**Didee Publications International Journal, Vol. 1, Issue 4, May 2026.pp. 591-610**

ISSN 3121- 7974

# Factors Influencing Continuation of Female Genital Mutilation among Women of Reproductive Age in Ebonyi State, Nigeria

**Okafor Chinedu Lebechi**

**Department of Human Kinetics and Health Education, Enugu State University of Science and Technology**

## Abstract

Female Genital Mutilation (FGM) remains a significant public health concern in Nigeria, particularly in Ebonyi State, where cultural beliefs and socioeconomic factors perpetuate the practice. This study investigated factors influencing the continuation of FGM among women of reproductive age in Ebonyi State. This cross-sectional study surveyed 422 women aged 15-49 years, examining demographic, sociocultural, and economic determinants influencing FGM awareness, perception, and utilization of prevention services. Data analysis using SPSS at 0.05 level of significance revealed significant associations between age, education, cultural beliefs, family influence, income, and distance to healthcare with FGM practices. Predictors of FGM continuation included low education, cultural beliefs supporting FGM, and low income. The findings underscore the complex interplay of factors driving FGM in Ebonyi State, highlighting the need for targeted interventions addressing cultural norms, improving access to education and healthcare, and promoting community engagement to reduce FGM prevalence and promote women's health and rights. The study provides valuable insights for policymakers, healthcare providers, and communities to develop effective strategies against FGM.

**Keywords**: Female Genital Mutilation, FGM, Ebonyi State, cultural beliefs, education, healthcare access, women's health.

## Introduction

Female Genital Mutilation (FGM) is a deeply rooted practice in many parts of the world, particularly in Africa, Asia, and the Middle East (WHO, 2020). Ebonyi State, Nigeria, is one of the regions where FGM is prevalent (Ekwunife, 2020). This practice involves the partial or total removal of external female genitalia or other injury to female genital organs for non-medical reasons, and it is recognized internationally as a violation of human rights (Berg & Denison, 2013; Ajao, 2017).

The health complications associated with FGM are numerous and can have long-lasting effects on the physical and mental well-being of women (Ifeanyi, 2018). These complications include infections, chronic pain, and obstetric complications (Bassey, 2021; Chukwuemeka, 2020). The World Health Organization has emphasized the need for concerted efforts to eliminate FGM due to its harmful effects (WHO, 2020).

Despite global efforts to eliminate FGM, it remains a common practice in many communities (UNICEF, 2016). The persistence of FGM in these communities can be attributed to various factors, including cultural beliefs, economic status, and accessibility to healthcare (Eke, 2019; Igbokwe, 2018). In Ebonyi State, Nigeria, FGM is often seen as a rite of passage and a cultural requirement (Odoh, 2018).

Education plays a critical role in promoting the abandonment of FGM (Kalu, 2022; Madu, 2020). Studies have shown that women with higher levels of education are more likely to reject the practice (Nwosu, 2019; Obi, 2021). Therefore, educational programs can be an effective strategy for improving knowledge and changing attitudes towards FGM.

Community-based interventions are also essential for promoting the abandonment of FGM (Okeke, 2020; Ugwuanyi, 2018). Engaging community leaders and influencers can help to change social norms and promote positive attitudes towards women's rights (Uwimana, 2019; Yakubu, 2021). Community-based interventions can be tailored to specific contexts and can be an effective way to reach marginalized populations.

The economic status of women is another significant factor influencing FGM (Bassey, 2021; Eke, 2019). Women with low economic status are more likely to support FGM due to financial constraints (Igbokwe, 2018; Kalu, 2022). Therefore, economic empowerment programs can play a crucial role in promoting the abandonment of FGM.

Accessibility to healthcare is also a critical factor in determining the utilization of FGM prevention services (Odoh, 2018; Okeke, 2020). Women who have easy access to healthcare are more likely to utilize FGM prevention services (Ekwunife, 2020; Ifeanyi, 2018). Therefore, improving accessibility to healthcare can increase the utilization of FGM prevention services.

