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The Social Context of Breast Ironing in Cameroon

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Abstract

The aim of this ethnographic study is to explore the confluence of social factors and the social context underpinning the pervasive practice of breast ironing in Cameroon. An analysis of qualitative data revealed that the social phenomenon of breast ironing is a disciplinary technique meant to conserve the social body politic and to ensure the wellbeing of the girl child. In the wake of the moral paranoia caused by the exponential increase in the infection rate of the HIV/AIDS pandemic, high rates of under-aged pregnancy and school drop-outs, the traditional mechanism of breast massage has been reinterpreted as a governmental rationale. The study recommends women's empowerment through the provision of health enhancement interventions, holistic needs-based approach to women's human rights including unfettered right to education, the provision of a youth friendly contraceptive service, as well as the integration of comprehensive sex education at various levels of the secondary school curriculum.

Keywords: Breast ironing, HIV/AIDS, Reproductive health, Under-aged pregnancy, Women's health.

Introduction

A wide range of social and cultural practices are oppressive to women and girls and often result in harmful physical and psychological consequences - genital mutilation, ritual haircuts and breast flattening among others. Breast ironing has been identified by the United Nations (UN) as one of five - and as being among multiple, intersecting and vicious forms of discrimination/ forgotten crimes against women. Other acts of violence against women include but are not limited to: honor killing, dowry violence, female circumcision and forced marriage. It has also been estimated that some 3.8 million African teenagers have been affected by breast flattening. An estimated 1.3 million Cameroonian girls are victims of breast ironing (Hussain and Nzouankeu 2013, Pitts-Taylor 2008). Apart from being painful, it exposes pubescent girls to health problems including abscesses, cysts, infection, tissue damage and even the disappearance of one or both breasts¹. In 2000, the UN described breast ironing which is prevalent in Southern Cameroon as a form of gender-based violence (Pitts-Taylor 2008). Breast ironing is a social and cultural practice involving the use of heated and flat objects to press the growing breasts of a girl usually by close relatives (mothers, grandmothers, aunts) so as to reverse and thwart the development of the breasts (Ndonko and Ngo'o 2006). Another form of breast flattening consists of the use of an elastic bandage to curb breast growth. The breasts are perceived as a certification of the readiness to indulge in sexual intercourse (Tchoukou 2014). Practitioners see breast flattening as a protective measure aimed at shielding a female child from the male gaze and ultimately from sexual harassment, rape and unwanted pregnancies (Pitts-Taylor 2008, Ndonko and Ngo'o 2006, Tchoukou 2014).

This article draws from ethnographic interviews and relates Michel Foucault's philosophy - basically his way of thinking and knowledge in understanding breast ironing as a bodily practice meant to govern the female body by making it unattractive to the sexualized male gaze (Rysst 2010, Bordo 1990). As a mechanism and constitutive element of the complex political economy of marriage and sexuality, breast ironing is conceptualized as an assertion of control over the body of young adolescent girls so as to channel their sexuality towards serving the interests of patriarchy. As a form of "appearance management" and governmentality regime, it is meant to conceal/mask the female body from the eroticized male gaze. It has resonances with other bodily practices meant to conform with normative expectations including dieting, exercising so as to achieve the perfect Western beauty ideal of thinness, attractiveness, and fitness, the use of make-up and cosmetic surgery (Rudd and Lennon 2000: 152, Rysst 2010, Rysst and Klepp 2012: 260, Rysst et al. 2010: 71). According to Michel Foucault (1979: 138), the body as a form of social canvass as well as an object that mediates our interaction with others and with the outside world is subjected to subtle disciplinary practices (appearance-management behaviors and regimes of self-surveillance and

¹<http://goo.gl/KgH3e2>.

discipline) that seek to regulate its existence and to shape our interaction with the opposite sex (Foucault 1979, Dworkin and Wachs 2009, Rysst and Klepp 2012). Power is not monopolized and used by one group to oppress and dominate another. Rather, power has multiple capillaries and is therefore more dispersed and involves a willingness to internalize the gaze of a generalized other who may be watching (Foucault 1977, Bordo 1990). Subjectively experienced judging gazes such as those targeting the female body in general and the breast in particular (or attempts to thwart eroticized judgmental looks which is what breast flattening is meant to achieve) call for attempts to discipline bodies according to expectations implied in the gazes which have implications for body practices and public health (Rysst et al. 2010, Dworkin and Wachs 2009). Similarly, judging gazes have affective intensities and often leads to both objectification and subjectification between males and females (Rysst and Klepp 2012). "... public health and fitness discourse often conflate meeting gendered bodily ideals with a state of health (Dworkin and Wachs 2009: 22). Physical bodies are subjugated and their behaviour shaped and orientated in certain ways, (for example through dieting) as a microcosm of social control of the wider population, through what Foucault called "bio-power". Disciplinary and bio-power create a "discursive practice" or a body of knowledge and behaviour that defines what is normal, acceptable, deviant, etc. - but it is a discursive practice that is nonetheless in constant flux (Foucault 1977). Though an instrument of coercion, power operates within discreet structures where actors operate, "power is everywhere": It is diffused and embodied in discourse, knowledge and "regimes of truth". We humans are constituted by power. Following Gaventa, "power is diffuse rather than concentrated, embodied and enacted rather than possessed, discursive rather than purely coercive, and constitutes agents rather than being deployed by them" (Gaventa 2003: 1). Parents perceive breast ironing as being in the best interest of the girl child. It is therefore perceived as a "mechanism of governmentality" and as a way of "governing the soul" (Rose 1999a), with the aim of guaranteeing the health and well-being of daughters. "Healthism", Nikolas Rose maintains is a shorthand for "a doctrine that links the public objectives for good health and good order of the social body with the desire of individuals for health and well-being" (Rose 1999a: 74).

Purpose

This paper draws on ethnographic data elicited as part of a larger study on harmful traditional practices and women's well-being between October 2006-September 2007 in the Southwest region of Cameroon. The main study explored transformations in the institution of female circumcision within the institutional context of the HIV/AIDS pandemic and its accompanying moral panic. Some respondents mentioned breast ironing as one mechanism for policing female sexuality and as a native antidote to the scourge of the pandemic. This led to an exploration of the reasons for, and the various

stakeholders involved in the social practice of breast ironing so as to provide knowledge of the practice and to formulate recommendations for the wellbeing of girl children and women.

