

Campaign for the Eradication of Female Genital Mutilation Practice in Patani LGA, Delta State, Nigeria

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Abstract

It is believed that the rights of women are violated when they are subjected to forceful Female Genital Mutilation (FGM), or Female Genital Cutting (FGC) practice, apart from the harm the practice exposes them to. Consequently, the main objectives of this study were to ascertain if respondents were aware, or exposed to any media campaign against FGM/C; to find out if FGM/C affected their sexual lives, and to establish if FGM/C has curbed promiscuity in the area. This qualitative study adopted the focus group discussion (FGD) method to elicit discussants' views about FGM/C and media campaigns against it. The paper was anchored on Attitude Change Theory. The population of the study was 20,030, and purposive sampling technique was used to select the sample size. Findings revealed that women in the area were not aware of any media campaign against FGM/C. Also, they admitted that there was no benefit in FGM/C, and lamented that most of them experienced sexual dissatisfaction. Furthermore, they agreed FGM/C has not curbed promiscuity in the area. The study recommended, among others, that media campaigns should commence immediately in Patani LGA and other areas where they have not penetrated; that FGM/C cutters and practitioners involved should be given alternative professions so that they can become effective change-agents, and that media campaigns should be carried out in local languages.

Keywords: Cutters, Female Genital Mutilation, Girls, Media Campaign, Promiscuity.

Introduction

Globally, most cultures see women as a weak set of people, and this assumption encourages gender disproportion. For instance, the Judeo-Christian culture sees women as inferior, always to be made fun of, that can only be seen but not heard, and to be owned like a piece of property (Ekwelie, 2005). McClure, (as cited in Espinosa, 2010), suggests that "viewers see the world through a cultural lens, believing that behaviours, characteristics, and attitudes are constructed by society" (p.12). Culture is supposed to promote peaceful coexistence among all members of a community, including men and women, but this is not the case because culture is being utilised to discriminate against women. Mikateko Joyce Maluleke, an Advocate of the High Court; Director in the Gender Directorate; Department of Justice and Constitutional Development (Republic of South Africa), observes that different social groups around the world have different traditional cultural practices and beliefs, some of which are beneficial to all members, but some of which are harmful to women. Early and forced marriages (Ukuthwala as practiced today), virginity testing, widow's rituals, 'u ku ngena' (levirate and sororate unions), female genital mutilation (FGM), breast sweeping/ironing, the primogeniture rule, practices such as 'cleansing' after male circumcision, and witch-hunting are among the harmful traditional practices she identified (Guanah & Dalung, 2018, p.231). Therefore, because boys are supposed to display strength, assertiveness, and ambition, while girls are expected to agree that they are the weaker vessels and should not be pushy or unduly ambitious, culture impacts gender-role orientation. That women are being discriminated against in many fronts, which includes cultural practices like forceful subjection to Female Genital Mutilation (FGM), is no more news. There has been a lot of media campaigns against this unhealthy act, but it seems they are either not enough, or are not being yielded to by the people concerned. The issue of Female Genital Mutilation (FGM), or Female Genital Cutting (FGC) as some people will prefer to call it, has been at the front burner of local, national, and international discourse for some time now, as it is believed to be a commonplace crime against women in almost all climes in the world. Apart from the psychological torture victims of FGM/C go through, the medical implications are awful. The practice is still in vogue in most parts of Nigeria, although some states have passed bills criminalising it, and the dangers that come with the practice. The World Health Organisation (WHO) says Female Genital Mutilation (FGM) exacts a crippling economic as well as the human cost and treating its health impacts amounts to 1.4 billion dollars per year globally (News Agency of Nigeria, as cited in Vanguard, 2020a). The media are expected to educate

the citizens about the danger of FGM/C, and there are various media campaigns already embarked upon to expose the dangers inherent in this practice, and the need to stop it. Some of the individuals and groups that have been leading the battle against FGM/C practice in Nigeria through media campaigns and other means include the United Nations Children's Fund (UNICEF), Health, Religious and Media Development Experts, Inter-Africa Committee (IAC), the Nigerian chapter campaigning against Harmful Traditional Practices, including Female Genital Mutilation (FGM/C), Girl to Women Research Development Centre (G2W), The first ladies of West Africa, Preston Development Foundation, Action Health Incorporated (AHI), United Nations Populations Fund (UNFPA), and many others. However, the question is "are most women aware of any of these media campaigns?" Hence, this study attempted to find out if women in Patani Local government of Delta State are aware or exposed to any media campaign against FGM/C; their perception maybe FGM/C has curbed promiscuity in the area, and if they see any benefit in FGM/C, about their experiences at circumcision, and maybe it affects their sex lives and marriages. The practice is still prevalent in our society, and it seems the media are not doing enough in their campaign-drive to see that this menace against women is stopped. Therefore, this study is necessary to determine if the media have been effectively playing the role of enlightening the public about the FGM/C practice.

Statement of the Problem

Apart from the rights of women that are violated when they are forcibly subjected to the FGM/C, the practice also exposes them to danger, and in some cases, it negatively affects their marriages due to sexual dissatisfaction (Naijaloaded, 2016; Akingboye (2018). Chronic infections, bleeding, or psychological trauma, as well as mental health difficulties, are all risks for women and girls who undergo FGM/C. They are also more likely to have life-threatening complications after childbirth. They suffer from psychological and bodily difficulties that last a long period. The victims may have chronic health problems throughout their lives, according to WHO (News Agency of Nigeria, as cited in Vanguard, 2020a). FGM/C consumes a country's essential economic resources, according to Ian Askew, Director of WHO's Department of Sexual, Reproductive Health and Research, and greater investment is urgently needed to halt FGM/C and relieve the misery it causes (News Agency of Nigeria, as cited in Vanguard, 2020a). Recent instances demonstrate that the practice of FGM/C is still very much alive and well. Mrs. Oluwakemisola Falade, for example, was threatened with expulsion by community youths and leaders for refusing to accept forceful circumcision of her two daughters, according to Akingboye (2018). The victims were threatened with violence and expulsion by the community, who subjected them to repeated abuses and dehumanization. The Falades had no choice but to give in to the community's demands out of desperation, even though they understood it was an abuse of their daughters, gender, and mankind as a whole. Similarly, after he and his wife, Modinat, refused to subject their daughter to genital mutilation/female circumcision, Olalowo Hammed Olalekan was severely assaulted by his kinsmen; they were forced to flee Nigeria for the safety of their children (Lailasblog, 2016). It is quite bewildering that some people still insist on FGM/C even when it "can result in urinary tract infections, uterine infections, kidney infections, cysts, reproductive issues, and pain during sex" (News Agency of Nigeria, as cited in Vanguard, 2020b, p.2).

