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Female Genital Mutilation: Parental Perception and Religious Point of View

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ABSTRACT

Female genital mutilation (FGM) is a cultural practice prevalent in various parts of Africa, the Middle East, and Asian countries. The study examined parents' perception of FGM in the Ilorin South Local Government Area of Kwara State. We also compared it with the religious point of view. The study adopted a descriptive research design. A sample of 378 parents was randomly selected to participate in the study. Once validated and reliably tested questionnaire was used for data gathering. The study was guided by one research question and three hypotheses. Mean, independent t-test and Analysis of Variance (ANOVA) were used to answer questions and test hypotheses. The findings of the study revealed that parental perception of FGM was negative. It also unfolded that there was no significant difference in the parental perception of FGM based on gender. Also, the findings showed that there was a significant difference in the Perception of parents toward FGM based on parental educational background. Finally, there was no significant difference in parental perception of FGM based on religion. While parental educational background influences their perception of FGM, parental gender did not influence their perception. It was recommended that government should introduce educational programs to raise awareness about the harmful effects of FGM among parents.

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1. INTRODUCTION

Female genital mutilation (FGM) is a deeply rooted cultural practice mainly undertaken in Africa, the Middle East, and Asian countries (Williams *et al*., 2017). First-generation migrants to the West are abandoning FGM, the custom continues in some places, albeit in small numbers. FGM is an overarching term used to describe cultural practices that result in the modification of female genitalia for non-medical reasons. However, parents are a determinant factor associated with the implementation of this cultural act in various societies, it is generally assumed that individual attitudes of parents and other family members have an impact on decisions related to the cutting of girls and that such attitudes are influenced by social norms.

According to the World Health Organization (WHO), FGM encompasses procedures involving the partial or total removal of external genitalia or other injury to female genital organs for non-medical reasons. Over 200 million girls and women worldwide have undergone FGM, leading to severe physical and psychological consequences. WHO classifies FGM into four types, varying in the extent of genital modification. Approximately 130 million women have been subjected to FGM, with an additional 2 million new cases annually in regions such as Africa, the Middle East, and Southeast Asia. UNICEF estimates that 3 million African girls are at risk of FGM each year.

FGM has shown a global decline, but UNICEF warns that population growth could increase the overall number of affected individuals in the next 15 years without effective prevention efforts. The prevalence of FGM is notable among immigrant communities in Western countries. In Europe, an estimated 103,000 women aged 15-25 and 10,000 aged 0-14 have undergone FGM in England and Wales. In Nigeria, the practice varies by region, with higher prevalence in the South-West and South-East, primarily among the Yoruba and Ibo tribes. The prevalence in other regions is as follows: South-South (34.2%), North-West (19.6%), North-Central (11.4%), and North-East (2.7%).

In Nigeria, FGM is practiced in various forms, with Types I, II, and III being the most common, and Type IV is practiced differently in the North and South regions. FGM is performed on girls at different stages of life, including infancy, childhood, adolescence, before marriage, during the first pregnancy, or even at death. The practice is found across social classes and religious groups, including Muslims, Christians, and traditional worshippers. FGM is often performed on girls between the ages of 4 and 12 to mark their transition to womanhoo. Despite efforts to discourage the practice, it remains widespread in Nigeria, with over 50% of Nigerian women estimated to have undergone FGM. Medical knowledge on FGM among healthcare professionals, such as nurses, is limited, and there are variations in the practice across different ethnic groups in Nigeria.

According to World Health Organization stated that FGM in some countries is usually practiced by trained and untrained personnel who perform the procedure of FGM, and untrained personnel used unsterilized equipment such as razor blades and shards of glass. In places where anesthesia is unavailable, the pain is excruciating, it causes physical, psychosexual, and sexual problems. The severity of health effects depends on the type of FGM performed and it is also dependent on the skill of the circumciser, the cleanliness of the tools and setting used, and the physical condition of the girl or woman. The immediate consequences of FGM include severe pain and bleeding, shock, difficulty in passing urine, infections, injury to nearby genital tissue, and sometimes death. In addition to the severe pain during and in the weeks following the cutting, women who have undergone FGM experience various long-term effects which may be physical, sexual, and psychological. Perception plays

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an important role in decision-making and results in decisions that at least partially reflect these perceptions.

