Perceived Effects of Female Genital Mutilation on Gender Sports Participation and Performance: Implications to Sports Administration and Management in Nigeria

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Abstract: The purpose of this study was to find out the perceived effects of FGM (female genital mutilation) on gender sports performance: implications to sports administration and management in Nigeria. A total of 250 purposively selected regular female athletes from five Nigerian universities (two federal universities, two state universities and one private university), in the south-East Geopolitical zone of the country. A self structured questionnaire with reliability value of 0.73. The test-retest method was used for data collection. Data collected were subjected to descriptive statistics of frequency, percentage and Chi-square inferential statistics at 0.05 level of significance. Findings revealed that majority perceived FGM as harmful and detrimental to excellent sports performance, administration and management. Based on the result of the study, it was therefore recommended that government should design programmes aimed at improving the education of the girl-child as this has been identified as one of the factors which will help to change the attitude of mothers towards the practice of FGM.

Key words: Girl-child, female off-springs, female genital mutilation, female genital cutting, retention of urine and menses.

1. Introduction

The practice of FGM (female genital mutilation) is a socio-cultural orientation of traditional Nigerian parents which influences their perception and attitude towards the dispensation of FGM. World Health Organization [1] defined FGM as comprising all procedures involving partial or total injuries done to the female genital organ either for cultural or other non-therapeutic reasons. Furthermore, United Nations International Children’s Emergency Funds [2], stated that FGM is one of the most serious form of violence against the girl-child/women, which is practiced in many parts of Africa including Nigeria for psycho-sexual, sociological, hygienic/aesthetics reasons. In order to further expose the horror associated with the obnoxious practice [3] classified FGM practice into 3 categories namely: category 1: they referred to as Clitoridectomy a situation where the hood of the virgina and clitoris are removed completely; with category 2: as a scenario where the clitoris together with the part of the labia minora are removed; while the 3rd category: they described as infibulations which means the removal of the clitoris, labia minora and labia majora.

The consequences of this practice are complications such as agonizing pains, haemorrhage, shock, tetanus infection, urinary tract infection, urine retention, HIV infection, fractures of the pelvic bone possible dislocation of the hip-joint [4]. Furthermore, Toubia [5] highlighted other possible long-term effects and
There have been several efforts geared towards eradicating the practice, yet it seemed to have persisted, which is blamed on attitudinal constraints, hence according to Harrison [17] forcing eradication of the practice through legislation will ever remain counter-productive, but rather suggested the use of formal education to eradicate the practice.

Furthermore, Alagbu et al. [18-19] affirmed that women’s level of education is the single most important influence on the survival rate and school achievement of their children that failure to improve women’s access to education limits family income and impedes the wellbeing of their families. This may be why Caldwell et al. [20-23] emphasize that the practice subsists and continues to survive because culturally the people perceive it as beneficial to them.

This study therefore intends to further make the up-coming mothers-to-be, perceive the dangers inherent in female genital mutilation and possible relationship between the practice and poor female sports performance. Hence having considered the wide practice of FGM, in Nigeria, this study intend to establish that the FGM practice may be responsible for low level female participation in sports thereby resulting in the difficulties experienced by coaches and other sports stakeholders in the process of administering sports in Nigeria [24].

2. Method and Procedure

The purposive sampling technique was used to select 250 regular female athletes from the five universities in the south-east geopolitical zone of Nigeria. Namely UNN (University of Nigeria Nsukka), UNIZIK (Nnamdi Azikiwe University, Awka), ANSU (Anambra State University, Uli), ESUT (Enugu State University of technology) and Madonna University Okija (private university).

A well structured questionnaire with a reliability test of 0.73 which was designed in line with the Likert scale was used for data collection. The questionnaire has two sections (A & B) section A was on
demographic data of the respondents. While section B included questions regarding their PEFGMGSPP (perception of the effects of Female Genital Mutilation on gender Sports Participation and Performance Tagged).

3. Data Analysis

Data collected from the research were coded and analyzed using the descriptive statistics of simple percentages as well as Chi-Square Inferential (Statistics inferences were made at 0.05 level, of significance).

4. Results and Discussion

The result of the research are presented in Tables 1-3 below.

