

# **Women Who Study in Madrasah School Experienced Higher Number of Female Circumcision Compared to Western or English Schools**

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## **ABSTRACT**

Female circumcision refers to the procedures that intentionally alter or cause injury to the female external genital organs. The reasons for doing this vary but it is commonly observed in places where Muslims predominate. The study is intended to determine: 1) the rate of females who had undergone female circumcision in Madrasah School compared to those who went to English schools, 2) the prevalence rate of female circumcision among Meranaos, and 3) the practices and experiences of women who have undergone FC. The study utilized a combination of quantitative and qualitative methods using a designed questionnaire, interview and focus group discussions with the respondents. The results showed that more girls who were studying in Madrasah have undergone this practice compared to the number of girls who are in Western or English schools. It also showed that the prevalence rate of this practice is indeed high in the rural areas, which is 86%. The practice of FC is performed either during Fridays, Holidays or Mondays and Thursdays. Each mentioned day has meanings and there are certain procedures and instructions being followed in doing the practice. In conclusion, religious justification remains the strong reason why FC is still rampantly performed in the different rural areas of Lanao del Sur, Philippines.

**Keywords** — Sociology, female circumcision, functionalities, qualitative research, quantitative research, Lanao del Sur, Philippines

## INTRODUCTION

In the Philippines, Female Circumcision (FC) is known to take place particularly among Muslim women of the Yakan tribes in Basilan (Calsalin, 2008). Although no study has yet been published about the practice of FC among the Meranao in Southern Philippines, conversations with many adults in the area have confirmed the occurrence of FC. The practice of circumcision among some of the female minorities in the Southern Philippines has been considered a taboo subject partly because of the conservative culture of the locals especially when it comes to sensitive parts of a female's body.

The practice of FC or popularly known as Female Genital Mutilation (FGM) went unnoticed except for recognition of its cultural value to various communities where it is being practiced. Recently, the practice has attracted the attention of many individuals, agencies, institutions, leaders, educators, health workers and many other people coming from different sectors of society as a public health issue within the context of Reproductive Health due to the complications that are known to be precipitated by the practice (WHO, 2013). Additionally, this practice has been one of the concerns of many researchers as many people think that it is against human rights since those affected children are innocent; they cannot understand the nature and basis of this practice and may even consider it as a traumatic experience.

In the broad context of reproductive health, FGM or FC, which is then term used in the study, is a literal translation from the Meranao term "*Turi*," which is the collective name given to several traditional practices that involve the cutting of female genitals. Unlike male circumcision, which reduces the risk of heterosexually acquired HIV infection in men by approximately 60% (WHO, 2013), female circumcision has no known health benefits.

According to WHO (2001), an estimated of 100-140 million women and young girls in the world have undergone some forms of female genital mutilation. This practice affects far more women than previously thought. Recent analysis revealed that some three million girls and women are cut each year in the African continent (Sub-Saharan Africa, Egypt, and Sudan). This is also prevalent in some countries in Asia and the Middle East and among certain immigrant communities in North America and Europe, certain immigrant communities in North America and Europe (UNICEF, 2009).

In the Philippines, there is no data showing the number of females who had undergone female circumcision as well as the number of children who are at risk of undergoing the procedure. However, there is a study about the performance of female circumcision among the Yakan (Calsalin, 2008), which states that in the Philippines, female circumcision is also being carried out by the Yakan tribe of Basilan. Results showed that all respondents have common beliefs regarding female circumcision including cleanliness reason, dignity, honor, and religious duty. They also believe that this practice should be done because it is stated in the hadith (words of Mohammad S.A.W), written in one of the ayahs (pages) of the Holy *Quran*. Female circumcision for them is obligatory since it is Sunnah (the way the prophet lived it) to practice it, with the Holy *Quran* as their basis. In performing female circumcision, the Yakan tribe practiced the scraping technique using a non-pointed knife. This technique employs scraping *labia majora* until it becomes erythematous or inflamed; however, the labia majora should not bleed. A *tawal* (whispered prayer) is uttered to the child which marks the end of the practice. However, this finding was contrary to the ideas of many Muslim leaders as accordingly, the interpretation pertaining to the *Sunnah* of the prophet was not true since what is written in the *Sunnah* is only the cleansing of a female body part. Indeed, it is not mentioned in the *Sunnah* if the female's genital organ should be circumcised or mutilated.