According to Cambridge Dictionary defines perception as a belief or opinion, often held by many people and based on how things seem. Parents are often called a child's first teachers, which is why in many international contexts' parental perception and engagement in education are highly relevant to education. Parents' perception is formed by many factors over the period. Those factors which shape parents' perceptions are demographic that is age, gender, income, occupation, education, language, psychographics that is attitudes, values, personality, and interests.

Many studies have been carried out on FGM (Abolfotouh *et al*., 2014; Alkhalaileh, 2018) but none of these studies was carried out to examine the parental perception of FGM in Ilorin South Local Government Area of Kwara State and this is the research gap the study intended to fill.

The parent's gender, educational background, and religion are also variables of interest in the study. The gender, educational background, and religion of parents are both important variables that must be considered in the study to know the influence the variables might have on parental perception of FGM. Since parents are the child's first teachers it is highly important to study and analyze their perception of FGM. Perception goes a long way in affecting individual attitudes, values, and beliefs (Yusuf *et al.*, 2016). If an issue is perceived as sensitive, such perception fertilizes individual beliefs, attitudes, and values. It is against this background that this study investigated parents' perceptions of FGM.

FGM remains a deeply rooted cultural practice in many communities around the world, including Ilorin South Local Government Area in Kwara State, Nigeria. Despite efforts to eradicate FGM, it continues to persist, posing significant risks to the physical, psychological, and reproductive health of girls and women. While there have been studies on FGM in various contexts, there is a need to understand the specific parental perceptions surrounding FGM in Ilorin South Local Government Area, as these perceptions significantly influence the perpetuation or abandonment of the practice.

The following research question was raised to guide this study: What is the parental perception of FGM in the Ilorin South Local Government Area of Kwara State?

Research hypotheses are the following:

(i) Ho1: There is no significant difference in parental perception of FGM in Ilorin South Local Government Area of Kwara State based on gender.
(ii) Ho2: There is no significant difference in parental perception of FGM in Ilorin South Local Government Area of Kwara State based on educational background.
(iii) Ho3: There is no significant difference in the parental perception of FGM in Ilorin South Local Government Area of Kwara State based on religion.

2. METHODS

The study adopted a descriptive survey research design. The population for this study was all parents in Ilorin South Local Government Area of Kwara State. A simple random technique was used to select 378 parents. Our designed Instrument titled "Questionnaire on Parental Perception of FGM (QPPFGM)" was used for data gathering. The questionnaire was validated by Lecturers in the Department of Early Childhood and Primary Education, at Kwara State University. The test-retest method was used to determine the reliability of the questionnaire. The questionnaire was administered twice to 25 parents for two weeks. The data from the two administrations were correlated using Pearson Product Moment Correlation (PPMC) and

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the reliability coefficient was 0.86. The study lasted 3 weeks. Mean was used to answer the research question while independent t-test and Analysis of Variance (ANOVA) was used to test the formulated hypotheses. The two hypotheses were tested at a 0.05 level of significance.

3. RESULTS AND DISCUSSION

3.1. Religion Point of View

FGM is practiced in some Islamic communities in Africa and the Middle East, but it is not a requirement or fundamental tenet of the Islamic faith. Muslim scholars argue that FGM has no basis in Islam and is a cultural tradition rather than a religious mandate. Leading Muslim organizations, such as the Al-Azhar Islamic Research Academy, have condemned FGM as a harmful practice with no religious justification (See https://www.who.int). In Christianity, FGM is not endorsed by any mainstream denomination and is largely concentrated in African Christian communities influenced by traditional customs. Numerous Christian organizations condemn FGM as a violation of human rights and bodily integrity (See https://www.oikoumene.org). In Judaism, FGM is not mentioned in religious texts and is not an obligatory practice. Some Ethiopian Jewish groups have a symbolic practice known as "hatafat dam brit," which does not involve mutilation. The majority of Jewish religious leaders condemned all forms of FGM and prioritizes the health and well-being of girls.