Objectives of the Study

The objectives of the study were to:

1. Ascertain the extent the discussants were aware, or exposed to any media campaign against FGM/C.
2. Identify the experiences of FGM/C to the discussants, and maybe it affected their sex lives and marriages.
3. Ascertain the extent the media campaign has discouraged promiscuity among Patani women.

Theoretical framework

This study was premised on Attitude Change Theory. The theory was propounded in 1960 by Daniel Katz, Irving Sarnoff, and Charles McClintock (Katz, Sarnoff, & McClintock, 1956) while working independently, and from the then-dominant perspectives in psychology (psychoanalysis and behaviourism). Attitude is an acquired and learned behaviour that has accumulated over time. It is "a relatively stable emotionalised predisposition to respond in some consistent way towards some persons or a group of people or situation" (Nzegbulam, 2006, p. 31). Also, Morgan et al (as cited in Nzegbulam (2006), conceptualised attitude as "a learned evaluative manner towards a person, group of people, objects or group of objects" (p.31). A person's attitude determines how he or she reacts to people, events, or happenings around him or her; this may be a result of the situations the person concerned has been exposed to hitherto. Hence, Nwodu (2008, p. 8) maintains that the burden here is how does one begin to unlearn what has been learned over the years? In other words, how do we get to change people's attitudes towards other people, ideas, beliefs, or situations? Psychologists agree that situations or conditions under which attitude can change vary according to the nature of attitude to be changed. To successfully change long-acquired attitudes, the right means of persuasion has to be adopted. This aligns with the reference made to Plato by Carpenter, Boster & Andrews (2013). The trio said Plato proposed that a speaker who wishes to persuade others effectively must not assume that he can use the same persuasive appeal to carry out every persuasion because each is unique. According to them, Plato asserts "that each person had a particular type of soul and that to change attitudes, persuasive efforts must be tailored to each" (p. 104). Narrowing down persuasive appeal, or media campaign, to the specific needs of individual audience members, is in the category of persuasion theories identified as functional theories of attitudes by Carpenter, Boster and Andrews (2013). This theory is relevant to this study in that it explored how well-tailored persuasive communication could be used to change the negative practice of FGM/C. Also, it shows that the media are expected to be at the forefront in agitating for the total eradication of the FGM/C practice in Nigeria by carrying out effective targeted media campaigns that will reach those they are meant for.

Concept of Female Genital Mutilation

Female Genital Mutilation is a painful and invasive surgical operation that is frequently done on young girls without anaesthesia before they reach puberty. Their prepuce is removed, and their clitoris may be removed in part or whole. The labia minora are also surgically removed, and the labia majora are sewed together, concealing the urethra and vagina, in some traditions. A tiny hole is kept to allow urine and menstrual fluid to pass through (Ajibulu, as cited in Thisday, 2016). FGM/C also encompasses treatments that purposefully change or inflict harm to the female genital organs for non-medical reasons, according to the World Health Organization (News Agency of Nigeria, as cited in Vanguard, 2020a). According to Okonofua (2000), female genital mutilation comprises all procedures involving the partial or total removal of all the external female genital or other injuries to the female genital organs whether for cultural or other non-therapeutic reasons. In some instances, an adult female who probably escaped FGM/C during childhood would be forced to be circumcised before her marriage. This is the case in Kabowei Kingdom of Patani Local Government Area of Delta State where every female is expected to be circumcised. Guanah (2007, p.57) explains that any girl that "escapes" circumcision before the time of marriage must still go through the experience, and the bridegroom is expected to supply the **birimo-eyi** that consists of the cost of the midwife's (Circumciser's) fee, one tin of kerosene, a tin of palm oil, some quantity of camwood (bovia), one iron basin, a large mirror, two soap cans, an umbrella, two wrappers, one blouse, one head tie, one towel one pair of lady's shoe (red), one bar soap, and two tablets of toilet soap. Marriage ceremonies seldom hold in this community because of the strict adherence to the tradition of 'Circumcision.' The World Health Organisation (WHO) reports that more than 200 million girls and women alive today are estimated to have undergone the practice across 30 countries in Africa, the Middle East, and Asia where FGM is concentrated (News Agency of Nigeria, as cited in Vanguard, 2020a). Okonofua (2000) classifies FGM/C thus: Type 1. Excision of the prepuce, with or without excision of the part of the clitoris, commonly referred to as clitoridectomy; Type 2. Excision of the clitoris with partial or total excision of the labia minora commonly referred to as excision; Type 3. Excision of part or all of the

external genitalia and stitching/narrowing of the vaginal opening (infibulation), and Type 4. Unclassified, this is practiced to a much lesser extent. Scholars and campaigners have argued that a culture transformation is required to eradicate the pandemic, basing their arguments on statistics from 2004 to 2015 for women aged 15 to 49 years old who had a 64 percent zero tolerance policy. According to the United Nations Children's Fund (UNICEF) Representative in Nigeria, Mohamed Fall, FGM/C "violates a woman's rights to health, security and physical integrity, the right to be free from torture and cruel, inhuman or degrading treatment, and even in some cases, the right to life" (Akingboye, 2018, p. 1).