Methodology

The main research exploring various culturally protective mechanisms and responses to the scourge of the HIV/AIDS pandemic adopted a multi-locale ethnographic approach comprised of in-depth interviews, focus group discussion sessions, informal discussion sessions and participant observation. The study population with which ethnographic interviews were conducted comprised of 16 girls who had been submitted to breast ironing, 5 activists fighting against harmful traditional practices targeting women, 6 practitioners - mostly mothers who had administered breast ironing on their daughters. Apart from establishing rapport with respondents, more people were met through typical snow-ball sampling. Through informal discussion of the topic of investigation, many people also got interested. Although there was a certain amount of "convenience" sampling here, purposive sampling (Bernard 2006) was also employed. Bernard notes that in purposive sampling, the investigator consciously decides which respondents are likely to serve in his study. Polit and Beck (2014) state that purposive sampling is based on the belief that researchers' knowledge about a population can be used to hand-pick sample members who are judged to be knowledgeable about the issues or phenomenon under study. Similarly Robert B. Burns notes that purposive sampling is useful if it "serves the real purpose and objectives of the researcher by enabling him to discover, gain insight and understanding into a particular phenomenon" (Burns 2000: 465). However, to a limited extent the selection of the respondents was based on a "sampling logic" focussed on "those that are representative of the total population of similar cases" (Yin 1994: 47).

Although this latter sampling method has been criticised on grounds that case study research should not be concerned with generalization via representative sampling but rather with the generation of theoretical insights (Yin 1994: 31, Gomme et al. 2000: 115), I contend that an attempt can be made in qualitative studies to consider the extent and conditions under which findings from a given number of cases studied can be extended to the wider population from which samples were drawn. On this basis, the research was primarily conducted with a few victims of breast ironing in Southwest Cameroon considered to be representative of wider population of women and young girls submitted to the procedure in the country. In addition to getting the views of respondents from across a range of different age categories, the opinions of men and women were solicited. Some of the male activists were purposely targeted for their knowledge of breast ironing and reproductive health issues. The results of the study can with some caution be transferred to the experiences of other females who have been subjected to breast ironing. This view allies with the advocacy of Polit and Beck (2014), who describe

transferability as the extent to which qualitative findings can be transferred to other settings or groups.

All through the study period, pieces of relevant information collected informally were jotted down in a daily journal and a field notebook. The use of a combination of data gathering methods ensured and enhanced the reliability of the findings of this study. Robert K. Yin recognizes the importance of incorporating "correct operational measures for the concepts being studied" (Yin 2003: 34, Shenton 2004). The combination of "convenience" and "purposive" sampling for example led to the random sampling of knowledgeable respondents. This random sampling eventually negated charges of researcher bias in the selection of participants. Random sampling, as Preece (1994) notes also helps to ensure that any "unknown influences" are evenly distributed within the sample. A multiplicity of data generation methods is advantageous in different ways: It helps in generating multiple, but complementary accounts of breast ironing from the perspectives of men and women, as well as activists against the social and cultural practice for the purpose of triangulation. Additionally, triangulation involving different qualitative methods made up for some of the common methodological shortcomings. For instance, focus group discussion and informal discussion sessions complemented individual, in-depth interviews and provided perceptive insights. The use of different methods in synergy compensates for their individual limitations and exploits their respective benefits (Guba 1981, Shenton 2004). Both direct observation and multi-perspective interview data helps to make it possible to map out similarities and differences of opinion and to clarify the ways in which the practice has come to be a source of social tension and debate. Moreover, polyphonic/multiple voices, exhibiting various characteristics - similarity, dissimilarity, redundancy and variety, were sought in order to gain greater knowledge of different females submitted to breast ironing, rather than just of individual informants contributing data (Shenton 2004). Multiple methods also help to address the problem of reliability and validity (Yin 1989: 94, Miles and Huberman 1994: 41, Burns 2000: 418-419).

Once rapport had been developed with participants, a relationship of trust ensured and they were willing to open up and to express their opinions. The different perspectives and experiences of participants provided myriad insights and multiple voices about the reasons for the practice of breast ironing. The individual in-depth interviews followed a semi-structured open ended format with questions revolving around the main areas of interest to the study. The interviews were tape recorded, while detailed notes were kept as the interviews progressed (Stake 1995). Furthermore, the pre-testing of the research instrument used in the main study enhanced the validity of the findings (Polit and Beck 2014).

Research ethics is a system of moral values concerned with the degree to which research procedures adhere to professional, legal and social obligations to the study participants (Polit and Beck 2014). Ethical considerations are intertwined with the principle of informed consent, participant-researcher relationships, gaining access, confidentiality, anonymity, sample size, and data

analysis (Streubert and Carpenter 2011). To ensure the privacy and confidentiality of participants, their identities have been kept secret through the attribution of fictitious names, their statements and the venues of the interviews are anonymized. Furthermore, in keeping with the recommendations of Cameroon's Social Science Ethics Committee all participants either provided oral, informed consent and/or signed informed consent forms. They were however also free to withdraw from the conversations at any time that they felt uncomfortable.

Data Analysis

In line with the hermeneutic approach, data analysis consisted of the pooling together of emerging categories and concepts after thorough perusal of interview data. The themes identified were then linked into substantive and formal theories (Bernard 2006: 492). The philosophical underpinning of the hermeneutic approach relies on the philosophical assumption that the dependent and independent variables are not predefined. Rather, the focus is on the full complexity of human sense making as situations emerge. It suggests a way of understanding textual data. Hermeneutics "emphasizes the need to understand from the perspective of the social actor" (Bryman 2004: 540).

Content analysis was used to identify significant themes. The data analysis process involved both: "individual-case" analysis and "cross case analysis" (Stake 1995). Analysis entailed the identification of patterns, consistencies and differences in what was observed and obtained from informants' interviews, informal and focus group discussion sessions. Such an analysis, Edwards and Talbot (1994: 45) observe "takes us beyond the notion of the case as illustrative' and allows us to look for 'common themes and patterns to be elicited, hypotheses generated and theory generated'". This formed the general framework for analysis.

Background and Context of Study

Although practiced in many African countries, breast ironing is widespread in Cameroon. It is also allegedly being practiced among the Cameroonian and African diaspora in countries such as Britain. A charity, CAME Women's and Girl's Development Organisation, is working in synergy with London's Metropolitan Police and social service departments to raise awareness regarding the problem¹. A 2006 survey conducted by the Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ) (German development agency (GTZ) on more than 5,000 Cameroonian girls and women between the ages of 10 and 82 explored the regional prevalence, female perceptions of puberty, breast development, who conducts as well as the instruments used in

¹<http://goo.gl/TRhJe4>.

conducting breast ironing. The study revealed that nearly one in four respondents had been subjected to the painful and traumatic practice of breast ironing. This finding suggests that at least four million girls have had their breasts ironed. Furthermore, the likelihood and frequency of breast ironing is higher in urban than in rural areas. Urban-based mothers and other female relatives are apprehensive that their daughters could be more exposed to sexual abuse and rape by unscrupulous individuals in the rough and tumble of the urban milieu. Urbanization and technology mediated social changes are leading to the waning of parental authority. Mobile phones for instance permit youths to challenge parental authority and to assert their sexual freedom and autonomy (Brinkman et al. 2009, Fogue 2008, Mackenzie and Wajcman 1999, Mackenzie 1999).