3.2. Research Question: What is the parental perception of FGM in Ilorin South Local Government Area, Kwara State?

Table 1 shows the responses of the respondents on parental perception of FGM in Ilorin South Local Government Area, Kwara State. Parents disagreed with the following: Majority of mothers are aware of the consequences of FGM in their community(mean=2.46), Public awareness is the most effective means of FGM Education and should be encouraged in Nigeria(mean=2.19), FGM is practiced because of fear of early pregnancy and promiscuity among womenfolk(mean=2.39), FGM raises the social status of the family and promotes social morality and decency in women(mean=2.20), FGM enhances fertility and promotes child survival(mean=2.33), and The presence of clitoris makes a lady to desire to have sex always(mean=1.98). The parents agreed with the following items were high: FGM can hinder maximum sexual pleasures(mean=2.82), FGM is a painful and barbaric act(mean=3.01), FGM can cause emotional trauma and transmit life-threatening infections(mean=2.72), FGM women are not acceptable among peers in social meetings/functions in my community(mean=2.79), FGM of women enhances better chances of marriage in girls and also circumcision of women increases male sexual pleasure(mean=2.80), FGM is done to initiate girls into womanhood(mean=2.78), FGM preserves family honor and prevents immorality and also helps women to preserve their virginity(mean=2.82), and FGM is practiced to maintain cleanliness and good health in women folk(mean=2.54). Considering the result, it was revealed that Parental Perception of FGM was negative. The weighted mean is 2.48 which is a numeric indicator that the Parental Perception of FGM was negative in Ilorin South Local Government Area of Kwara State. Parental Perceptions of FGM were negative in Ilorin South Local Government Area, Kwara State. This finding corroborated the findings of Abolfotouh *et al*. (2014) who reported that parents held negative perceptions regarding the abandonment of FGM.

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Table 1. Frequency, count, mean, and percentage showing Parental Perception of FGM in Ilorin South Local Government Area, Kwara State.

S/N	ITEMS	Mean
1.	The majority of mothers are aware of the consequences of FGM in their community.	2.46
2.	FGM can hinder maximum sexual pleasure.	2.82
3.	FGM is a painful and barbaric act.	2.71
4.	Public awareness is the most effective means of FGM Education and should be encouraged in Nigeria.	2.19
5.	FGM can cause emotional trauma and transmit life-threatening infections.	2.72
6.	FGM is practiced because of fear of early pregnancy and promiscuity among womenfolk.	2.39
7.	FGM women are not acceptable among peers in social meetings/functions in my community.	2.79
8.	FGM raises the social status of the family and promotes social morality and decency in women.	2.20
9.	FGM of women enhances better chances of marriage in girls and circumcision of women increases male sexual pleasure	2.80
10.	FGM is done to initiate girls into womanhood.	2.78
11.	FGM preserves family honor and prevents immorality and helps women to preserve their virginity	2.82
12.	FGM enhances fertility and promotes child survival.	2.33
13.	The presence of the clitoris makes a lady to desire have sex always.	1.98
14.	FGM is practiced maintaining cleanliness and good health in women folk.	1.83
	Weighted Mean	**2.48**

Decision rule: Negative = 1.00 - 2.49 Positive= 2.50 - 4.00

3.3. Research Hypothesis One: There is no significant difference in parental perception of FGM in Ilorin South Local Government Area, Kwara State based on gender

Table 2 shows that there was no significant difference in the parental perception of FGM in Ilorin South Local Government Area, Kwara State based on gender (t = -.1.206; df = 376; P >0.05). Therefore, considering the result, the hypothesis is not rejected; hence there was no significant difference in the parents' perception toward FGM based on gender. The finding supported a study conducted by Johnson *et al*. (2020) which found no significant difference in the perception of mothers and fathers toward FGM.