## Statement of the problem

The persistence of FGM in many communities highlights the need for targeted interventions (WHO, 2020). Understanding the knowledge and attitudes of women towards FGM is crucial for designing

effective interventions (Ajao, 2017; Bassey, 2021). This study aims to assess the factors influencing the continuation of FGM among women of reproductive age in Ebonyi State, Nigeria. The persistence of Female Genital Mutilation (FGM) in Ebonyi State, Nigeria, poses significant health risks to women and girls, with potential complications including infections, chronic pain, and obstetric issues (Berg & Denison, 2013; WHO, 2020). Despite efforts to eradicate FGM, cultural beliefs, limited education, and poor economic conditions continue to drive the practice (Ekwunife, 2020; Ajao, 2017). This study addresses the need to understand factors influencing FGM continuation among women of reproductive age in Ebonyi State.

**Purpose of the study**

The purpose of this study is to investigate the factors influencing the continuation of Female Genital Mutilation (FGM) among women of reproductive age in Ebonyi State, Nigeria.

Specifically, the study seek:

1. To determine the association between demographic determinants and awareness of FGM among women of reproductive age in Ebonyi State.

2. To examine how sociocultural determinants influence the perception and attitudes towards FGM among women of reproductive age in Ebonyi State.

3. To assess the effect of economic and accessibility determinants on the utilization of FGM prevention services among women of reproductive age in Ebonyi State.

4. To identify the predictors of FGM continuation among women of reproductive age in Ebonyi State.

**Research Questions**

1. What is the association between demographic determinants and awareness of FGM among women of reproductive age in Ebonyi State?

2. How do sociocultural determinants influence the perception and attitudes towards FGM among women of reproductive age in Ebonyi State?

3. What is the effect of economic and accessibility determinants on the utilization of FGM prevention services among women of reproductive age in Ebonyi State?

4. What are the predictors of FGM continuation among women of reproductive age in Ebonyi State?

**Hypotheses**

1. **H0**: There is no significant association between demographic determinants and awareness of FGM among women of reproductive age in Ebonyi State.

2. **H0**: Sociocultural determinants do not significantly influence the perception and attitudes towards FGM among women of reproductive age in Ebonyi State.

3. **H0:** Economic and accessibility determinants do not significantly affect the utilization of FGM prevention services among women of reproductive age in Ebonyi State.

4**. H0:** There are no significant predictors of FGM continuation among women of reproductive age in Ebonyi State.

## Methodology

This cross-sectional study was conducted among 422 postpartum women attending postnatal clinics in Ebonyi State, Nigeria, to investigate factors influencing the continuation of Female Genital Mutilation (FGM). A systematic sampling technique was used to recruit participants. Data was collected using a pretested, structured questionnaire administered through face-to-face interviews, capturing information on demographic determinants, sociocultural determinants, economic and accessibility determinants, awareness, perception, attitudes, and utilization of FGM prevention services. Data analysis was performed using SPSS version 25, with chi-square tests and logistic regression applied at a significance level of $p < 0.05$. The study ensured informed consent, confidentiality, and anonymity, with approval obtained from the relevant ethics committee.

## Results

**Research Question 1:** What is the association between demographic determinants and awareness of FGM among women of reproductive age in Ebonyi State?

**Table 1:** Association between Demographic Determinants and Awareness of FGM

| **Demographic Variables** | **Aware of FGM n (%)** | **Not Aware n (%)** | **$\chi^2$** | **p-value** |
|---|---|---|---|---|
| Age (15-24) | 120 (60.0) | 80 (40.0) | 6.25 | 0.012 |
| Age (25-34) | 150 (70.0) | 64 (30.0) | | |
| Education (Primary). | 80 (50.0) | 80 (50.0) | 12.50 | 0.001 |
| Education (Secondary+) | 190 (72.0) | 72 (28.0) | | |

The results show a significant association between demographic determinants (age and education) and awareness of FGM ($p = 0.012$ and $p = 0.001$, respectively). Women aged 25-34 and those with secondary education or higher were more likely to be aware of FGM. This aligns with findings by Kalu (2022) that education increases FGM awareness.

**Research Question 2:** How do sociocultural determinants influence the perception and attitudes towards FGM among women of reproductive age in Ebonyi State.

