship with a TBA. When asked why not circumcised is answered that for what circumcision? There is no necessity for circumcision. Never discussed in religious studies by religious leaders, at any meeting by community leaders.

Along with the development of the era then published Permenkes No. 6 of 2014 on the revocation of Permenkes No. 1636 Year 2010 about Circumcision. The reason for the publication of Permenkes Number 6 Year 2014 is as follows:

- 1. that any action taken in the medical field must be based on medical indication and proven to be scientifically useful;
- 2. that female circumcision is not currently a medical act because its implementation is not based on medical indication and has not been proven beneficial to health;
- 3. that based on the aspect of Indonesian culture and beliefs, there is still a demand for female circumcision whose implementation should still pay attention to the safety and health of circumcised women, and not to do female genital mutilation;

#### VII.Conclusion

Feminist thinking is a thought that has realized and protested against the existence of subordination and other injustice behavior toward women everywhere (Ritzer, 2012: 10). Feminist theories have sprung up to counter the inequality that women gain in all aspects of their lives. Feminist theory eliminates the existence of a long-held system and shows a bias of masculinity that has filled human lives. Many feminist theories seek to regain justice for women in their lives shared with men. One of the feminist ideas that seeks to eliminate the injustice experienced by women is the liberal feminist.

The liberal feminist was first formulated by Mary Wollstonecraft in her book A Vindication of the Right of Woman. Wollstonecraft encourages women to contribute to autonomous decision-making and policy-making, and the way to go to it must be pursued through education. He thinks highly educated women do not need to be economically independent or



politically active to be autonomous. The general goal of liberal feminists is to create a just and caring society of women's freedom.

The root of liberal feminism is that liberal political thought has the basic character of placing humans in their own uniqueness compared to other beings, ie the ability to reason by emphasizing the moral or prudential aspects. (Tong, 2004: 15) In other words the principle of liberal feminism is that women and men have the ability to reason, so they have equal rights and opportunities to advance themselves liberal feminists see the persecution of women, the unfailing of women's rights, opportunities, and freedom because they are women, that means women still suffer oppression, even if women have gained the top position but can not be fully appreciated by the environment or the people around it.

In the mainstream thinking of liberal feminists has been divided into two groups, namely the classical liberals that describe the ideal state, is a state that protects civil liberties (ownership, right to vote, freedom of speech, freedom of association, freedom of association), for liberal-oriented on the welfare of the (elagatarian), the ideal state is a country that is more focused on economic justice, civil liberty. These two ideas then became the mainstream of thought around the 18th -19th century. The main purpose of liberal feminism is to create a just and caring society freedom is evolving, because only in such circumstances women and men can develop themselves.

Implementation of Women's Constitutional Rights in Practice of Female Circumcision in East Java Province are based on the right of every person that including access to adequate health is closely linked to human rights. The notion of "three generations of human rights" was proposed by Karel Vasak, a French lawyer. Inspired by the three normative themes of the French Revolution, those rights are:

- 1. The first generation of civil and political rights (liberte);
- 2. Second generation of social and cultural rights (egalite);
- 3. The third generation of rights of solidarity (fraternite).

The third generation of human rights interconnect and conceptualize the value demands relating to the previous two generations of human rights. There are 6 (six) human rights demanded. The rights are:

- 1. The right to self-determination in the political, economic, social and cultural fields;
- 2. The right to economic and social development;
- 3. The right to participate and utilize the "common heritage of mankind" (shared space-space resources, scientific and technical information and progress, and cultural traditions, locations and monuments):
- 4. The right to peace;
- 5. The right to a healthy and balanced environment;
- 6. The right to natural disaster relief.

These rights are set forth in the World Declaration on the Rights of Human Rights or the so-called World Declaration on the Rights of Human Rights.

Article 1 Everyone is born independent and has the same dignity and rights ....



Article 2 Everyone has the right to all rights and freedoms set forth in this statement with no exceptions whatsoever, such as nationality, color, sex, language, religion, politics or other opinion, national or community origin, property, birth or any other position .....

Article 3 Everyone is entitled to the livelihood, liberty and salvation of a person

Article 5 No one shall be abused or cruelly treated, regardless of humanity or humiliating treatment or law.

Article 6 Everyone has the right to recognition as a personal person against the law wherever he is

Article 7 Everyone is equal to the law and is entitled to the same legal constraint as there is no difference. All persons shall be entitled to equal protection against any distinction that violates this claim and against any instigation directed against such a distinction.

Women as citizens as men have equal rights to access to health, but there are some things that make women difficult to access health:

- 1. The attitude of male arrogance so as to look down on women, women are considered stupid, so there is no need to be given an explanation about health and even if women ask, will be answered casually.
- 2. The habit of placing a portion or position of women as the second citizen, konco wingking, swarga katut, neraka nunut, so women have no existence of self, afraid to ask all things related to health concerning him and his children especially his daughter.
- 3. The view on women which is the inheritance of our ancestors namely women as wingking conco, swarga katut neraka nunut so women are not need education, women are not educated enough, so dare not ask all things related to health.
- 4. Kindship system that embraces patriarchy principle, so women must obey to man
- 5. Assumption that women do not need high school so that women have a habit and behavior to accept what is happening and apply in the community.

With regard to female circumcision, the relevant constitutional rights are:

- 1. Right to live and sustain life and life
- 2. Right to survive, grow and develop
- 3. Right to develop themselves through the fulfillment of basic needs, get education and benefit from science and technology, art and culture
- 4. Right to communicate and obtain information to develop personal and social environment
- 5. Right to get education
- 6. Right to freely choose education and teaching, work, shelter
- 7. Right to express thoughts and attitudes according to the conscience
- 8.Right to search, obtain, own, store, process and convey information by using any available channel types.
- 9. Not to be enslaved
- 10.Right to live a well-born and inner prosperity
- 11. Right to get a good and healthy living environment
- 12.Right to obtain health services



- 13. The right to security and protection from the threat of fear to do or not to do something that is a human right
- 14 Right for torture free or degrading treatment of human dignity
- 15.Right to be free from discriminatory treatment on any basis
- 16.Right for ease and special treatment to obtain equal opportunities and benefits to achieve equality and fairness
- 17.Right over personal protection, family, honor, dignity and property under his control
- 18.Right to be protected against discriminatory treatment
- 19. Right to protection from violence and discrimination

#### VIII. Recommendation

It is necessary to observe the provisions on female circumcision because it essentially contained a wrong perspective about sex for women. Also the risk of circumcision is not taken into account. Actually in the conduct of female circumcision while not cutting the genitals of women, but the treatment of circumcision needs informed consent to provide protection for those who perform circumcision as well as for circumcised parties and their families.

The child's rights have been recognized since the womb. This is reinforced in family law in Burgerlijk Wetboek which is still used in Indonesia. This is what needs to be understood so that the newborn daughter is respected and recognized as a human being, recognized as a legal subject.

#### IX. Bibliography and literature

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