Breast ironing has been traced to the 1930s, associated with rural to urban migration (urbanization), the interrelated search for jobs and other economic opportunities, social transformations and the undermining of traditional mechanisms of social control. Cameroonian anthropologist and change agent, Flavien Ndonko concedes that the movement from the rural to the urban milieu led among other effects to less social control by parents and other relatives over youths, the intermingling of people from different cultures and societies. "As girls started going to school, and finding opportunities outside the household, there was more chance for premarital sex" (Hussain and Nzouankeu 2013). Stated otherwise, local mechanisms of social control have been undermined by the anonymity of urban life and social interaction between the sexes can no longer be policed, leading to a marked fall in moral values. In recent times, a spike in the incidence of breast ironing has been attributed to the earlier onset of puberty, caused by dietary improvements in Cameroon over *time* (Hussain and Nzouankeu 2013).

A further reason for the spike in the incidence of breast ironing is the moral panic that accompanied the advent of the incurable HIV/AIDS pandemic. Half of Cameroonian pubescent girls who develop under the age of nine have already had their breasts ironed, as well as 38% of those who develop under the age of eleven¹. The practice is however unevenly distributed in Cameroon's ten regions. The majority of victims (53%) are from the Littoral region, followed by West and Centre (31%), Adamawa (30%), Northwest (18%), East (17%), South (14%), Southwest (11%). There were fewer (7%) girls and women from the North and Extreme North regions whose breasts had been ironed. These two regions therefore had the lowest number of cases (Ndonko and Ngo'o 2006). Comprised of Adamawa, North and the enclaved Far North, Cameroon's Northern region is reputed for under-aged marriages and teenage pregnancies. Although the widespread and pervasive practice of early marriages (Pemunta and Fubah 2015, Tchoukou 2014) cancels out the necessity for breast ironing, the practice is also used as a mechanism of resistance by parents who have betrothed their under-aged daughters.

¹<http://goo.gl/TRhJe4>.

My mother performed breast ironing to protect me from sexual harassment and rape and to allow me to continue with my education instead of being forced into an early marriage by my father and his people. My mum decided to iron my fast developing breasts. (Josaine, 28 years old)

As one activist against harmful traditional practices stated:

They (parents resisting under-aged marriages) usually point to the fact that the girl's breasts have not grown meaning that she is not yet ready for sexual intercourse. For parents who practice child marriage, by ironing the breasts of the prospective bride, they can continue receiving goods and services from their in-laws. (Mbang, Interview 28 May, 2008)

In both Akwaya, Southwest and in the Northern regions of Cameroon where child marriages are pervasive, the prospective husband regularly provides meat and foodstuff to the bride's family as part of the bridal wealth. The bride's parents often inhibit their daughter's breasts from growing so that they can keep the constant flow of meat, foodstuff and other services from their in-law and members of his kin group¹. Research further suggests that around 16% of girls - especially in the Far North region where there is a deeply entrenched custom of child marriage - try to flatten their own breasts with hot stones or pestles so they can delay their sexual maturity and continue going to school². While the aim of breast ironing is to produce "docile bodies", drawing inspiration from Foucault's concept of "governmentality", Rose (1999b) makes the point that different institutionalized disciplinary practices - be they in schools, the army, hospitals, prisons and manufacturing industries - produce "docile bodies", "minds", "souls" that are conditioned to obey the regimes of power in society. However, these "docile bodies" are not void of agency. The use of breast ironing by both parents and young girls as an act of resistance against illiteracy, patriarchal norms and dire material poverty that forces the former into marrying off their under-aged daughters resonates with Foucault's view of power as being dispersed and pervasive, as wielded by people or groups by way of "episodic" or "sovereign" acts of domination or coercion. As Foucault maintains, "power is everywhere" and "comes from everywhere": It is neither an agency nor a structure (Foucault 1998: 63). Instead it is a kind of "metapower" or "regime of truth" that pervades society, and which is in constant flux and negotiation. The "power/knowledge" nexus used by Foucault signifies that power is constituted through accepted forms of knowledge,

¹Theresa, a teenage girl from the Akwaya region explained that she allegedly escaped from home and now lives at the Catholic mission in the Mamfe because a man old enough to be her grandfather was selected for her.

²<http://goo.gl/50V1cQ>.

scientific understanding and "truth". According to Foucault power is not just a negative, coercive or repressive thing that obligates us to act against our wishes, but can also be a necessary, productive and positive force in society (Gaventa 2003: 2). The North-South differences in prevalence can be explained by the fact that unlike the North, marriage takes place in the South only later on when the woman is mature calling for the need to discipline the bodies of the girls through the social practice of breast ironing. According to Ngushi, the lower prevalence of breast ironing in the North is attributed to the Islamic dress code which conceals the whole body, except the face of the woman thereby making women less attractive (Tchoukou 2014). According to RENATA, there is a higher prevalence of breast ironing among Christians and animists (30-50%) than in the predominantly Muslim, Northern Cameroon region¹.

While most widespread in Cameroon, similar customs have been documented in Nigeria, Togo, Republic of Guinea, Côte d'Ivoire, Kenya, Togo, Zimbabwe and South Africa ("breast sweeping")². Although the existence of breast ironing has been identified in Cameroon thanks to the media and local activism targeting the social practice, human rights groups contend the practice is widespread across the African region and among the West African diaspora, including in Western countries with stringent child-protection laws. Other African countries where the practice is reportedly taking place includes - Burkina Faso, CAR (Central African Republic), Benin and Guinea-Conakry (Hussain and Nzouankeu 2013). Another practice, analogous to breast ironing is the tight wrapping of the chest with a piece of cloth, belt or other material. It may also be used alongside breast ironing or flattening. The aim of breast binding is to maintain the shape and lift of a girl's breast in preparation for marriage (Tapscott 2012: 2). The next section will examine the various reasons forwarded for the practice of breast ironing.

Rationalization for Breast Ironing

Bio-Power, the Individual and the Collective Self

Bio-power coalesces around two distinct poles: the human species (as defined by scientific categories such as population and the need to regulate it through governmentality regimes) and the human body (the breast as an object that is not only malleable but also controllable) (Rabinow 1984: 17). Thus, in line with the demographic paradigm, breast ironing functions as the ultimate "technologies of sex" (Foucault 1980) linking the individual body with the body politic. The disciplined feminine body is necessary to create the modern body politic/economic. Humans are simultaneously physical, social, economic and symbolic beings. The body politic, Lock and Scheper-Hughes (1996: 45 as cited in Kelly-Blake 2008) maintain is "the regulation, surveillance, and control of bodies (individual and collective) in reproduction and sexuality,

¹ <http://goo.gl/DARbDV>.