Statistics of Female Genital Mutilation Worldwide

Female genital mutilation (FGM), often known as circumcision in most regions of Africa, is a process in which the external female genital organs are partially or completely removed for non-medical reasons. It is an obligatory custom to be practiced on all girls in various cultures and societies, therefore it is frequently passed down through generations of women. According to a research by UNICEF, UN Women, and Plan International, 12 million girls are married in childhood each year, four million are at risk of FGM, and 19.9 million girls in Nigeria have had FGM (Adebowale, 2020). Statistics released by Amnesty International (2016), Demographic Health Survey (2015), United Nations Children's Fund (UNICEF, 2004), United States Agency for International Development (USAID, 2012), United States Department of States (2015). and World Health Organisation (WHO, 1997), state that the prevalence of FGM is quite high in countries like Benin Republic, which recorded 16.8 percent prevalence, Burkina Faso with 76.6 percent and Cameroon with just one percent. Also, Central Africa Republic was 35.9 percent, Ethiopia 79.9 percent, while Chad had 44.9 percent and Côte d'Ivoire (Ivory Coast) 44.5 percent, as well as Djibouti with 90-98 percent. While the statistics for Congo is unknown, Egypt recorded 93.7 percent, Eritrea 88.7 percent, and Gambia 60-90 percent, while Ghana recorded 5.4 percent. Also, Guinea has 98.6 percent, Indonesia 100 percent, Kenya 32.2 percent, Liberia 50 percent, Mali 91.6 percent, with Mauritania recording 71.5 percent. In Niger, the prevalence is 4.5 percent, Senegal 28.2 percent, Sierra Leone between 80-90 percent, Somalia 90-98 percent, Sudan 90 percent, Tanzania 17.7 percent, Togo 12 percent, Uganda was five percent and Yemen at 22.6 percent. According to the World Health Organization (WHO), Nigeria has the greatest prevalence rate of FGM/C in the world, with an estimated 40 million women having had the procedure in the nation, indicating a prevalence rate of 41%. (News Agency of Nigeria, as cited in Premium Times, 2018). In addition, according to Akingboye (2018), 27 percent of Nigerian women between the ages of 15 and 49 are victims of FGM/C, while the frequency has declined in various regions of the nation over the previous 30 years. Despite the geopolitical zone's high literacy and awareness rate, a survey done by the United Nations Population Funds, UNFPA, in 2015 found that the practice was widespread in the South-West. According to the survey, Osun State still has the greatest frequency of female genital mutilation in Nigeria, with around 76.3 percent, followed by Ekiti which had 71.2 percent, Oyo, 69.7 percent; Ebonyi, 55.6 percent; Imo, 48.8 percent; and Lagos, 44.8 percent (News Agency of Nigeria, as cited in Premium Times, 2018). Emmanuel Ajibulu, a social commentator and communication strategist, is quoted by News Agency of Nigeria (as cited in Thisday, 2016) as saying that various sources estimate that between 60 and 140 million women in the world have been circumcised, and that "an average of about four girls a minute continued to be mutilated" (p.2). Ajibulu cites a 1999 Demographic and Health Survey of 8,205 women in Nigeria. According to the poll, 25.1 percent of Nigerian women had undergone one of these operations. He further claims that an estimated 30,625 million women and girls, or nearly 60% of the country's entire female population, had undergone one of these types, citing a 1997 World Health Organization (WHO) research. He repeats that a survey conducted by the United Nations Development Systems in 1996 found that 32.7 million Nigerian women were impacted. He further claims that 33 percent of all homes practice one of these kinds, citing a Nigerian Non-Governmental Organization (NGO) Coalition research. There has been the agitation for the stoppage and total eradication of female genital mutilation across the globe on the basis that it violates women's reproductive rights and rights to bodily integrity, and various countries are enacting laws against it as well as clamping down on those who are still engaged in the practice. Many nations, Nigeria inclusive, have ratified several UN conventions and declarations that make provision for the promotion and protection of the health of girls and women, to wit, the

Universal Declaration of Human Rights – 1948, CEDAW – 1979, the Convention on the Rights of the Child - 1990, the Vienna Declaration and the Program of Action of the World Conference on Human Rights – 1993, the Declaration on Violence against Women - 1993, the program of Action of the International Conference on Population and Development (ICPD) – 1994, and the plan for action of the Fourth World Conference on Women – 1994. The Kenyan government too passed the Prohibition of FGM Act in 2011, prescribing imprisonment or a fine for anybody convicted of practicing FGM/C or deemed responsible for death as a result of it (Furrer, 2015). The Gambian government also introduced a ban on Female Genital Mutilation (FGM) which came into effect immediately. The country's former President, Yahya Jammeh made a public proclamation outlawing the ancient practice. He reportedly pointed out that since his country was in the twenty-first century, practices such as FGM had no place in modernity and Islam, and should therefore be eradicated (Lindaikejisblog, 2015; Rifai, 2015). Recently too, Sudan criminalised carrying out female genital mutilation (FGM), anyone found guilty of performing the procedure will be sentenced to up to three years in prison (News Agency of Nigeria, as cited in Vanguard, 2020b). Also, News Agency of Nigeria (as cited in Punch, 2016) reports that a court in Australia recently convicted a foster mother and a nurse for carrying out female genital mutilation. The women, a mother aged 38, and a nurse aged 72 were found guilty of mutilating the clitorises of two sisters aged seven and six. Also in Nigeria, the South-West FGM Consultant of United Nations International Children Education Funds (UNICEF), Aderonke Olutayo, and the Oyo State Director, National Orientation Agency (NOA), Dolapo Dosumu, have warned perpetrators of the Female Genital Mutilation practice in Oyo State would henceforth be prosecuted. The duo stated that the practice of female genital mutilation, “is violating the right of a girl, and when you do that it contravened the law that protects the girl, so it is liable and such person will be prosecuted [...] hence any deviant would be fished out through a community mechanism and be brought to justice” (Badru, 2020, p.1) The issue of FGM/C is so important that February 6 of every year has been declared by the World Health Organisation as zero tolerance day against female private part mutilation to discourage the harmful act. According to WHO (News Agency of Nigeria, as cited in Vanguard, 2020a), at present, 26 African countries and the Middle East now explicitly legislate against FGM/C as well as 33 other countries with migrant populations from FGM/C-practicing countries. Among efforts to end the practice is the introduction of the Sustainable Development Goals target under Goal 5 to eliminate all harmful practices, such as child, early and forced marriage and FGM/C, by the year 2030 (Ogundipe, 2019).