Table 1 shows that 157 (62.8%) and 23 (9.2%) strongly agreed and agreed respectively with the statement that FGM is part of the ancient cultural heritage of their people; while 45 (18.0%) and 25 (10.0%) disagreed and strongly disagreed with the statement that FGM is part of the cultural heritage of their people. Equally, 129 (51.6%) and 73 (29.2%) respondents strongly agreed and agreed respectively with the statement that FGM is a bad ancient culture of their people which completes ones initiation into womanhood, while 25 (10.0%) and 23 (9.2%) disagreed and strongly disagreed. Furthermore, 112 (44.8%) and 55 (22.0%) strongly agreed and agreed respectively with the statement that due to its crude and obnoxious operational procedure they consider FGM harmful to the girl-child; while 39 (15.6%) and 44 (17.6%) disagreed and strongly disagreed respectively with the statement that FGM is harmful to the girl-child.

The calculated Chi-square value of 47.82 was greater than the table value of 12.59 at 0.05/alpha level of significance hence the hypothesis which states that the regular female university athletes will not be significantly aware of the effects of FGM on the girl-child was rejected.

This result corroborates the statement made by Harrison [17] when he asserted that forcing eradication of the FGM practice through legislation would ever remain counter-productive, but rather suggested the use of formal education. In confirmation of this Statement made by Harrison [17] that FGM can only be eradicated through education of the girl-Child, may be the reason why all the respondents (female undergraduates) in this study, vowed that whenever they get married and have female children, they will never allow them to undergo FGM, which implies that through education, the perception of these female undergraduates have been changed.

Table 1  Analysis of respondents perception of what FGM implies.

<table>
<thead>
<tr>
<th>Item</th>
<th>SA %</th>
<th>A %</th>
<th>D %</th>
<th>SD %</th>
<th>Df</th>
<th>X²tab</th>
<th>X²cal</th>
<th>Decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>FGM is a part of the cultural heritage of my people</td>
<td>157</td>
<td>12.8</td>
<td>23</td>
<td>9.2</td>
<td>45</td>
<td>18.0</td>
<td>25</td>
<td>10.0</td>
</tr>
<tr>
<td>FGM is a bad ancient culture of my people that complete the</td>
<td>129</td>
<td>51.6</td>
<td>73</td>
<td>29.2</td>
<td>25</td>
<td>10.0</td>
<td>23</td>
<td>9.2</td>
</tr>
<tr>
<td>Due to its crude and obnoxious operational procedure, I believe</td>
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</tbody>
</table>
| Table 2  Analysis of data on the felt implication of FGM on the girl-child’s ability to perform regular home or domestic chores/activities.

<table>
<thead>
<tr>
<th>Item</th>
<th>SA %</th>
<th>A %</th>
<th>D %</th>
<th>SD %</th>
<th>Df</th>
<th>X²tab</th>
<th>X²cal</th>
<th>Decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>FGM as a practice which results in profuse/heavy loss of blood by</td>
<td>153</td>
<td>61.2</td>
<td>27</td>
<td>10.8</td>
<td>40</td>
<td>16.0</td>
<td>30</td>
<td>12.0</td>
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<tr>
<td>the girl-child thereby making her very weak to perform certain</td>
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<tr>
<td>Some of the long term effect of FGM is retention of urine and</td>
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<tr>
<td>menstrual flow a medical condition known as haematocopoulos.</td>
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<tr>
<td>FGM according to medical experts can cause tetanus infection to the</td>
<td>111</td>
<td>44.4</td>
<td>57</td>
<td>22.8</td>
<td>37</td>
<td>15.6</td>
<td>45</td>
<td>18.0</td>
</tr>
<tr>
<td>girl-child/women.</td>
<td></td>
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</tbody>
</table>
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Table 3 Analysis of the importance of FGM on female sports optimal performance thereby creating administrative problems for the coaches/sports managers.

<table>
<thead>
<tr>
<th>Item</th>
<th>SA %</th>
<th>A %</th>
<th>D %</th>
<th>SD %</th>
<th>Df</th>
<th>X^2tab</th>
<th>X^2cal</th>
<th>Decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>FGM which may results to dislocation of the hip joint could hinder optimal sports performance</td>
<td>151</td>
<td>60.4</td>
<td>29</td>
<td>11.6</td>
<td>39</td>
<td>13.6</td>
<td>31</td>
<td>12.4</td>
</tr>
<tr>
<td>FGM practice which could cause painful menstruation can hinder a girl from excellent sports performance and participation Due to the health condition emanating from FGM victims are frequently absent from school/sports training/exercises participation.</td>
<td>121</td>
<td>48.4</td>
<td>81</td>
<td>32.4</td>
<td>19</td>
<td>7.6</td>
<td>29</td>
<td>11.6</td>
</tr>
<tr>
<td></td>
<td>100</td>
<td>40.0</td>
<td>59</td>
<td>23.6</td>
<td>35</td>
<td>14.0</td>
<td>47</td>
<td>18.8</td>
</tr>
</tbody>
</table>