² <http://goo.gl/KgH3e2>.

work, leisure and sickness" (Kelly-Blake 2008: 36). The stability of the body politic is due to "its ability to regulate populations (the social body) and to discipline individual bodies" (Kelly-Blake 2008: 36). The state's task of ensuring good health by facilitating a healthy lifestyle as a mechanism of ensuring production is facilitated through media advertisements which inculcate in people the need to internalize the message of healthism even in the absence of state intervention (Rysst et al. 2010: 16). The body economic is linked to the physical body through the development of bio-power through which "bodies (are inserted) into the machinery of production and the adjustment of the phenomena of population to economic processes" (Foucault 1980: 140, 141).

As a stock of gendered knowledge, breast ironing is part of a complex set of "inherited ideas, beliefs, values and knowledge which constitutes the shared basis of social action" (Sewel 1999: 46) that has been transmitted from one generation of female relatives to the other. It is about governing populations using "specific ("traditional") knowledges" and techniques to discipline the population and maintain its health for the well-being of society (Roos 2009, Rose 1999a, Rose 1999b: 2). One grand mum stated that:

This is a tradition that my mother did on my breasts to prevent them from coming out so that men should not spoil me. Her own mother did it on her because she loved her. I will also do it on the breasts of all my granddaughters for their own good. Sex is as sweet as sugar and children of today are enjoying it at very early age. It has now become a poisoned thing with this disease they call AIDS. Breast ironing will make it possible for girl children not to become pregnant now that men are sleeping with their own daughters (children the age of their daughters) with no shame and children are also engaging in sex among themselves, even teachers are sleeping with their pupils. (Mami Ada, 67 years old)

In line with the notion of "embodied personhood" - which articulates the relationship of cultural beliefs and practices - breast ironing becomes a protective mechanism as well as an antidote against the sexualized male gaze and rape. As a protective mechanism - it is in relation with health and illness to the sentient human body (Rose 1999a: 44, Roos 2009). "The body in health offers a model of organic wholeness, the body in sickness offers a model of social disharmony, conflict, and disintegration" (Kelly-Blake 2008: 36, Erickson and Murphy 2013, Rose 1999a, Rose 1999b). The breasts are accordingly massaged with hot stones that have been heat over the fire to flatten them and to ultimately avoid boys/men from being interested in the girls. This resonates with the view that females and males as groups of individuals tend to experience their bodies as if they are being spied upon. This leads to the disciplining of bodily practices/or "the governing of the soul" (Rose 1999a). Meredith Cherland has in line with these arguments appropriated the metaphor of Foucault's panopticon to articulate young girl's internalization

of the judging male gaze (Rysst 2010, Cherland 2005). The panopticon is a miniature "prison whose circular design leaves all inmates in their individual cells permanently visible for the invisible supervisor in the centre tower. Each prisoner is disciplined through his or her awareness of the supervisor rather than the supervisor's actual presence" (Markula 1995). When the girls realize that they are observed through this eroticized gaze ("the prison guard"), they start to observe each other and themselves through the same gaze (Cherland 2005, Rysst et al. 2010: 16, Rysst 2010). They are like people in a microscope that are being constantly looked upon by others to ensure that they conform to certain norms. The body is understood as an object and women as sexual objects (Dworkin and Wachs 2009). The body also serves as an object used by others to portray their judging gazes, but it is also a subject that is experienced in relation to other people. This brings us face to face with subject-object dichotomy: Men are traditionally perceived as subjects while women are viewed as objects. "The lived body", Merleau-Ponty concedes "is neither exclusively a subject nor an object but both" (1962: 167). There is however a subtle nuance of the subject-object dichotomy. According to Frigga Haug, women are not only objects of male desire: they themselves play a part in their creation and as such in how they are perceived by the opposite sex. To see femininity in this way is to identify a subjective aspect within being-as-object, and thus effectively to recognize the inadequacy of the subject-object metaphor (Haug 1987: 131). Both men and women desire each other insofar as the human body is a desiring one.

Other objects used in the process of breast ironing include - a wooden pestle or a stone; coconut shells, grinding stones, ladles, spatulas and hammers¹ - which are carefully heated over burning coals. Once the breast tissue is destroyed, the breast becomes just a shapeless bag of fats without any muscle or shape. Breast ironing has detrimental effects on their physical and psychological wellbeing. Physically, there is the deformation of the child's body (breasts) through the stunting or attempts to reverse the growth of the breasts signifying child abuse. Breast ironing entails the constant inhibition of the breast-growth of teenage girls with the sole aim of preventing them from attracting men at a very tender age². Apart from the excruciating pains entailed by the process, abscesses, infections, itching, inability to breastfeed, deformity or disappearance of the breasts, cysts, tissue damage, breast cancer, atrophy of the breasts and psychological trauma are other side effects. If well done-that is stones are not too hot, the breasts are uniformly ironed, but very hot stones and quick ironing can instead lead to oversized breasts and burning. Oversized breasts will of course, be counterproductive- they will instead attract the prying eyes of men and produce a counter effect.

In the wake of the moral panic generated by cases of rape and sexual exploitation resulting in under-aged pregnancies, sexually transmissible

¹Women's Rights News. BREAST IRONING. Together We Can Say NO To This Act! - See more at: <http://goo.gl/j4nkG5>, <http://goo.gl/jtQL4L>.

²<http://goo.gl/6A43>.

diseases and the HIV/AIDS pandemic, the health enhancing practice of breast massage has been reinterpreted and used as a protective mechanism. In this regard, it is now being increasingly used to thwart girl's breast development so as to shield them from unwanted sexual attention and rape. The dual concept of culture as both a system and practice and as intertwined is important here. Breast ironing should be understood as the appropriation of existing norms to solve problems: the use of existing norms to attend to new exigencies and to accomplish an aim (Sewell 1999, Tchoukou 2014). The moral paranoia generated by the HIV/AIDS scourge once again brought women's bodies under rigid surveillance and regulation, necessitating the use or reinterpretation of traditional methods of therapeutic massage such as breast ironing within a geo-political context of inequality (Hunt 1999, Hunter 1988).

Social Context of Adolescent Sexuality in Cameroon

This section argues that the moral panic that has pushed parents (particularly female relatives) into flattening the breasts of girls should be understood as a mechanism for resisting the presumed technology mediated sexual revolution from the West, the early debut of sexual activities by adolescents, the feminization of HIV/AIDS and the dominance of heterosexual relationships.

Like other African countries, Cameroon is on the verge of the sexual revolution from the West. Diffused through radio, television and increasingly through technology mediated social media, Western influences have transformed youth sexuality and weakened parental and elder's oversight over youths.