Table 2. the summary of independent sample t-test on parental perception of FGM in Ilorin South Local Government Area, Kwara State based on gender.

Gender	n	Mean	Std. Deviation	t	df	Sig	Remark
Male	173	34.97	12.797				
				-1.206	376	0.229	Not Significant
Female	205	36.55	12.685				

3.4. Research Hypothesis Two: There is no significant difference in parental perception of FGM in Ilorin South Local Government Area, Kwara State based on educational background.

There was a significant difference in parental perception of FGM in Ilorin South Local Government Area, Kwara State based on educational background (F (4,373) =12.496; p < 0.05). The hypothesis is therefore rejected considering the result since the significant value is

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less than 0.05. This implies that educational background had a significant influence on parents' perception of FGM. The source of the difference is presented in **Table 3**.

Table 4 revealed that the significant difference exposed by Table 3 was a result of the significant difference among the following parents' qualifications: M.Ed., B.Ed, NCE, SSCE, and FSLC. Parents with M.Ed. qualification (Mean = 46.70) had a mean score of 46.70 which is higher than the mean of parents with other educational qualifications. This finding underscores the impact of education in shaping parents' perceptions. Several studies have suggested that higher levels of education are associated with more favorable attitudes toward abandoning or rejecting the practice of FGM (Bolfotouh *et al*., 2015; Berg *et al*., 2017). Educated parents are often more aware of the health risks and human rights implications associated with FGM, leading to a greater likelihood of opposing the practice. Conversely, there have been some conflicting findings that suggest a weak or no relationship between parental educational background and attitudes toward FGM (Adegbola & Esiet, 2007; Gruenbaum, 2001).

Table 3. The difference in parental perception of FGM in Ilorin South Local Government Area, Kwara State based on educational background.

Source	Sum of Square	df	Mean Square	F	Sig	Decision
Between Groups	7235.227	4	1808.807			
Within Groups	53991.249	373	144.749	12.496	0.000	Rejected
Total	61226.476	377				

Table 4. Summary of Bonferroni's Post Hoc pairwise Comparison of parents' Qualification

Qualification	Mean Score	M.Ed	B.Ed	NCE	SSCE	FSLC
M.Ed	46.70	*				
B.Ed	40.42		*			
NCE	35.03			*		
SSCE	32.55				*	
FSLC	30.66					*

3.5. Research Hypothesis Three: There is no significant difference in parental perception of FGM in Ilorin South Local Government Area of Kwara State based on religion

Table 5 shows that there was no significant difference in parental perception of FGM in Ilorin South Local Government Area of Kwara State based on religion ($F_{(2; 375)} = .468$; $p > 0.05$). The hypothesis is therefore not rejected in the light of the result since the significant value is greater than 0.05. This implies that religion had no significant influence on parental perception of FGM in the Ilorin South Local Government Area of Kwara State. This finding was in tandem with research reports of Berg *et al*. (2017) which unfolded that religion did not influence parents' perception of FGM. On the other hand, however, the finding negated the report of Toubia (1994) and Toubia (2015) which unfolded that there was a significant association between religion and parental perception of FGM.

Table 5. Table showing the difference in parental perception of FGM in Ilorin South Local Government Area of Kwara State based on religion.

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	3.763	2	1.881	0.468	0.627
Within Groups	1508.237	375	4.022		
Total	1512.000	377			

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4. CONCLUSION

Based on the findings of the study, it can be concluded that parents exhibited a negative perception of FGM. The findings also indicated that parental educational background had a significant influence on their perception of FGM. However, the study did not find a significant association between gender and parents' perception of this practice. Recommendations are the following:

(i) Government should introduce educational programs to raise awareness about the harmful effects of FGM among parents.
(ii) Government should develop targeted interventions that focus on parents with lower educational backgrounds.

6. AUTHORS' NOTE

The authors declare that there is no conflict of interest regarding the publication of this article. Authors confirmed that the paper was free of plagiarism.

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