Table 2 shows that 153 (61.2%) and 27 (10.8%) respondents strongly agreed and agreed respectively with the statement that FGM operational process results in profuse/heavy loss of blood haemorrhage which consequently makes the girl-child weak to perform some home chores/activities. Furthermore, 123 (49.2%) and 79 (31.6%) of the respondents strongly agreed and agreed with the statement that FGM as a practice results in retention of urine/menses (haematocopos) in the girl-child making her too weak to perform any vigorous activity at home. While 111 (44.4%) and 57 (22.8%) of the respondents strongly agreed and disagreed respectively with the statement that FGM can serve as a medium through which tetanus could enter into the body of the girl-child.

The calculated Chi-square value of 44.59 was greater than the table value of 12.59 at 0.05 level of significance. Therefore the hypothesis which states that FGM will not have any adverse effect on the female’s ability to perform physical activities was rejected. This therefore implies that FGM as a practice results in profuse loss of blood, possible retention of urine/menses and tetanus infection all of which could make the victim too weak to perform optimally in some assigned home chores (physical activities).

This finding therefore supports the report of (4) who submits that FGM could result to medical conditions such as haemorhage, agonizing pains, shock, possible tetanus infection, urinary track infection, urine retention, HIV infection and possible fracture of the pelvic bone or dislocation of the hip joint of the victim (the girl-child). Invariably any child who suffers any one or two of these medical conditions will be physically incapacitated.

Table 3 above shows that 151 (60.4%) and 29 (11.6%) respondents strongly agreed and agreed respectively with the statement that FGM which may cause dislocation of the hip joint could hinder a girl’s optimal sports performance and participation. 121 (48.4%) and 81 (32.4%) respondents strongly agreed and agreed respectively with the statement that FGM could cause painful menstruation much later in life which can hinder a girl from excellent sport performance and participation. While 100 (40.0%) and 5 (23.6%) respondents strongly agree and agreed respectively with the statement that due to the numerous past health problems associated with FGM victims are frequently absent from school and sports trainings/practices, thereby creating administrative problems for the coaches and other sports managers involved in female sports programmes.

The findings and results from this table therefore supports Alagbu [7] who cited the health status of the girl-child as one of the major reasons why parents would always prevent (disallow) their female off-springs from participating in sports in the secondary school, which inadvertently creates administrative problems for the coaches and other sports administrators handling female sports.

5. Conclusion

Based on the findings of this research study, it could be concluded that respondents were becoming better informed about the horrible evil effects of FGM, which is an aspect of the culture of our people that must be rooted out through proper/formal education of the girl-child, so that they don’t hand-down such practice/culture to their off-springs thereby eradicating
the practice eventually. This study also succeeded in making these up-coming educated mothers-to-be, perceive FGM as a dangerous aspect of our Nigerian cultural practice and heritage that must be discarded. I equally succeeded in beaming a searchlight on the possible poor sports performance of Nigerian female athletes over the years.

6. Recommendations

Based on the results of this research, the following recommendations were made:

Health educators, government and non-governmental agencies working on the eradication of FGM should focus more on changing the attitude of young girls (mothers/parents-to-be) by encouraging them to resist any influence by significant others to perpetuate FGM on their daughters when they start having children, as emphasized by World Health Organization [25].

School curriculum designers should endeavor to include topics on FGM and its health consequences in health education curriculum for primary/secondary/tertiary institutions as a way of empowering potential mothers or parents, to make informed choices/decisions on issues concerning FGM, with reference to suggestions in Population Reference Bureau [26].

The government and community leaders should design programmes to improve the education of the girl-child as this has been identified as one of the factors which will help to change the attitude of mothers-to-be-, towards the practice of FGM, as contained in the report of United Nations Population Fund [27].

The present/future female legislators in the States and National Assemblies should propose stricter bills that will aim at ending such evil practice against the girl-child in Nigeria.

References


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