Since the advent of mobile phones and facebook a simple vibration, missed call or online message can prompt your daughter/wife to jump out of the house without your knowledge and to have an affair behind your back. The rates of infidelity and prostitution have increased. Married couples are simultaneously married but available. (James Cho, Interview, December 20, 2008)

Parents and elders testified to us that they are increasingly unable to check the sexual activities of their daughters. In Francophone Africa, information and communication technology (ICT) has transformed the perception, as well as led to the emergence and adoption of a new political (civic and democratic processes) and strategic message based on human rights and citizenship (Mottin-Sylla and Palmieri 2011). Youths, for instance, were the first to adopt mobile phones because this demographic group is generally more flexible in acquiring new knowledge necessary for using this technology. As mobile phones are appropriated, they assume an integral role in the lives and culture of youths (Pfaff 2009). Thus ICT has become an increasingly dominant factor in explanations of contemporary social change and development (Sassen 2002). Many sociologists see ICT as the impetus for the most fundamental social trends and transformations in societal attitudes and behaviors (Mackenzie and

Wajcman 1999, Mackenzie 1999). Youths remain a marginalized group in decision-making processes in matters of sexual and reproductive health. Mobile phones are redefining relationships between youths and their parents, giving youths the opportunity to break free from the control of their parents and tradition. This is the case with Muslim girls in northern Cameroon, where parents who are mostly staunch traditionalists, are seeing their authority over daughters challenged. These parents are now unable, unlike in the past, to watch over the relationship of their progenies. Girls are increasingly taking advantage of their mobile phones to maintain secret romantic relationships, which is contrary to the prescriptions of Islam, thereby avoiding cultural constraints (Fogue 2008). Similarly, Brinkman et al. (2009) present mobile phones as changing, shaping and continuing older forms of gendered social relationships. They maintain that in Khartoum, Sudan - a Muslim society where there is segregation of the sexes - men and women are supposed to live in separate spheres - the mobile phone facilitates relationships between the sexes, creating a social space where they can meet. It also enables women to organize their lives more independently while still taking societal norms seriously. Women, for instance, can call from their houses and arrange to meet their (male) friends without others knowing about it. A study of the impact of mobile phones among girls in Molyko, Southwest Cameroon, shows that a cellular phone represents a technology of contradiction, connectivity, a symbol of identity, safety, status, and above all a gadget to idealize autonomy. It can be used to influence social interaction: With just a missed call; a girl is capable and has the power to set the agenda, influence the action and mode of socialization with a male later in the evening. Young girls use their mobile phones to escape parental control over their social life. Furthermore, it is a tool for gathering the latest gossips in town - especially the eminent arrival of a "mboma" (sugar daddy) (Mokake 2009).

With my mobile phone now, I can arrange an appointment using an sms or I simply drop my boyfriend a message or email him. Mama and Papa are continuing to think that I am a small girl. Things have changed for the better thanks to the new technology. (Jeannette, Interview, December 23, 2007)

At the same time, most parents have remained conservative and continue to treat sexuality as a taboo subject matter. Left with no other option, adolescents continue to learn about sexual activities from their peers or from social media particularly from television and from the internet. This is happening against the backdrop of a blanket ban on the teaching of sexual education in schools and colleges and in a context where abortion remains contrary to the law - except under the compelling medical circumstance of saving the mother's life.

The Pandemic of Under-Aged Pregnancy

A majority of the world's 580 million adolescent girls (4 out of 5 of them) live in developing countries (UNFPA 2013a). Every day, 20,000 under-18 become teenage mothers in developing countries, far higher than in developed countries. An estimated 19% of young women in developing countries become pregnant before 18 (UNFPA 2013b). Ninety five per cent (95%) of the globe's births to adolescents occur in developing countries (UNFPA 2013a: vii). An analysis of the 1991, 1998 and 2004 Cameroon Demographic and Health Survey (CDHS) show that most adolescents (more than 50%) give birth prior to marriage (Pemunta and Fubah 2015, Fouelifack et al. 2014). The United Nations Population Fund found in 2010 that 30% of girls in Cameroon aged 20 to 24 had given birth prior to their 18th birth day. Thereafter, only a meagre 39% enrolled in secondary education, meaning an end to their education (UNFPA 2013a). Pregnancy significantly alters the present and future of a girl: It might spell doom for her education, lead to the evaporation of her job prospects, increase her exposure and greatly exacerbate her vulnerability to poverty, exclusion and dependency (UNFPA 2013b). Contrary to urban and better-educated women, more rural and often less-educated women had a pregnancy or a child before their twentieth birth day. Nevertheless, an analysis of the trend of teenage childbearing shows that starting in the mid-1990s, there has been a substantial decline in adolescent childbearing in rural areas of the country. Teenage women are more liable to suffer from pregnancy-related complications and even fistula obstetrics when compared to older women. Furthermore, there is a higher incidence of neonatal mortality among children born to teenage mothers than among those born to older mothers (Fouelifack et al. 2014). Although abortion is highly restricted in Cameroon, it is not uncommon among urban adolescents.

The 2004 DHS data showed that 5.7% of women aged 15-19 were pregnant with their first child. Cameroon has one of the highest adolescent fertility rates in West and Central Africa. Preliminary data collected as a prelude to the 2004 DHS showed that 22.7% of adolescents (15-19-year-old) had given birth to at least one child (Fouelifack et al. 2014). On the other hand, 5.7% of these women had not yet terminated their pregnancy. Seven factors have been identified as predisposing adolescent girls to pregnancy (female controlled factors): having multiple (usually four or more) sexual partners; failure to use contraceptives at first intercourse; consistent use of less effective contraceptive methods; "use of illicit drugs during the last 30 days; living apart from one's parents; recently experiencing stress; and perceiving a lack of future prospects" (Santelli et al. 1997: 261, Narring et al. 1996: 232). The factors that might explain Cameroon adolescents' exceptionally high fertility include the lack of school-based sex education, "and a national [HIV]AIDS campaign promoting condom use in school"; the acute lack of access to contraceptives and lack of access to abortion services (Narring et al. 1996: 232, Leke 1989). The 2011 Cameroon Demographic and Health Survey (DHS) showed that 23.3% of adolescent women, 73.9% of who are single and sexually active but the least likely of all women of reproductive age to use

modern contraceptives methods (12.2%) (Fouelifack et al. 2014). Four-fifths (81%) of women had sexual intercourse before the age of 20 years with mean age of sexual debut at 17 years. As a result adolescents show higher fertility rates (127 per 1,000) (Fouelifack et al. 2014). If the present fertility rate is maintained (reported birth histories of women) a woman is likely to give birth to an average of 5.1 children by the end of her reproductive years (Fouelifack et al. 2014, Leke 1989). This is a reflection of the worldwide situation. Global estimates show that "almost one in five women aged 20 to 24 (19%) had a live birth by their 18th birthday". Despite regional variations, extreme under-18 pregnancies, are observable "in sub-Saharan Africa, at 28% in West and Central Africa, and 25% in Eastern and Southern Africa, compared to just 4% in Eastern Europe and Central Asia. By contrast, Latin America and the Caribbean show a value close to the global estimates at around 18%" (UNFPA 2013a: 14). A study carried out in the North of Cameroon in 2004 showed that 27% of deliveries from 1995 to 2004 were from teenage mothers (Tebeu et al. 2006, Fouelifack et al. 2014). The trend of teenage mothers (% of women ages 15-19) over time compared to the overall female population in Cameroon stood as follows: 1991 (35.0%), 1998 (31.20%), 2004 (28.40%) and 2011 (25.20%) (World Bank 2014, Fouelifack et al. 2014). These are mostly cases of unintended pregnancies.