Additionally, many Muslim leaders have condemned this practice. This is often erroneously linked to Islam and is practiced in some communities where Islam predominates. Some Muslims consider that Islam demands the practice to ensure spiritual purity, although many Islamic scholars disagree with this stating that female circumcision is not mentioned in the *Qur'an*. However, it is clearly a ritual practice that predates the Prophet Mohammad and Islamic religion.

Although Meranaos are often perceived as a cultural society that supports FC generally as a practice, there appears to be lack of studies that explore the impact of FC on social context on Meranao attitudes toward the practice. Moreover, the educational aspect of this group of people must also be considered to determine its influence to the performance of this practice. Indeed, through education, this group of people may understand the nature and consequence of this practice. Against this background, this paper aimed to explore the nature of this practice, the procedures that were being followed, the beliefs and practices underlying it, the perceptions of Muslim religious personages about the practice, the perceptions of Meranao males about the practice of female circumcision, and the experiences of Meranao females who have undergone the procedure and complications they

have experienced. In addition, the implications of this practice to the physical, social, psychological, sexual and spiritual aspects are included in the study.

## **FRAMEWORK**

An important theory that has influenced this paper is the Functionalism theory of Durkheim (1960), which interprets each part of the society in terms of how it contributes to the stability of the whole society. According to the functionalist perspective of sociology, each aspect of society is interdependent and contributes to society's stability and functions as a whole. Functionalism, (or structural functionalism) is the perspective in sociology according to which society consists of different but related parts, each of which serves a particular purpose (Crossman, n.d.). From this perspective, disorganization in the system, such as deviant behavior, leads to change because societal components must adjust to achieve stability. When one part of the system is not working or is dysfunctional, it affects all other parts and creates social problems, which eventually lead to social change.

## **OBJECTIVES OF THE STUDY**

The study aimed to determine: 1) the rate of the girls who had undergone female circumcision in Madrasah School compared to those who went to English schools, 2) the prevalence rate of female circumcision among Meranaos, 3) the procedures being followed in doing the practice, and 4) the experiences of females who have undergone the procedure.

## **METHODOLOGY**

### **Research Design**

The study utilized two approaches, namely, quantitative and qualitative methods. The type of data that these methods generated were field notes, transcripts, audio and video recordings. The in-depth interview is useful when sensitive topics such as female circumcision are being explored. Focus group discussions using open-ended and semi-structured questions were used to elicit data on the procedures being followed in performing female circumcision and the experiences of women who have undergone the procedure. The important points

relating to answering the research questions were grouped together and those that carried similar information were grouped differently. The information obtained from the interview questions were used to formulate themes that were used in subsequent data analysis. Lastly, direct observation as a qualitative method of collecting data to gain a more detached perspective of the procedure so as not to bias the observation.

The researcher did not set out to develop a theory about female circumcision, prove or disprove a certain theory about female circumcision. Rather the research was primarily descriptive in nature, with the researcher having an open mind as to what conclusions may be drawn based on data gathered and facts gleaned. While the study is mainly descriptive, certain inferences based on nuances in how the respondents answered the questions, were also utilized to draw conclusions about the research topic.

### **Participants and Settings**

The province of Lanao del Sur is located in the central part of Southern Philippines. This province is located in the Autonomous Region in Muslim Mindanao (ARMM) divided into two districts, the first district and second district. Each district composes different municipalities and almost 100% of the population are Meranaos. The municipalities that served as the settings of the study were Lumbatan, Lumbayanague, and Dumalondong. Six local communities from these municipalities were selected where sample respondents were drawn. These municipalities are geographically located in the hinterlands of the province of Lanao del Sur, Southeast of Lake Lanao and farthest from the capital, Marawi City. Hence, the viewpoints of the residents through the respondents in the study may be considered typical of traditional Meranao culture and religious beliefs. Purposive sampling method was used in selecting the 30 females who have undergone circumcision. In determining the prevalence rate of female circumcision, a total number of population of girls 15 years and above from the six local municipalities was determined and a survey was done to know their involvement in the said practice.