Reasons FGM/C is being practiced

The form of FGM/C practiced varies from one ethnic group and geographical location to the other. It crosses the numerous population groups, and is a part of the many cultures, traditions and customs that exist amongst different peoples. Different ethnic groups give different reasons why they are engaged in the practice, albeit some are akin. One of the reasons people partake in FGM/C is the sociological reasons. FGM/C is practiced by many communities because they want to identify with their cultural heritage, like the initiation of girls into womanhood, social integration and the maintenance of social cohesion. They believe this is a heritage bequeathed to them by their forefathers which they must not allow to die. In Kabowei Kingdom of Patani Local Government Area of Delta State, the ritual to initiate girls into “real womanhood” is called *Ayo Famu*. This is normally carried out after the twenty days dedicated to the annual Seigbein Festival in April the moment the moon is sighted (Guanah, 2007, p.36). The psychosexual reasons are that, because of the erroneous and fallacious views that uncircumcised women are promiscuous, there is a reduction or elimination of the sensitive tissue of the outer genitalia, particularly the clitoris, to attenuate sexual desire in the female, maintain chastity and virginity before marriage and fidelity during marriage and increase male sexual pleasure. Speaking to CNN, one of the cutters said: “We are doing it because it's important for us, because when girls don't get cut when they are born, they go after boys when they are young, and we don't want that. We don't want them to get spoiled, that's why we do it” (Naij.com, 2016). This argument is not sustainable because there have been incidences of unwanted pregnancies involving circumcised females. The offenders also hide under the pretext of hygiene and aesthetics, arguing that the external female genitalia is unclean and unattractive, and should be removed to increase cleanliness and aesthetic appeal. They also argue that

women who have not been circumcised are dirty, unmarryable, and physically unattractive. There is also the matter of debunking falsehoods, increasing fertility, and improving child survival. Uncircumcised women, according to circumcisers, pose a health danger to themselves and their children, particularly during childbirth. Some people think that if a male baby's head comes into contact with his mother's clitoris during childbirth, he will die. Female genital mutilation is also motivated by religious beliefs. Muslims, Christians (Catholics, protestants, and Copts), animists, and non-believers from a variety of backgrounds all endorse the practice. Some Muslim groups, on the other hand, have repeatedly carried it out in the sincere idea that it is required by the Islamic faith. However, the pastor of the House of Kings Ministry, Dr. Wilberforce Otti, who is also a lecturer in Ebonyi State University, Abakaliki, Nigeria, has said female genital mutilation was not supported by the Bible and the Quran, noting that female genital mutilation has no health benefits, and poses several risks to the health of the women. The clergyman urged religious leaders, including Christians and Muslims, to lead the campaign against the practice. He pointed out that the Bible did not encourage the practice, as is widely believed. Chiedozie (2017) reports Otti as saying, "I am involved in the campaign against female genital mutilation to establish the fact that the practice is not Biblical. Most people feel that it is a tradition that has roots in the Bible." He said God only spoke to Abraham to circumcise the male and "we all know that male circumcision is hygienic - it is positive and beneficial to the man. However, when it comes to female genital mutilation, there are a lot of side effects that are harmful" (p.2). He encouraged all clergymen to use their pulpits to campaign against female genital mutilation. Otti also adds that the Quran, the holy book of the Islamic faith, was also not in support of the practice. He says he has been privileged to interact with Muslim clerics, and he was made to understand that there was no place the Quran encouraged people to practice female genital mutilation. Otti declares that "God is a God of purpose - He has a reason for creating the female genital organ the way He did, and cutting it is like telling Him He made a mistake" (p.2). He, therefore, charged every Christian, Muslim, and even those who adhere to other religions to lend their voice to the campaign against female genital mutilation (Chiedozie, 2017). The economic reason for participation in the practice, especially by the cutters, is that it creates job opportunities for them. They claim that is what they grow up doing, and they find it very difficult to go and learn a new trade from where they can get their daily bread. Hence they will not want the practice to stop.

Health implications of FGM/C

Severe pain, hemorrhage (shock), tetanus or sepsis, urine retention, vaginal ulceration, injury to neighboring organs, and HIV predisposition are all linked to female genital mutilation. Professor Modupe Onadeko, President of the Nigerian Inter-Africa Committee on Campaigns Against Harmful Traditional Practices Against Women and Girls, is quoted by Daniel (2015) as noting that female private part mutilation frequently results in great suffering and, in some circumstances, death. According to her, the act might result in bleeding, which could lead to cardiac arrest, unpleasant urination, urinary tract infections, HIV, and keloid formation. Professor Modupe Onadeko further stated that when an adult pins down a kid during mutilation, the youngster's hips might be cracked due to pressure on the hip. According to the professor, long-term implications of female private part mutilation include infertility owing to a plugged tube or cerebral palsy in offspring. The hazards that FGM offers to the victims are the driving force behind the global campaign against it. From extreme aches induced by a lack of anesthetic to shock and heavy bleeding, there is something for everyone. Cysts and abscesses, keloid formation, urinary incontinence, dyspareunia and sexual dysfunction, recurrent urinary tract infection, infertility, prolonged labor (still birth), antepartum hemorrhage, postpartum hemorrhage, and maternal mortality are among the long-term complications of FGM/C, according to Okonofua (2000). For many women, the inability to experience full sexual pleasure or achieve orgasm during sexual intercourse has remained an elusive mirage because of the menace of circumcision. They have expressed sexual unhappiness, or have struggled to become sexually aroused at some time in their life. Female genital mutilation has several detrimental consequences for women. A man is considering canceling his wedding to his fiancée after discovering a box full of sex toys in her chamber, including vibrators, masturbation creams, porn DVDs, and various pleasure gadgets. When he confronted her, she admitted that she was a lesbian and that sex with males did not please her owing to a flaw in her circumcision process. She confessed to him that