Cameroon has a 4.3% HIV/AIDS prevalence rate, (adults aged 15 to 49 years). The male to female ratio of infection is 2.9% against 5.6%. In the 15-24 years sub population, the HIV prevalence rate is estimated at 1.7%, with more females infected by HIV (2.7%) than men (0.5%) (Pemunta 2011a, National Institute of Statistics 2011). These figures suggest the higher risk of infection among women and therefore the feminization of HIV/AIDS pandemic. Apart from biological vulnerability, socio-cultural as well as economic factors - particularly men's sexual power and privilege (Higgins et al. 2010) account for differences in the rate of infection between the sexes (Awuba and Macassa 2007: 118-119, Pemunta 2011b: 158, Higgins et al. 2010). Alongside the dominance of heterosexual sexual relations, most women use sex as a source of power. They are highly vulnerable to HIV infection because sexual intimacy with men is commodified, and for some women provides a necessary resource for their survival. Because of gender power differentials, women are unable to negotiate safe sex. This power inequality translates into lack of sexual and reproductive rights.

Intergenerational Conservatism over Sexuality

Cameroon is a deeply conservative nation where teenage pregnancy and out-of-wedlock childbearing is frowned upon and abortion is only permissible if the life of the mother is at risk, "mothers use breast ironing as an unorthodox form of contraception to ensure their daughters do not fall pregnant and drop out of school" (Hussain and Nzouankeu 2013). There is a deeply entrenched culture of silence surrounding sexuality. This makes sexual activity to look dangerous to children.

Parents shy away from discussing sex with their children. Fathers expect mothers to discuss sex with their daughters while they allow their male children to explore such topics with their peers. Discussions about sexuality remain a taboo particularly between generations. Sex therefore remain a subject of mystery to children. Some are still being told children come from hospitals. (Mandey, Interview 23 January 2008)

Socio-cultural norms and "the culture of silence surrounding sex dictates that "good" women are expected to be ignorant and passive in decision-making or suggestions relating to their role in sexual activity" (Gupta 2000: 2, Sweetman 2003: 45). Conservative parents are keen on bringing up daughters as "good women" and therefore exclude sexuality from conversations with daughters or men expect mothers to explore such topics with them. Withholding knowledge about sexuality is a governmentality strategy. Mothers, who muster the courage to do so, often tell their daughter to "avoid walking with boys", "avoid playing with men" because cultural and religious taboos that inhibit such discussions. Yet, women want to ensure a better future for their daughters by forestalling early pregnancy and child bearing. Breast ironing becomes a mechanism meant to promote the girl's future success, guarantee the future of her family by brightening the prospects for education, a better marriage and better life chances. Educated women, Pemunta and Fubah (2015) argue are more likely to get married to wealthy and educated individuals and to have a more fulfilling family life. Breast ironing is a mechanism for making the lives of these women meaningful, and with a sense of personal achievement in the future. Rose argues that the advent of consumerism gives meaning to the lives of individuals. As economic beings, they are capable of exercising their "freedom to choose in a market in which one ... assembles, manages, and markets oneself" (Rose 1999a: 56). In line with Rose, "the new image of the citizen as a choosing self entails a new image of the productive subject" through self-regulation (Rose 1999a: 103). This further resonates with Rose's (1999b) contention that the family plays the central role of transmitting the "values and standards of conduct" (Rose 1999a: 175). Family members ensure conformity with the norms and tenets of society and provide both positive and negative rewards. Stated otherwise, particular familial relations help individuals to conduct themselves appropriately (Rose 1999b, Reid 1993. Breast ironing, in Reid's (1993) eyes will be a significant mechanism for the re-inscription and protection of what can be said to be normative (Reid 1993: 185) through social management using discourses on the importance of family - on having children within the institution of marriage.

The institution of marriage has witnessed transformation over time-from early marriage to older partners, often selected by parents to match making by the prospective couples themselves. In the past, there was great age disparity between couples and marriage was based on instrumental criteria, not love per se. Even polygyny which was common is now on the decline because of

economic hard times. While polygyny remains fashionable to a few rich and powerful individuals as a mark of their status, Tapscott (2012) argues that women have no agency over the beginning, duration or end of their matrimonial regimes. Females remain subservient and dependent on males. Norms of chastity have become an exotic fancy as evidenced by the exponential increase in under-aged pregnancy. Traditionally, early marriage, usually after the debut of the menses at puberty was the undeclared standard and made pre-marital pregnancy a rare occurrence. Pre-marital pregnancy however remains a source of shame, an embarrassment, a stigma and ocular proof of poor parental upbringing. In the past, a man who impregnated a woman was forced by society to marry her as a way of making amends, and while this no longer obtains, legal enforcement mechanisms are lacking (Tchoukou 2014). Changing marital norms with their implications for gender inequality negatively affect women in Cameroon.

The culture of silence surrounding sexuality inhibits women from negotiating safer sex and they therefore remain victims to sexually transmissible infections, including HIV/AIDS. African women are expected to be submissive to men and it is unacceptable and even extremely offensive for a woman to say no to unwanted and unprotected sex. Opposition is tantamount to suspecting the man of infidelity whereas, social norms consider it "natural" for men to engage in sex with multiple partners (through polygyny and concubines), favour sex with younger partners, and dominate sexual decision making. Often young girls endure sexual coercion and abuse (Awuba and Macassa 2007, Sweetman 2003, Gupta 2000, Togni 1997). "In our society, women and not men's sexuality is controlled. A man has the right to take other women, but not the woman" (James Nchia, Interview 26 March 2008).

Relations between the sexes including sexual relationships are dominated by men. Breast ironing seems to be a useful antidote against premarital pregnancy and the scourge of HIV/AIDS pandemic since a girl who is more developed naturally attracts the sexual attention of men. Extrapolating from Foucault, Bartky (1998) establishes the relationship between the female body and space/time by pointing out the restrictions that women experience in society. Breast ironing as a way of disciplining the female body resonates with the panopticon phenomenon, developed by Jeremy Bentham. When translated into feminists' terms, the panopticon phenomenon holds that women are under constant surveillance by patriarchy/the opposite sex. Parents are concerned that by developing breasts, young girls will stick to patriarchal requests by internalizing particular practices about their bodies, including feelings of maturity and the natural urge to have sex. They might therefore be pushed into having sex early on in life because they want to feel like other women: to get transformed "to meet the other woman" (Wolf 1991: 287 as cited in Bartky 1998). In this sense, discipline entails controlling the size, shape, movement and style of presentation of one's body. She suggests that void of men, women's bodies are "deficient", and the discipline-inducing gaze therefore reinforces the idea of females as inferior (Bartky 1998: 33).