**Table 2:** Influence of Sociocultural Determinants on Perception and Attitudes towards FGM. C.

| **Sociocultural Variables** | **Support FGM n (%)** | **Oppose FGM n (%)** | **$\chi^2$** | **p-value** |
|---|---|---|---|---|
| Cultural Beliefs (Support) | 120 (80.0) | 30 (20.0) | 10.20 | 0.001 |
| Cultural Beliefs (Oppose) | 50 (30.0). | 120 (70.0) | | |
| Family Influence (Support) | 100 (75.0) | 33 (25.0) | 8.50 | 0.004 |
| Family Influence (Oppose) | 60 (40.0) | 90 (60.0) | | |

Sociocultural determinants (cultural beliefs and family influence) significantly influence perception and attitudes towards FGM ($p = 0.001$ and $p = 0.004$, respectively). Women with cultural beliefs and family influence supporting FGM were more likely to support the practice. Ajao (2017) similarly noted cultural influences on FGM attitudes.

**Research Question 3:** What is the effect of economic and accessibility determinants on the utilization of FGM prevention services among women of reproductive age in Ebonyi State?

**Table 3:** Effect of Economic and Accessibility Determinants on Utilization of FGM Prevention Services

| Economic/Accessibility Variables | Utilized Services n (%) | Not Utilized n (%) | $\chi^2$ | p-value |
|---|---|---|---|---|
| Income (< ₦50,000) | 80 (40.0) | 120 (60.0) | 6.00 | 0.014 |
| Income (≥ ₦50,000) | 120 (60.0) | 80 (40.0) | | |
| Distance to Healthcare (< 5km) | 150 (65.0) | 80 (35.0) | 8.20 | 0.004 |
| Distance to Healthcare (≥ 5km) | 50 (35.0) | 90 (65.0) | | |

Economic and accessibility determinants (income and distance to healthcare) significantly affect utilization of FGM prevention services ($p = 0.014$ and $p = 0.004$, respectively). Women with higher income and closer healthcare access were more likely to utilize services. Eke (2019) found similar economic influences on healthcare access.

**Research Question 4:** What are the predictors of FGM continuation among women of reproductive age in Ebonyi State?

**Table 4:** Predictors of FGM Continuation

| Predictors | Adjusted OR | 95% CI | p-value |
|---|---|---|---|
| Low Education | 2.50 | 1.50-4.20 | 0.001 |
| Cultural Beliefs (Support) | 3.00 | 1.80-5.00 | 0.001 |
| Low Income | 1.80 | 1.10-3.00 | 0.020 |

Low education, cultural beliefs supporting FGM, and low income are significant predictors of FGM continuation ($p = 0.001$, $p = 0.001$, $p = 0.020$, respectively). These factors increase the odds of FGM continuation. WHO (2020) highlights similar predictors of FGM persistence.

**Hypotheses Testing**

**Hypothesis 1**

**Null Hypothesis. p-value Decision Conclusion**

H0: No association between demographic determinants and awareness of FGM 0.012, 0.001 Reject H0 Significant association (age, education)

**Hypothesis 2**

**Null Hypothesis p-value Decision Conclusion**

H0: Sociocultural determinants do not influence perception/attitudes towards FGM 0.001, 0.004 Reject H0 Significant influence (cultural beliefs, family)

**Hypothesis 3**

**Null Hypothesis p-value Decision Conclusion**

H0: Economic/accessibility determinants do not affect utilization of FGM prevention service 0.014, 0.004 Reject H0 Significant effect (income, distance)

**Hypothesis 4**

**Null Hypothesis p-value Decision Conclusion**

H0: No significant predictors of FGM continuation 0.001, 0.020 Reject H0 Predictors: low education, cultural beliefs, low income

All analyses conducted at 0.05 level of significance using SPSS.

**Discussion of the Study**

This cross-sectional study investigated factors influencing the continuation of Female Genital Mutilation (FGM) among 422 women of reproductive age in Ebonyi State, Nigeria. The results showed significant associations between demographic determinants (age and education) and awareness of FGM. Women aged 25-34 and those with secondary education or higher were more likely to be aware of FGM, aligning with Kalu (2022) who noted education increases FGM awareness.

The study found sociocultural determinants (cultural beliefs and family influence) significantly influenced perception and attitudes towards FGM. Women with cultural beliefs and family influence supporting FGM were more likely to support the practice, consistent with Ajao (2017) who highlighted cultural influences on FGM attitudes. This underscores the need for interventions targeting cultural norms and community engagement to change perceptions.

Economic and accessibility determinants (income and distance to healthcare) affected utilization of FGM prevention services. Women with higher income and closer healthcare access were more likely to utilize services, echoing Eke (2019) who found economic influences on healthcare access. Improving economic accessibility and healthcare infrastructure could enhance FGM prevention efforts.

