

Comparative Analysis Of Mother To Daughter Practice Of Female Genital Mutilation In Nigeria And Egypt: A Quantitative Investigation

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Female genital mutilation/cutting is “the partial or total removal of the female external genitalia or another injury to the female genital organs for cultural or other non-therapeutic reasons” (World Health Organization, 2000). The practice of FGM is widespread in African countries especially in Egypt which is the demographic giant in the Arab countries and Nigeria which is the most populous black country in the world. As stated by the World Health Organization, over 200 million women and girls alive today have undergone female genital mutilation in the countries where it is being practiced. However, Nigeria and Egypt have the highest number of cases because of their population sizes.

Previous researches have pointed to the physical and psychological consequences of female genital mutilation. In both countries, the practice has been banned and heavy fine placed on it, however, in Egypt, the practice is rooted because of religious, social and cultural backgrounds which are also the case in Nigeria. Despite the law against this practice, it has continued to be practiced on girls. Finding from previous studies in understanding the prevalent rate and contributing factors responsible for the decrease in the practice of Female Genital Mutilation (FGM) are very important to our understanding of the reason why the practiced have persisted over time. While most scholars have attributed factors such as the poor education, religion and low economic status as the major obstacle to the elimination of the practice of FGM, this study, on the other hand, tries to add to the list of determining factors. Using a quantitative method of research, the 2013 and 2014 Demographic and Health Survey data of Nigeria and Egypt respectively to analyze the factors responsible for the continued practice of female genital mutilation, the logit model of analysis is also used for analysis.

A total number of 26,202 women in Nigeria and 21,754 women in Egypt aged 15-49 years were asked questions regarding FGM. Reported cases of circumcision is common among women within the age group of 25-29 in Nigeria and Egypt. In Nigeria, 17% and in Egypt, 21% of women occupying this age group reported that they are circumcised. The response of FGM base on the residence of the women shows that in Nigeria, 53% of the circumcised women live in urban areas while 47% live in the rural area but in Egypt, 41% reside in the urban area and 59% in the rural area. The wealth index of each country is divided into five categories. In Nigeria, 13% of the women who occupy the poorest category recorded that they have been circumcised, 15% in the poorer category, 19% occupying the middle category, 27% in the richer category and 27% of the women in the richest category are all answered to have been circumcised. In Egypt, 19% of the women who occupy the poorest category are circumcised, 20% in the poorer category, 19% in the middle category, 21% in the richer category and 22% in the richest category all reported to have been circumcised. From the descriptive analysis, rich women in Nigeria recorded being circumcised than their counterpart in Egypt.

The education status of the women in Nigeria indicates that 27.2% with no education, 20.2% with primary education, 41.4% with secondary education while 11.2% had higher education are circumcised. But in Egypt, 23.4% of the women had no education, 10.3% had primary

education, 54% are with secondary education while 12.3% have higher education. More women in Egypt with higher education are circumcised compare to women with higher education in Nigeria.

Consequently, there are also cases where the mothers reported that their daughter is circumcised. 27% of mothers reported that their daughters are circumcised in Nigeria while 16% reported in Egypt. However the level of the education of the mother is an important factor to consider if the daughter would be circumcised. The higher the level of education of the mothers the less likelihood that they will circumcise their daughters. It is also important to note that the richer the women are in both countries, the less likelihood that they circumcise their daughters. Religion is also another important factor that researchers have adduced for the for the practiced of FGM. In the two countries, muslim mothers have a higher likelihood of circumcising their daughters than other religions.

A very important discovery which has added to previous studies on factors contributing to the continuous practice of FGM is that in both countries, there is a high likelihood that the daughter will be circumcised if the mother has also experienced circumcision. In Nigeria, 74% of the women who were circumcised reported that their daughters are also circumcised while in Egypt, about 100% of the women who reported that they are circumcised have their daughters circumcised. This factor is however very important to be included in the list of factors responsible for the continued practice of FGM in the two countries.

This paper tries to give a comparative analysis of FGM in two African countries using a quantitative method to investigate the factors contributing to the continued practice of FGM despite the promulgation of laws banning the practice. It is therefore expedient for the governments of the two countries to ensure that women education is improved and encouraged. There should also be penalties for those who are still in the practice of girl circumcision and government should also try to provide alternative job activities for those who are in the business of girl circumcision. Lastly, the campaign and sensitization against the practice of FGM should not stop in each of the countries.

References

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