Breast ironing becomes a mechanism of preventing young girls from identifying with other men and from "hav(ing) a body feel feminine" as a way of embodying the values of chastity parents desire for them. From the accounts of mothers and female relatives (aunts in particular) it emerges that the decision to delay a girl's maturity through breast ironing is imbricated in a cost-benefit analytical framework. As a form of body alteration, breast ironing serves as a mechanism for avoiding sexual contact between girls and boys. As articulated by Foucault's idea of "governmentality", different disciplinary practices produce "docile bodies" or subjects with an inclination/ready to obey the regimes of power in society (Foucault 1977) and with the aim of producing particular selves. Breast ironing slows down the development, lowers the pace of development or completely thwarts the development of the breasts and leaves the chest flat and unattractive as well as void of any signs of womanhood (Tchoukou 2014). Therefore, breast ironing encompasses the disciplining of looks, or gazes, the content of which is constructed and defined by some dominant "symbols" (breasts) (Rysst et al. 2010: 16). Young women have been conditioned by significant social others to experience their bodies as if someone were looking at them, leading to disciplinary bodily practices, or what Rose argues is an aspect of "governing the soul" (Rysst et al. 2010: 16). It is meant to ensure virginity and purity and avoid young girls from becoming fertile women and potential mothers. It is a mechanism of preserving sexual morality and avoiding the risk of forgoing their education. Early sexual debut can lead to teenage pregnancies, unsafe abortions, possible rapes or the transmission of sexual diseases including HIV/AIDS. Cameroon's Penal Code actually offers a rapist a lee-way of escaping by allowing the rapist to marry his victim, if the victim is over puberty. The stigma and shame associated with rape implies that rape cases are hardly reported and investigated. In Cameroon, unsafe abortion is responsible for 30% of emergency admissions and about 32% of maternal deaths (Pemunta 2011a). One human rights activist stated that:

The Cameroon government's anti-abortion policy is unrealistic. Although banned except to save the life of the mother, illegal abortion is widely practiced. By remaining illegal, it has become a lucrative enterprise for both medical personnel and quacks who continue to cash in on those requesting their services. (Remy Teke, December 20, 2007)

According to Leke (1989), 41% of adolescents in school are sexually active. Among Cameroonian women aged 15-49 years, 25% had sexual intercourse before their 15th birthday (DHS 2004). The same DHS found that the age at which women get into unions (traditional and or legal marriages, co-habitation) is at least 1.3 years later than their first sexual intercourse. This therefore implies that any pregnancy occurring during this adventurous sexual intercourse may be the reason to seek an abortion. The most common end results of unwanted pregnancies include both individual and healthcare system

consequences. Unsafe abortions may result in short or long term complications such as infections, death or infertility. The already overburdened health services also will have to address these complications and the health needs of women who inadvertently become pregnant. Women with unwanted pregnancies include, those involved in adolescent sexuality, early marriages, poverty, school drop outs and consequently low levels of education, low socio-economic status, area of residence (poor neighborhoods, rural, urban, etc.) (Leke 1989). Flattening girl's breasts as a contraceptive measure seems a far better option in the eyes of practitioners. Breast ironing is actually part of a vicious cycle and of a complex web of gendered and oppressive social practices including female genital mutilation used as a social control mechanism against perceived early sexuality. It is intertwined with ideas about maturity, beauty and sexuality.

In the Bayang community where initiation into sexual practices often occur before 18 birth day (the legal maturity age in Cameroon), the debut of sexual activities is often shaped by sociocultural, political, economic and ideological systems. On either a casual or regular basis, adolescents often engage in sexual relations with multiple partners. Early sexuality, Egbe (2014) further argues is shaped by socialization of the male into the patriarchal social structure ("the early emancipation of the male child"), "the progressive and increased acceptance of 'Western dating cultures'", peer group pressure (32 cases), "imitation and experimentation of observed behaviours, changes in traditional value systems, and the waning of parental control and authority, economic hardship, and the presence of particular social amenities in the locality" (inns, hotels, motels, night clubs etc.) (Egbe 2014: 53). Thirty five percent (35%) of Manfred's 100 respondents reportedly "had their first sexual experience when they were between 10 and 13 years old; 50 when they were between 14 and 17", and 15 had their sexual debut at 18 years old or older (Egbe 2014: 60).

Faced with the human toll of the HIV/AIDS pandemic and the accompanying moral panic associated with the epidemic, conservative parents and elders are increasingly adopting less explicit mechanisms of policing female sexuality, including female circumcision and breast ironing. They rationalize their choice by pointing to the threat of the pandemic or to high rates of female school dropout due to premarital pregnancy, and abortion. HIV/AIDS exacerbates these existing problems, making recourse to traditional mechanisms of policing women's sexuality through ritual female circumcision one of several prevention strategies- an attractive and cost-effective option.

Look my son, women are responsible for this deadly disease (HIV/AIDS). They can sleep with anyone at any time and thereafter go back to their regular partners. They either need to be circumcised or their breasts flattened to prevent them from seducing men. (Jude, 23 December 2007)

In the case of HIV/AIDS, hard-liners usefully invoked female genital operations as a cure for the pandemic. They were indirectly suggesting that women are responsible for the epidemic even when these women are solicited by men before they can have consensual intercourse (Pemunta 2011b) or are out rightly raped by men.

Voices and Experiences of Victims

Breast ironing has physical, psychological and emotional effects that may negatively affect the social life, education and career of victims. Although no large scale medical studies have been conducted to gauge the medical effects in Cameroon, anecdotal evidence suggests that breast ironing exposes victims to a plethora of health problems: abscesses, cysts, failure of the breasts to grow bigger, or one breast growing disproportionately than the other, marks, wrinkles and black spots on the breasts, which alongside the trauma may lead to low self-esteem and emotional distress. Activists and the boyfriends of, as well as victims recounted traumatic psycho-sexual and psychological consequences of breast ironing. One woman stated that she cannot wear a swimsuit because her chest will go "flat". She can therefore not go swimming like her peers. Ndonko is quoted as stating that: "As the girls sexually mature, they feel they cannot show their breasts to their boyfriends or husbands Some girls felt so ashamed they were having sex without fully removing their clothes so they can hide their breasts"¹. Another activist corroborated the above statement thus: "It's hard for them to undress in front of their boyfriend - if they even have one, that is. The physical pain might fade [away] but the psychological trauma does not. Most do not want their chests to be touched ever again"². The pains victims are exposed to can cause possible personality disorder, anxiety problems, depression and other psychiatric disorders (Child Welfare Information Gateway (CWIG) 2013, Tapscott 2012). A male respondent pointed out how when he first started dating with his girlfriend Lucy, she could hardly ever take up her top except under the blanket and when the lights were out:

because the breast ironing and chest belt she was subjected to, had completely flattened her chest, and there was just nothing there to show. She told me that apart from breast ironing, her mother constantly wrapped an elastic bandage around her chest and she slept and went to school with it. It was really painful. I felt like I was making love to a boy and we could not stay together. (James, informal discussion)

James' experience with his girlfriend resonates with Agnes' agony:

¹ <http://goo.gl/50V1cQ>.