sex with her had been staged in order to keep her fiancé happy (Naijaloaded, 2016). When she was a little girl, Kemi Omololu-Olunloyo, a prominent Nigerian journalist, told how she was circumcised with a razor blade and no anesthesia offered for the agony. She claims she bled for about a week, and as a result, she now fakes orgasms during sex years later. She said in an interview with IBTimes UK that the incident left her with life-long post-traumatic stress disorder (PTSD). According to Olunloyo, as quoted by Laila (2016), "I don't experience orgasm during sex and when I tried to promote the use of sex toys among Nigerian women, men started attacking me saying I was discouraging African women 'from the real thing'" (p.2). She admits that "Sex is not important. I have no libido or urge to have sex" (p.2). She continued by saying, "Many women say they fake orgasms and others have husbands who go out to prostitutes and girlfriends. FGM has destroyed marriages here" (p.3). Prof. Modupe Onadeko, the National President of the Inter-Africa Committee (IAC), a Nigerian organization working against harmful traditional practices like female genital mutilation (FGM/C), also highlighted the dangers of the practice. "Harmful Traditional Practices (HTPs) often result in the premature death of girls and women, as well as leave many physically, medically, psychologically, and emotionally damaged for life," Onadeko noted in Akingboye (2018, p.1). "There is no good thing that can be gained from mutilating girls and women," she concluded, "to my knowledge and experience, and I have been in this for 26 years" (p.1). Dr Antor Odu Ndep, a public health practitioner, researcher and a Senior Lecturer at University of Calabar, Nigeria, confirms that FGM/C can lead to death when she attests that, "My sister bled to death after we were brutally cut" (Taire & Ajumobi, 2021, p. 2). Many women die during childbirth, according to Zikar Elendu, a programme officer with the Preston Development Foundation (PDF), a non-governmental organization in Nigeria, and many more have trouble laboring because they have been cut (News Agency of Nigeria, as cited in Premium Times, 2018). According to Nwando Onuigbo-Chatta, the PDF's knowledge management officer, Nigeria may be able to lower its high incidence of maternal mortality if FGM/C is abolished, as it is one of the leading causes of death during childbirth. Many women have experienced the pains and discomfort associated with female circumcision, and are now living with its aftermaths. Some describe themselves as incomplete women or freak whenever the issue of sex comes up in discussions. During sex, they do not experience orgasm which is simply described as the release of built-up sexual tension in both men and women during a sexual encounter. This is the main reason most of them walk out of their marriages. They feel they should not be enduring sex when they do not enjoy the pleasure. Kanko (2016) expressed her feelings having been forced to undergo female genital mutilation (FGM) thus:

FGM kills your self-esteem. You think you are not worthy of respect because of what happened to you. Because you are incomplete. Many women who have undergone FGM struggle with this. I was insecure about myself in relationships with men. But this has changed. It was a slow process, but it has changed. From [being] a victim of FGM, I have become a woman who speaks out against it (p.1).

Media and the campaign against FGM/C

All over the world, communication is core when it comes to discussing issues that have to do with human life. Communication is inevitable in achieving all set goals, no matter the field of human endeavour, and this can be successfully done through the media. Hence MacBride and Abel (1981) declare that: Life is sustained and animated through communication. It is also the driving force behind social activity and civilization, leading people and peoples from instinct to inspiration via a variety of processes and command and control systems... (p.3)

Radio, newspaper, television, films, books, magazines, social media, and other sources, according to Guanah, Anho, and Nkala (2020) promote global contact. . They also "influence people and their decisions a great deal hence they have to be fully integrated to galvanise people..." (p. 193). On the other hand, media campaigns are embarked upon with specific objectives in mind that is why there are various campaigns by different groups calling for the stoppage of the FGM/C practice in Nigeria. These campaigns are meant to

discourage this harmful act against women in society. The crusade of mass media against the ills in society is part of their social responsibility function.

However, such campaigns cannot be said to be successful if they do not reach those they are supposed to reach. It may be surprising to discover that the supposed target audience of a media campaign may not be reached due to various reasons which may include the use of the wrong medium, lack of finance to sponsor such campaigns, application of wrong strategies, failure to pinpoint the variety of characteristics of the mediated message, or the inability to identify the right targets and where they are located.

Since the mass media have the advantage of reaching large populations, these media campaigns are usually intended, through persuasion, awareness enhancement, advocacy, education, and enlightenment, to influence the perpetrators of FGM/C and those who support the act to bring about attitude change. With the constant campaign against the FGM/C practice, the media would be able to effectively inform the society on FGM/C issues, and this can bring about attitude change towards the practice.

The media should be engaged to help raise awareness of the dangers of this age-old cultural practice of female genital mutilation. This can be achieved by the deployment of both the contemporary, traditional and social media since the practice is not limited to rural areas alone. Daly and Carson (2016) report that “there is now a large, young population with increased access to information through phones, and an increased use of social media offers new opportunities for transmitting information about the dangers of FGM” (p. 3). The media should embark on an intensive campaign using all forms of strategies for development communication which include advocacy and publicity, social mobilisation, public enlightenment, and propaganda/publicity.

Media personnel should research, acquire knowledge and information that are crucial in helping to stop FGM/C, to document the characteristics and consequences of FGM/C. There has to be vigorous advocacy that may involve the media visiting schools with the campaign against FGM/C, the Television and Radio stations using public affairs programmes to educate the populace, and using Newspaper and magazine news and articles to portray the hazards inherent in this practice.

Research Method

The focus group discussion (FGD) method was used to generate qualitative data from respondents. Concerning this study, focus group discussion guide assisted this researcher in gathering information that were of great value to the study, and also to get deeper information related to discussants' perception of the media campaign and FGM/C. There were two sessions for the focus group discussion; each session consisted of 10 discussants. The essence was to promote openness and freedom in expressing their views on the subject. This researcher moderated the group discussions to have a good knowledge and understanding of discussants' awareness about any media campaign against FGM/C, and their understanding of the dangers of FGM/C practice. Population for the study

According to Nigeria's National Population Commission-NPC (2010), the population of females between ages 20 and 59 in Patani Local Government Area of Delta State is 15, 151. Since there would have been an increase in the population between 2006 that the last population census was conducted in Nigeria and 2020 that this study was done, the population projection formula provided by Owuamalam (2012) was used to determine the population of females between ages 20 and 59 in Patani Local Government Area of Delta State.

The formula:

$$P_p = G_p \times P_1 \times T$$

Where;

P_p = projected population.

G_p = Given Population as at last Census.

P_1 = Population increase Index.

T = Period between the given population and year of study.

$P_p = ?$

$$G_p = 15, 151$$

$$P_1 = 2.28\% = 0.0228 = 0.023$$

$$T = 2020 - 2006 = 14$$

$$P_p = 15, 151 \times 0.023 \times 14$$

$$P_p = 4,878.622, \text{ Approximately. } 4, 879$$

Therefore, the projected increase in population was 4,879, and this brings the current population to 20,030 (i.e. 15, 151 + 4,879).

Sampling procedure for FGD

Participants for the focus group discussions were sampled using the purposive or judgmental sampling technique. There were two focus groups, and each group comprised of ten women. Patani Local Government Area (LGA) is made up of 10 Wards, and two women were selected from each of the wards. The criteria for picking participants were based on those who have been circumcised, and who have daughters that have been circumcised or about to be circumcised, and female traditional birth attendants who also carry out circumcision. Those selected were the women who agreed to participate in the focus group discussion. Based on the above criteria, screener questions were used to determine the two discussants selected from each of the ten political wards that make up Patani Local Government Area of Delta State, and that brought the total number of discussants to twenty. They were shared into two groups of ten members each. To gather data, the discussions were recorded with an audio recording device as well as written down by this researcher.

