See below for the Introduction by Mr Peter Greenhouse [He's the sexual health consultant at Bristol – and a surgeon, so 'Mr' not 'Dr']





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With an introduction by Peter Greenhouse FRCOG FFSRH

FOREWORD

I feel greatly privileged to welcome you to the book of Jamie McCartney's Great Wall of Vagina, which is an epic demonstration and glorious celebration of the fascinating diversity of normal female vulval anatomy. Each individual cast is the product of an intimate but non-sexual encounter, a few moments of potential embarrassment overcome in the cause of art and selfdiscovery, which leaves a strongly positive sense of personal empowerment, as you will discover from the volunteers' comments in the accompanying text.

This is not a trivial or prurient composition: By retaining form, shape and full textural detail while removing any colour, these casts create a uniquely valuable educational resource, devoid of pornographic intent or content.

I found the original "Design-a-Vagina" image (an assembly of the first 40 casts) indispensable and highly successful in dissuading women who were requesting labial reduction surgery, which is – for all practical purposes – a Westernised, commercialised form of female genital mutilation. The Royal College of Obstetricians & Gynaecologists is particularly concerned about growing demand for these (almost always) unnecessary procedures. Cosmetic labiaplasty represents:

"...the latest chapter in the surgical victimisation of women in our culture. The procedures offered include remodelling to make the vulva appear more childlike... Women are being mutilated to fit male masturbation fantasies."¹

Almost all women, except those suffering from severe body dysmorphism, can be reassured and empowered by viewing these images, which allow them to compare themselves with other normal women, and realise that there's nothing amiss with, but much beauty in their own bodies. After all, heterosexual women otherwise have little or no opportunity to see, or motivation to seek images of other women's vulvas, and have difficulty enough viewing their own. The work thus has the potential to help re-establish a cultural norm of acceptance of what nature has provided, to celebrate it, and to leave it as it is. If it ain't broke, don't try to fix it.

Imagery alone cannot complete the task of changing hearts and minds damaged to the point of considering self-mutilation, so a light-hearted approach to counselling women and engaging real male attitudes could be beneficial: There must be considerably more men who find normal (i.e. larger) labia attractive, than there are women who have been coerced into believing the exact opposite. Almost no heterosexual man, if fortunate or skilled enough to have been invited to share intimacy, would suddenly bail out of the bedroom because of a woman's genital appearance. What really matters, apart from the infinitely more important qualities of tenderness and communication in the relationship, is not what it looks like, but does it work – i.e. when offered appropriate and considerate attention, does it give the owner, and her partner, pleasure and fulfillment? Many would agree with the sentiment expressed to me by a fellow gynaecologist some 15 years ago, when he was first faced with demands for labial reduction: "Why on earth would you want to make them *smaller*?"

This unique resource – when combined with humane, humourous and sympathetic counselling – is the best and most powerful antidote we have available to challenge and defeat the dangerously toxic cocktail of misinformed psychosocial and commercial pressure which erodes young women's sexual self-esteem. This pressure plays on their ignorance and insecurity, the only beneficiary being the private surgeon's bank balance.

The composition transcends mere medical utility, however, and surpasses poignant humour. It is, first and foremost, a work of art, a sculpture that is at once blatant yet intimate, shocking yet reassuring, more interesting and thought-provoking than the "pile of bricks" school of art, and immeasurably more valuable to humanity. (If it doesn't make the Tate, I'll resign my membership).

Prepare, then, to "walk" the Great Wall of Vagina: A testament to the technical skill and artistic vision of one man, and the enthusiasm and bravery of some 400 women who overcame their inhibitions to help create a work of enormous social, cultural, medical and ethical significance, and of powerful yet tranquil aesthetic beauty.

Appreciate, Celebrate, Debate, Learn and Enjoy.

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Reference

^{1.} Conroy RM. Female genital mutilation: whose problem, whose solution? Tackle "cosmetic" genital surgery in rich countries before criticising traditional practices elsewhere. BMJ 2006; 333: 106–107. http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1502236/?tool=pubmed