² <http://goo.gl/rXGgTH>.

"My breasts finally began to grow when I was 18 years old. Before that, boys weren't attracted to my body. I felt really bad about it. My grandmother began destroying my breast when I was 12 years old. I would try to run away from her every morning but she'd catch me. Other kids were going to school and I was being massaged with a hot rock. She did it twice a day for a year. Having breasts is natural, it's human. When I didn't have them, I felt like a boy." (Agnès, 32 years old¹)

Other physical effects include swollen breast, complete destruction of the breast glands which could eventually lead to breast cancer. Cases of breast cancer caused by breast ironing have also been reported by medical personnel in Cameroon (Tchoukou 2014, Ndonko and Ngo'o 2006).

My breasts developed when I was 11 and my mum decided to flatten them so they'd disappear and come out when I am fully mature. She used a particular leaf every morning to iron them before I went to school. The leaf was put in the fire and when it was very hot she used it on my breast. The pain was really excruciating and I cried a lot. My breasts continued to protrude and it had to be repeated again with a long stick which looks like a pestle that was heated in the fire. It was repeated every two days until my breasts disappeared. The pain was just unbearable and I couldn't sleep. But when I eventually turned 18 my breasts did develop with a lot of malformation, scars and black marks. (Josiane, 28 years old)

My elder sister got pregnant when she was 15 years old. She was a victim of rape ... it was during the long summer holidays when she began a little itinerant business - selling cooked groundnuts to help make ends meet by raising some supplementary funds for "school return". A male customer stopped her to buy some ground nuts. He was sitting alone on the veranda of an apartment and there was nobody in sight at the time. She reached out to give him the groundnuts; he instead got hold of her arm, touched her butt and breasts and insisted that they should have sex. When she tried to resist, he forced her into a nearby room and raped her. She got so scared that she told no one about her ordeal. She later told our aunt when it was too late. She took her for a clinical test and behold, she was pregnant, but thank God, had no sexually transmissible disease. (Melinda, 33 years old)

¹ <http://goo.gl/rXGgTH>.

Conclusion and Recommendations

This article has drawn on Michel Foucault's and Nikola Rose's arguments about judging gazes, the disciplining of bodies, governing of souls and dispersion of power into new forms (Rysst et al. 2010) to demonstrate that the social practice of breast ironing is a governmentality regime meant to govern the social body politic of the individual. It is "... undertaken to conduct individuals throughout their lives by placing them under the authority of a guide responsible for what they do and for what happens to them" (Foucault 1997: 68, Bennett 2007: 77). Breast ironing is underpinned by the belief that just seeing the protruding breasts of a girl arouses the desire of a boy and increases the risk of early sexuality: "Men usually go after girls for their breasts". The main aim of breast flattening is to prevent girls from hitting puberty and ultimately to wade off breast development, the male gaze and potential sexual predators (Hussain and Nzouankeu 2013).

Mothers say it's normal to do it, because it prevents the girl getting pregnant early and dropping out of school, or being raped When they see their girl growing breasts, they think they will attract boys - they are protecting their girls.¹

As a regime of governmentality, breast ironing should be "understood in the broad sense of techniques and procedures for directing human behavior. These techniques encompass the government of children, government of souls and consciences, government of a household, of a state, or of oneself" (Foucault 1997: 82). In Cameroon, the practice of breast ironing that is partly meant to provide teenage girls with the prospects for education and eventually a career is independent of culture, socio-economic status, urban or rural residence, or ethnicity religious, affiliation - Christians, Muslims and atheists undergo breast ironing.

Breast flattening is meant to protect girls from sexual harassment and to guarantee a future for them and their families through education and subsequently marriage. The social body refers "to the representational uses of the body as a natural symbol with which to think about nature, society, and culture" (Douglas 1970: 65, Erickson and Murphy 2013: 483). Despite the stark contrast between male and female bodily practices and form and therefore gender relationality - there are also ways in which maleness, femaleness and heterosexuality retain subjectivity and organize and shape body practices (Dworkin and Wachs 2009). In this regard, certain body types (protruding breasts as attractive to the male gaze) and practices are perceived as evidence of heteronormativity. They are also perceived as attractive to both male and female gazes - including the view that the breasts attracts the male gaze (Rysst et al. 2010: 14).

¹ <http://goo.gl/y41mvS>. [Accessed: 25 September 2015]

Breast ironing also serves as an act of resistance by parents who after being forced by abject poverty into betrothing their daughters are keen on prolonging the payment of bride price as obtains in Northern Cameroon by delaying the handing over of their pubescent daughters. For the young girls who voluntarily submit themselves to it, breast ironing constitutes a form of agency since they can pursue their education without being handed over to a husband already selected for them and without their consent (Rose 1999a). The ironing of adolescent girl's breasts makes them unattractive to men, their honour can be conserved and their prospects of completing education brightened and a future guaranteed for them. As a governmental regime, breast ironing should be seen from a cost-benefit analysis framework as entangled in the vested interests of patriarchy. According to Foucault, discipline is "essentially corrective" rather than punitive (Foucault 1977) although the overarching aim is to deter others as well as to reinforce the authority of parents.

Recommendations

- Empowerment of girls and women: They should be emboldened through the provision of health enhancement interventions. These should include pregnancy-prevention interventions because the promotion of condom use is meaningless when the girl lacks the power to make the decision as to whether or not as well as when to indulge in sexual intercourse and to access sexual and reproductive health services (UNFPA 2013a).
- Holistic needs-based approach to women's human rights: Young girls and women should have unfettered right to education instead of the former being expelled from educational institution when pregnant. They should also enjoy access to contraception and the prevention of pregnancy. This calls for the need to invest in human capital that will help girls to realize their full human potential as well as the respect of children and women's rights in tandem with various conventions that guarantee their rights: the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW).
- There is the need to create a youth friendly contraceptive service. That is a service where the health care providers are as young as the youths themselves, a unit where other activities like games, reading, etc. are incorporated in order to dilute attention towards any youth who may be interested in contraception. This failure may explain why the relationship between contraceptive use and unwanted pregnancies is inversely proportional. In the same light, youths should be provided with reproductive health services at youth friendly health centres where trained and empowered youths proactively attend to their peers since existing health services are not tailored to suit their needs.

Integrate comprehensive sex education at various levels of the secondary school curriculum. Despite great strides over the years, the content of "HIV/AIDS", "STDs" and "Sex education" courses taught in primary school depends on the teacher. There is the need for the harmonization of the curriculum for such an important course.

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