Data Collection Instrument

The instruments used in collecting data for the focus group discussion were structured questions and focus group discussion guide.

Validity and Reliability of research instruments

To ensure that the structured questions and focus group discussion guide would measure what this researcher set out to measure, and elicit relevant information from the discussants, they were given to two experts in Behavioural change communication and in Social psychology to validate. This researcher critically looked at the suggestions they made and amended the instruments to align with this study's objectives. The reliability of the question focus group discussion guide was established using the split-half method of reliability.

Data collection method

Data were collected through the focus group discussions.

Focus Group Discussion Analysis

1. Discussants were asked maybe they are aware or exposed to any media campaign against FGM/C. The twenty participants said they don't know of any media campaign against the FGM/C in Patani LGA, in other words, they are not aware of any existing media campaign. Albeit, some of them admit that they seldom listen to the radio but, however, they have never heard of any campaign of such on-air.
2. Participants were asked if they would support the stoppage of the practice when they are eventually exposed to media campaigns against FGM/C. Seventeen of them promised to support any such media campaign, but three of them who are traditional birth attendants said they will not support it because doing so would deny them of their livelihood.
3. Discussants were asked if they are aware of the dangers inherent in the FGM/C practice, and if there were any benefit in the practice.
Some of the participants said they were aware of some of the dangers, but argued that the advantages are more than the few dangers the practice may come with. One of the dangers they know about, according to them, is few cases of excessive bleeding during FGM/C. "In my view, the idea of circumcision is not bad; it is a culture we met, and we must also pass it on to our children", Mrs Elora Akpoebi said.
4. They were asked about the benefits of FGM/C, their experiences at circumcision, and maybe it affects their sex lives and marriages. Initially, most of them were shy at responding to this question, but after Oghale Oghenevo broke the ice others also opened up. Oghale said "since I married I have not been enjoying sex, I am tired of the marriage, if I have access to sex doll I will use it. I am sure it is the

circumcision I went through when I was a little girl that is affecting me today". Some of the respondents expressed delight that the discussion availed them the opportunity to talk about their sorrowful experiences. Majority (17) of the women concluded that they don't see any benefit in the practice because they don't know of any way they are better than their peers that are not circumcised.⁵ They were asked how they think the media could help in the fight against FMG/C in their area.

They suggested that there should be continuous announcements via the media, especially on the radio and television stations they receive their signals in the area, to educate them, and to serve as reminders. They also request that media campaigns should be done in their local languages, and meanings should be explained; for instance, they claim they are more familiar with the word "circumcision" than with "female genital mutilation/cutting".⁶ Participants' response on their perception on maybe FGM/C has curbed promiscuity in the area.

They unanimously agreed that it has not stopped promiscuity. In fact, one Mrs. Joan Angodi said her 17-year old second daughter in Secondary school, who was circumcised when she was ten years old, got pregnant for a man old enough to be her father; this is after she has been caught at different times having unprotected sex with not less than three different boys at different times.

Discussion of findings

From the focus group discussions, it was revealed that women in the area are not aware of any media campaign against FGM/C. This first finding may attribute to the reason the practice is still prevalent in the local government council area. That is why Femi Olanipekun, a Media Expert, says that media practitioners should see themselves as advocates against FGM. He says there was an urgent need for the media to increase and sustain news coverage and campaign against FGM in society (News Agency of Nigeria, as cited in Vanguard, 2021). The mass media as social institutions are expected to sensitise the people about the dangers of FGM/C practice being meted out to the female gender by educating and advocating for the total eradication of female genital mutilation (FGM/C), and ensuring that women are free from the oppression, suppression and the health hazards that come with FGM/C. The media must endeavor to increase awareness about the danger associated with FGM/C so as to dissuade people from taking part in it, or encouraging it in any way whatsoever.

The poor awareness level of the media campaign against FGM/C made Obarisiagbon and Obarisiagbon (2016) regret that the media are, "yet to succeed in making people learn new values with regards to harmful and obnoxious female genital mutilation (FGM)". The twosome see this as "a clear failure of the mass media whose responsibility it is to transmit new social values to the society" (p. 5). Hence, Akingboye (2018) declares that the media must effectively mobilise, persuade, educate, and inform the society about the danger inherent in the FGM practice. Also, the second finding was got when discussants at the focus group discussions were asked if they see any benefit in FGM/C, about their experiences at circumcision, and maybe FGM/C affected their sexual lives and marriages. They admitted that there was no benefit in FGM/C, and lamented that most of them do not enjoy their sexual relationship with their husbands, which they suspect was caused by the FGM/C they underwent at their tender ages.

Professor Modupe Onadeko, the National President of the Inter-Africa Committee (IAC), a Nigerian chapter campaigning against Harmful Traditional Practices, including Female Genital Mutilation (FGM/C), agrees that the prevalence of FGM/C has resulted in marital crises, as victims "are often rigid and cannot respond well during sexual intercourse with their husbands." This may be the reason many husbands get frustrated and seek solace and sexual satisfaction elsewhere outside their homes," Onadeko concludes, according to Akingboye (2018, p. 2). Zikar Elendu, a programming officer with the Preston Development Foundation, a non-governmental organization in Nigeria, believes that most women cannot enjoy the sexual element of life because of FGM/C, and that is unacceptable (News Agency of Nigeria, as cited in Premium Times, 2018). "Every study and every bit of evidence we have shows there is no benefit in mutilating or cutting any girl or woman for non-medical reasons," says Mohamed Fall of the United Nations Children's Fund (UNICEF) in Nigeria. "It is a practice that can cause severe physical and psychological harm," he says (Akingboye, 2018, p.2). The third finding from the Focus group discussion was that FGM/C has not curbed promiscuity in the area. This is in line with Oyibo's (2021) reports, which cite the Rule of Law and Anti-Corruption (RoLAC), an advocacy group, as stating that Female Genital Mutilation (FGM) does not safeguard chastity, but rather encourages promiscuity. Likewise, Nkoli Ebede, Coordinator, Legal Aid Council in