Cormack and Benton (2000) suggest that qualitative researchers use a small selective sample, because of the in-depth nature of the study and the analysis of data required. As the researcher intends to acquire a purposive sample, there were some inclusion criteria. For the females, regardless of their educational attainment and marital status, they must have finished the entire ceremony of female circumcision and must be 15 years old and above. All the respondents must

belong to the Meranao tribe and must be residents of Lanao del Sur. Exclusion criteria are those female who refused to be interviewed and those who cannot remember the experience of undergoing the procedure. To test the validity of the research instrument, pilot study was conducted to individuals who were not part of the study but share similar characteristics.

### **Data Collection**

Frequency and percentage were used in the presentation and analysis of the data. The qualitative aspect of the study on the other hand, required one-on-one in-depth interviews, using open-ended questions that inquired about the bases of the respondents in selecting answers to each question. Another round of focus group discussions for the female was also done. This was done to validate their answers and avoid errors in interpretation by the researcher. To avoid misquoting or misinterpreting the responses of the participants, the final transcripts of the interviews were repeated to them in the local *Meranao* dialect for final validation.

### **Ethics Protocol**

The study used informed consent from the respondents and applied confidentiality of information. There were letters of permission personally handed to superiors/leaders in the gathering of data. For minors, permission was secured from their parents. As for the adults, their consent to be involved in the research was considered adequate.

### **Data analysis**

Descriptive statistics (frequencies and percentages) were used to describe the rate of the girls who had undergone female circumcision and who attended Madrasah School compared to those who went to English schools and the prevalence rate of female circumcision among Meranaos. Data analysis on the qualitative component of the study was based on the responses gathered after the distribution of the questionnaires and structured interviews.

## RESULTS AND DISCUSSION

Table 1. Frequency and Percentage Distribution of female Respondents in terms of type of Education Attended

Females	F	%
Madrasah Educated		
Elementary	26	86.6
High school	2	6.6
Subtotal	28	93.3
English Educated	2	6.6
Total	30	100

The data give credence to the assumption in this study pertaining to female circumcision being more common to females who have attained a Madrasah education than those who have obtained education with Western influence.

Statistics about the number of girls circumcised in the different municipalities of Lanao del Sur every year are very hard to access. This is because there are no records on the numbers of girls circumcised by the *Manunuris*. In most cases, this practice is done in rural areas with poor accessibility and also because it is conducted under cover. This study is the first attempt in investigating the number of FC cases in the study setting. In Africa, particularly in Kisii and Kurias communities, the prevalence rate of FGM is very high which is 96% (Oloo, Wanjiru, & Newell-Jones, n.d.).

Information revealed that the prevalence rate of female circumcision in the different municipalities of Lanao del Sur is 86.8%. The information further revealed that in the year 2013 in Lumbatan, 453 females out of a total of 505, 89.6% were circumcised. On the other hand, in Lumbayanague, 331 (87.9%) out of a total of 377 girls (87.79%) were circumcised while in Dumalondong, 519 (83.8%) girls were circumcised out of 619 girls. It also disclosed that 86.85 of all women in the three municipalities in Lanao del Sur were circumcised. Gele, Bo and Sundby (2013) found out that 97% of their study participants had experienced female circumcision with no age difference.

To determine the respondents' practices related to female circumcision (FC), the researcher needs to know how the procedure was being conducted; the procedure refers to the steps followed when the process of female circumcision is done on young girls. Majority of the *Manunuris* (73.3%) practice the Type 1a (as

classified by WHO) wherein a needle is used to prick the clitoris and subsequently, removing a small portion of the clitoral tissue, which is believed to be the source of sexual pleasure for women. Pricking and the removal of some clitoral tissues last for approximately five minutes while for Type 1V (pricking of the clitoris), the process lasts roughly three minutes. The other 8 (26.6%) *Manunuris* practice simple pricking of the clitoris and making it bleed. In Egypt, the prevailing pattern of female genital mutilation is partial or total removal of the clitoris and is usually connected to entering adulthood to young girls becoming grownups (El hadi, 2000). According to UNICEF (2009), girls' and women's perception about FGM differ widely across countries in which the highest level of support can be found in Gambia, Guinea, Egypt, Mali, Sierra Leone and Somalia where more than half of the female population thinks the practice should continue.