Anambra State, Nigeria, confirms that “With FGM, sexual satisfaction is gone. Such mutilated girls or women will end up becoming promiscuous because they will be going from one man to another in search of sexual satisfaction. So, we can now see the irony, they claim they want to tame girls and women by practicing FGM, but it is actually the opposite” (Oyibo, 2021, p.2). Olamide Falana, Executive Director of the Girl to Women Research Development Centre (G2W), links FGM/C to ignorance and bad cultural practices, which endangers the lives of nearly 10 million Nigerian girls and women. According to Akingboye (2018), Falana said, “Africans generally hold the belief that partial or total cutting of the female genitalia will dissuade acts of promiscuity. However, research has shown that the mutilation of the female genitalia does not affect sexual behaviours positively” (p.Elendu of PDF echoed Falana's sentiments, classifying FGM/C as a violation of girls' and women's human rights, saying that women were cut and punished for crimes they had yet to commit. She views the act as imprisoning women for crimes they did not commit. Elendu is quoted by the News Agency of Nigeria (as cited in Premium Times, 2018) as saying that FGM/C makes girls pay a lifetime price for a "offense" they did not commit and may never commit, declaring that, “promiscuity which is arguably the major reason for female circumcision in Nigeria has been proven to be more related to poverty, peer influence, poor parental supervision and drug use and not necessarily being uncircumcised” (p.1).

Conclusion

The female gender has been suffering so much discrimination; even though some of these will take time to be corrected there are some that can be addressed immediately, and the FGM/C practice is one of them. The dignity of women must be respected, but as it appears with the FGM/C their dignity is being trampled upon because this practice is demeaning, wicked, and cruel. To achieve the eradication of this practice the mass media must be at the front with intensified campaigns. They should identify and expose the individuals and groups that are still perpetrating this heinous act, and ensure they are brought to book.

Even though the practice appears to have reduced in some areas, efforts should be made by the media and stakeholders to ensure that it is completely eradicated. According to Uju Onyendilefu, a consultant with RoLAC, a research in communities in Anambra State, Nigeria, revealed the stoppage of female genital ‘cutting’ because they no longer use blade for fear of the child bleeding out, however, the now practice ‘Numbing’. This is a situation whereby they use very hot water, methylated balm, or dusting powder to harshly rob and numb the genital part of a new born baby to retard the development of the clitoris (Oyibo, 2021). Media campaigns against FGM should not be a one-off affair limited to urban cities alone, it should be perpetual and spread to every nook and cranny of the country, with every available media deployed to educate the society of the dangers associated with FGM/C. With the support of the media, the FGM/C practice can be drastically reduced, if not completely stopped.

Recommendations

- i. Media campaigns should commence immediately in Patani LGA and other areas where they have not penetrated.
- ii. There is need for more funding for the international and national rights groups that are campaigning against FGM/C.
- iii. FGM/C cutters and practitioners involved should be given alternative professions so that they can become effective change-agents.
- iv. The ministry of health should committee embark on sensitisation campaigns through seminars and film shows in all the local governments in Nigeria.
- v. Media campaigns should be carried out in local languages.
- vi. Oral media should be deployed in rural areas in carrying out campaigns against FGM/C for ultimatum effectiveness.
- vii. For the States where the law criminilising the practice has been passed, government should ensure there is enforcement of the law by prosecuting people who carry out these acts, to discourage other people and get an end to it.
- viii. The federal government should take stringent measures to campaign against the practice, especially within the hospital environment.
- ix. The media should collaborate with opinion leaders within Patani LGA to join in actively speaking against this practice as in a two-step flow approach.

References

- Adebowale, N. (2020). 19.9 million Nigerian girls have experienced genital mutilation — UN report <https://www.premiumtimesng.com/news/more-news/380317-19-9-million-nigerian-girls-have-experienced-genital-mutilation-un-report.html>.
- Akingboye, O. (2018). Female genital mutilation still a big threat to Nigerian girl-child survival, development. Retrieved from <https://www.google.com.ng/amp/s/guardian.ng/features/femalegenitalmutilation-still-a-big-threat-to-nigerian-girl-child-survival-development/amp>.
- Amnesty International (2016). FGM: Violence against women. Retrieved on 2/2/2017 from www.amnestyusa.org/ourwork/issues/women/voilence-against-women-information.
- Badru, A. (2020). Stiff penalty awaits perpetrators of FGM practice- UNICEF, NOA warn. Retrieved from <https://www.vanguardngr.com/2020/12/stiff-penalty-awaits-perpetrators-of-fgm-practice-%e2%80%95-unicef-noa-warn/>.
- Carpenter, C., Boster, J. F. & Andrews, R. K. (2013). Functional Attitude Theory. In *The SAGE Handbook of Persuasion: Developments in Theory and Practice* (pp. 104-119). Sage Publications, Inc.
- CEDAW (1979). Elimination of all forms of discrimination against women, and women and children's rights. Retrieved from www.wacolnigeria.org/womenandchildren_right.doc.
- Chiedozie, I. (2017). Female genital mutilation not supported by Bible, QuranCleric. Retrieved from <http://punchng.com/female-genital-mutilation-not-supported-by-bible-quran-cleric/>.
- Daly, C. & Carson, M. (2016). End FGM Guardian Global Media Campaign Nigeria: 20 million women and girls have undergone FGM. Retrieved from <https://www.theguardian.com/society/2016/oct/11/fgm-nigeria-20-million-women-and-girls-undergone-female-genital-mutilation>.
- Daniel, D. (2015). 60% of families in Oyo still carry out female private part mutilation - Expert. Retrieved from <http://www.informationng.com/2015/02/60-of-families-in-oyo-still-carry-out-female-genital-mutilation-expert.html>.
- Demographic Health Survey (2015). Female Genital Mutilation: The Facts. Retrieved from www.path.org/files/FGM-The-Facts.htm.
- Ekwelie, S. A. (2005). *A master style guide*. Lagos: John Letterman Limited Publications.
- Espinosa, D. (2010). Gender roles in the media and debunking society's stereotypes: Glee as a pop-culture reflection. A capstone M.Sc. project submitted at the Winona State University, Winona-Minnesota, USA.
- Furrer, M. (2015). Magazine: A witness to FGM. Retrieved on 2/2/2016 from www.aljazeera.com/indepth/features/2015/06/magazine-witness-fgm-150629101956669.html.
- Guanah, S. J., Anho, E. J. & Nkala, A. (2020). Sustaining Cultural and Christian Values through Mass Media: A SelfAffirmative Discourse. *SAU Journal of Management and Social Sciences*, 5 (1): 186-197. Available at: www.sau.edu.ng/colmassjournal.
- Guanah, S. J. & Dalung, R. (2018). Media and Culture: The intersections and interventions. *Banchi: Nasarawa Journal of Theatre and Media Arts*. 5 (1): 224-245.
- Guanah, E. E. (2007). *A Short History of Kabowei Kingdom*. Lagos: MediaMix Communications Nigeria Ltd.
- Kanko, A. (2016). Memories of FGM: 'I was screaming in pain and fear'. Retrieved from www.aljazeera.com/indepth/features/2016/02/memories-fgm-screaming-pain-fear-160206072617469.html.
- Katz, D., Sarnoff, I., & McClintock, C. (1956). Ego-defense and attitude change. *Human Relations*, 9, 27-45.
- Laila, I. (2016). "I now fake orgasms"-Kemi Olunloyo recounts nightmare female circumcision ordeal. Retrieved from <http://www.lailasblog.com/2016/10/i-used-diapers-and-bled-for-week-kemi.html?m=1>.
- Lindaikojisblog (2015). Gambia bans female genital mutilation (FGM). Retrieved from [www.lindaikojisblog.com/2015/11/gambiabansfemalegenitalmutilation.html?utm_source=feedburner&utm_medium=feed&utm_campaign=Feed%3A+blogspot/OqshX+\(Welcome+to+Linda+Ikeji%27s+Blog\)&m=1](http://www.lindaikojisblog.com/2015/11/gambiabansfemalegenitalmutilation.html?utm_source=feedburner&utm_medium=feed&utm_campaign=Feed%3A+blogspot/OqshX+(Welcome+to+Linda+Ikeji%27s+Blog)&m=1).
- MacBride, S. & Abel, A. (1981). *Many voices, one world*. Ibadan: Ibadan University Press
- Naij.com (2016). Genital mutilation in KenyaCulprits and victims speak. Retrieved from <https://www.naij.com/631589-confession-cut-girls-put-hands-mouths-photos.html>.
- Naijaloaded (2016). I caught my fiancée with sex toys a week to our wedding – Man cries out. Retrieved from <http://www.naijaloaded.com.ng/2016/02/06/i-caught-my-fiancee-with-sex-toys-a-week-to-our-wedding-man-cries-out/>.

- National Population Commission (2010). 2006 Population and Housing Census Priority Table Volume IV: Population distribution by Age & Sex (State & Local Government Area). Abuja, Nigeria: National Population Commission.
- Nzegbulam, Z. O. (2006). Social and industrial psychology in perspective. Enugu: Rhyce Kerex Publishers.
- Nwodu, L. C. (2008). Securing the future: An empirical examination of the influence of "Zip Up" campaign on students' sexual behaviour. *The Nigerian Journal of communications*, 6 (1&2) :1-27.
- Obarisiagbon, I. E. & Obarisiagbon, I. A. (2016). The role of mass media and law in the eradication of female genital mutilation in Edo State. Retrieved from http://www.unimaid.edu.ng/oer/Journals_oer/Social/General/Paper%20D%205.pdf.
- Ogundipe, S. (2019). Nigeria living with dying practice of female circumcision. Retrieved from <https://www.vanguardngr.com/2019/03/nigeria-living-with-dying-practice-of-female-circumcision-2/>.
- Okonofua, F. E. (2000). Female genital mutilation in Nigeria: Dispelling the myths and building coalitions. A paper presented at the School of Medicine, University of Benin, Benin City. Edo State. September, 5th.
- Owuamalam, E. (2012). Data analysis & research project writing. Owerri: Top Class Agencies Ltd.
- Oyibo, E. (2021). How female genital mutilation promotes promiscuity. Retrieved from <https://thenewsguru.com/news/how-female-genital-mutilation-promotes-promiscuity/>.
- Premium Times (2018). Group calls for laws in Nigeria against female genital mutilation. Retrieved from <https://www.premiumtimesng.com/news/top-news/234862-group-calls-laws-nigeria-female-genital-mutilation.html>.
- Punch (2016). Australia convicts two persons for female circumcision. Retrieved from <http://punchng.com/australia-convicts-two-persons-for-female-circumcision/>.
- Rifai, R. (2015). Gambia bans female genital mutilation. Retrieved from www.aljazeera.com/news/2015/11/ga-mpiabansfemalegenital-mutilation151125151025550.html.
- Taire, M. & Ajumobi, F. (2021). FEMALE CIRCUMCISION NIGHTMARE: 'My sister bled to death after we were brutally cut' Retrieved from <https://www.vanguardngr.com/2021/02/female-circumcision-nightmare-my-sister-bled-to-death-after-we-were-brutally-cut/>.
- Thisday (2016). Breaking the culture of female circumcision. Retrieved from <http://www.thisdaylive.com/articles/breaking-the-culture-of-female-circumcision/222126/>.
- United Nations Children's Fund - UNICEF (2004). Child Protection against FGM. Retrieved from data.unicef.org/child-protection/fgmc.html.
- United States Agency for International Development - USAID (2012). Female Genital Mutilation/Cutting. Retrieved from www.usaid.gov/news-information/fact-shets/female-genital-mutilation-cutting-usg-response.
- United States Department of States (2015). Female Genital Mutilation on the Rise in the US. Retrieved from europe.newswatch.com/fgm-rates-have-doubled-us-2004-304773?rm=eu.
- Vanguard (2021). FGM is violation of human rights of women, say stakeholders. Retrieved from <https://www.vanguardngr.com/2021/02/fgm-is-violation-of-human-rights-of-women-say-stakeholders/>.
- Vanguard (2020a). Female Genital Mutilation cost economies \$1.4bn –WHO. Retrieved from <https://www.vanguardngr.com/2020/02/female-genital-mutilation-cost-economies-1-4bn-%e2%80%95who/>.
- Vanguard (2020b). Sudan criminalises female genital mutilation (FGM). Retrieved from <https://www.vanguardngr.com/2020/05/sudan-criminalises-female-genital-mutilation-fgm/>.
- World Health Organisation WHO (1997). Female Genital Mutilation. Retrieved from www.who.int/mediacentre/factsheets/fs241/en/.