### **The Practices of Female Circumcision Among Meranaos**

The information and analysis on the practices of the respondents on FC was based on the interviews and discussions with the women respondents who were circumcised. Some of the respondents said that the best day to perform female circumcision varies depending on the preference of the individual Manunuri. Five of the respondents believed that it is better to perform circumcision to a girl during Friday which is a holy day for Muslims and right after she leaves the mosque for the Friday prayer congregation since she is still considered 'clean' and, thus, this will earn the girl more blessings from Allah.

However, half of the respondents were not certain if Friday is the best day to perform circumcision. They suggested that the best day is during Muslim holy days like Eid'l Fitr or Eid'l Adha. According to them, there is no preferred day of doing the practice and what is more important is the comfort of the Manunuri and the child's mother. It is important to note that half of the respondents believed that it is better to perform circumcision to girls during Mondays or Thursdays because these days are considered 'soft' days. Monday is believed to be the start of a productive week and Thursday serves as the transition day from being busy to relaxation period. Hence, choosing these days are symbolic, Monday which implies that performing circumcision means starting to instill Islam as religion to the child and Thursday means ending the bad behavior.

The whole process starts when the girl together with her parents or close relatives arrive at the designated place either in the house of the *Manunuri* (the one who performs female circumcision) or in the girl's house. According to the 30 women respondents who were circumcised, the girl should be bathed or

washed in a ritual cleansing before the procedure takes place to purify her. The *Manunuri* pours water onto the girl's head while uttering a prayer "Peace be upon you, oh pure water, you are indeed pure. Purify the body and soul of (name of the girl) as she is leaving a misguided religion and entering the religion of Prophet Mohammad which is Islam". The girl is instructed to drink the running water that was poured onto her head. After the prayer, the *Manunuri* asks the child to answer her questions, "Do you want to embrace the Islam way of Life?" Do you promise to abandon all your bad deeds and promise to enter into a religion that will save you from doing any harm?" These questions are asked thrice to which the girl must give an affirmative answer each time. The *Manunuri* then prays for blessings of Allah on the girl.

After taking a bath and doing ablution (a special spiritual purification done by washing the face, arms, feet, and by wiping the head with water), the child is required to wear a clean dress preferably her most beautiful dress. Many of the respondents said that *Landap* (a *Meranao* hand-woven clothe) could be worn if available since the procedure signifies marrying the girl-child to her religion, thus, instilling loyalty and faithfulness on the child.

The process of ritual cleansing varies depending on the individual *Manunuri*. Majority of the female who participated in the study claimed that the girl should be bathed and should perform ablution before she is considered 'pure' for circumcision. Only few who mentioned that there is no need for the child to perform ablution since the child is considered clean already after taking a bath. This gives an impression that among the *Meranaos*, spiritual purification is more important than physical hygiene in performing FC. Oloo, Wanjiru and Newell-Jones (n.d.) mentioned that the need to control a woman's sexual desire before marriage was reported to be another reason for the practice.

According to Abusharaf (2013), women in Sudan often express their fears of divorce and psychological punishment from their husbands if they are not circumcised or circumcised after delivery. Some participants (88%) of Asekun-Olarinmoye and Amusan (2008) mentioned traditional excisors as operators of the procedure or the one doing the procedure, while 7.8% revealed health workers as the perpetrators of the this practice. Complications that were identified to be related to FGM were different types of infections including UTIs, genitourinary tract infections, abscess formation and septicemia or even HIV infection (Iavazzo, Sardi, & Gkegkes, 2013).

The following are the materials used that were mentioned by the respondents:

- 1) a clean piece of cloth spread on the floor or mattress for the girl to lie down on;
- 2) a needle used as the cutting/piercing object;
- 3) a bag of rice to be given to the

*Manunuri* as a gift; and 4) a cotton to apply pressure to the pierced area after the procedure. The needle used during the procedure will not be used for other girls who will also undergo the same procedure, but this should not be thrown away and should be kept for future purposes such as in sewing clothes. This indicates that the respondents had knowledge- deficiency in terms of the transmission of blood-borne diseases like Hepatitis.

At least two people must be present during the procedure who will serve as witnesses and human restraints at the same time. These people will hold the girl's arms and feet to avoid unnecessary movements. When all the materials are ready, the ceremony starts. The girl is made to lie down on the mattress with her arms and legs restrained by the witnesses. According to Mackie (2000), female circumcision is usually initiated and arranged by the girl's family, mostly by the mother and close female relatives, and it happens between shortly after infancy to before the onset of puberty and is rarely, on the eve of marriage or after birth of the first child.

The *Manunuri* who performs the work sits in front of the girl and starts the procedure either by pricking the clitoris and making it bleed or by pricking and removing some tissues of the clitoris. Direct pressure using cotton is then applied on the bleeding area. A prayer is uttered to the right ear of the child after the procedure for good luck and to remind her of the significance of undergoing the procedure and that is, the girl is now married to her religion and ready for her role in society. Instructions are given to the parents of the child regarding what activities are needed to be avoided like making the girl stay indoors for 3 days to prevent her from stepping on 'unclean' or filthy substances like animal dung or feces. This is believed to keep the girl pure and to prevent 'evil' from entering her body. One of the women respondents said, "I was not allowed to go out for 3 days for fear that evil may enter my body as I was in a state where evil is attracted to blood."

There are two effects of FC as mentioned by the female respondents, positive and negative effects. The positive responses that were mentioned were chastity, obedience, faithfulness and being conservative. They also mentioned increased confidence in dealing with other people in the community and being active in the different social activities. The negative consequences were bleeding, infection, pain and urinary tract infection. According to Shell-Duncan and Hernlund (2000), female genital mutilation may cause scar formation that may contribute to obstructed labor and hemorrhage that may result from tearing of scar tissue. In Somalia, there is the continuation of support for the performance of type I circumcision as it is claimed not to be detrimental to women's' health, while

there is a quite large rejection of Pharaonic circumcision which is referring to the removal of clitoris and labia minora while the labia majora is sewn closed and leaving a small opening for urination and release of menstrual blood (Dawood, 2005).

## CONCLUSION

In conclusion, female circumcision (FC) is rampantly being practiced especially in the rural and marginalized areas in Lanao del Sur as shown by the prevalence rate (86%) of FC in the Municipalities of Lumbatan, Lumbayanague and Sultan Dumalondong. More girls who are studying in Madrasah (Arabic education) had undergone female circumcision compared to girls who are in western education. This implies that FC is perceived as a practice with religious justification.

Circumcised *Meranao* women with ages ranging from 15 years old and above, mostly married, and with all of them having been educated in the Madrasah were also chosen as respondents of the study. The female respondents explained the practice of female circumcision based on their experiences. They have different views and meanings concerning the preferred day in performing FC. A procedure is being followed in doing the practice making it a symbolic activity of letting the girl be married to her religion, which emblemizes establishment of commitment and faithfulness to Islam. Despite the fact that the respondents knew the consequences of FC, religious beliefs serve as their main reason for undergoing FC.

## TRANSLATIONAL RESEARCH

Topics relating to female circumcision may be integrated into the values education subject of pupils during the elementary and secondary years. Additionally, as shown by the fact that majority of the women respondents have all been educated in the Madrasah, the topic relating to FC be integrated into the subjects being undertaken in the Madrasah. Educators, religious leaders, health workers may help educate the public about the issue on FC and its stand in Islamic perspective. Education will be the starting point towards the elimination of the practice. Through education, the public will be empowered to educate others in matters relating to FC. Female religious leaders may need to include in their teachings the Islamic views pertaining to FC, as this is the most considered justification why this practice is still rampantly occurring in the rural areas.

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