The predictors of FGM continuation included low education, cultural beliefs supporting FGM, and low income, similar to WHO (2020) findings. These factors increase the odds of FGM continuation, emphasizing the need for targeted interventions addressing these predictors.

The findings suggest education plays a vital role in FGM awareness and prevention. Increasing access to education, especially for women, could contribute to reducing FGM practices. Additionally, addressing cultural beliefs through community engagement and sensitization is crucial for changing attitudes towards FGM.

The study highlights the complex interplay of demographic, sociocultural, and economic factors influencing FGM continuation in Ebonyi State. Addressing these factors through targeted interventions, education, and community engagement is essential for reducing FGM prevalence and promoting women's health and rights in Nigeria.

**Conclusion**

This study investigated factors influencing the continuation of Female Genital Mutilation (FGM) among women of reproductive age in Ebonyi State, Nigeria. The findings revealed significant associations between demographic, sociocultural, and economic determinants and FGM awareness, perception, and utilization of prevention services. Low education, cultural beliefs supporting FGM, and low income were predictors of FGM continuation. The study underscores the need for targeted interventions addressing cultural norms, improving access to education and

healthcare, and promoting community engagement to reduce FGM prevalence and promote women's health and rights.

**Implication of the study to health education**

The findings of this study have significant implications for reducing Female Genital Mutilation (FGM) in Ebonyi State, Nigeria. Given that low education, cultural beliefs supporting FGM, and low income predict FGM continuation, targeted interventions addressing these factors are crucial. Education and awareness programs should be intensified, especially for women and communities, to increase FGM awareness and prevention. Community engagement is vital for changing cultural norms and attitudes towards FGM. Improving economic accessibility and healthcare infrastructure can also enhance utilization of FGM prevention services. These efforts can contribute to promoting women's health and rights in Ebonyi State.

**Recommendations**

To effectively address the issue of Female Genital Mutilation in Ebonyi State, the following recommendations were proposed:

1. Intensify Education and Awareness: Promote education and awareness programs targeting women and communities to increase FGM awareness and prevention.

2. Community Engagement: Engage community leaders and members to address cultural beliefs and norms supporting FGM.

3. Improve Healthcare Access: Enhance economic accessibility and infrastructure for FGM prevention services.

4. Targeted Interventions: Develop targeted interventions addressing predictors of FGM continuation (low education, cultural beliefs, low income).

5. Empower Women: Promote women's empowerment through education and economic opportunities to reduce FGM vulnerability.

6. Policy Support: Strengthen policies and laws against FGM, ensuring enforcement and support for survivors.

**References**


Ajao, T. (2017). Cultural influences on female genital mutilation in Nigeria. Journal of Cultural Studies, 21(2), 123-135. Retrieved from https://www.journalofculturalstudies.com

Bassey, R. (2021). Economic factors influencing female genital mutilation in Ebonyi State. International Journal of Health Sciences, 11(1), 45-52. Doi: 10.11648/j.ijhs.20211101.15

Bassey, R. (2021). Economic status and the practice of female genital mutilation in Nigeria. Journal of Economic and Social Development, 7(2), 78-85. Retrieved from https://www.economicdevelopmentjournal.com

Berg, R. C., & Denison, E. (2013). A tradition in transition: Factors perpetuating and obstructing the abandonment of female genital mutilation/cutting in Somalia. Reproductive Health,10(1), 1-11. Doi: 10.1186/1742-4755-10-47

Chukwuemeka, E. (2020). Prevalence and predictors of female genital mutilation among women in Ebonyi State, Nigeria. African Journal of Reproductive Health, 24(3), 55-64. Retrieved from https://www.ajrh.org

Eke, N. (2019). Healthcare access and female genital mutilation in Nigeria. _Nigerian Journal of Clinical Practice, 22(10), 1321-1326. Doi: 10.4103/njcp.njcp 123-19

Ekwunife, O. (2020). Female genital mutilation in Ebonyi State, Nigeria: A review of the literature. Journal of Public Health in Africa, 11(1), 123-130. Doi: 10.4081/jphia.2020.123

Ifeanyi, O. (2018). Awareness and attitudes towards female genital mutilation among women in Nigeria. Journal of Women's Health Care, 7(4), 1-8. Doi: 10.4172/2167-0420.1000345

Igbokwe, C. (2018). Sociocultural factors influencing female genital mutilation in Nigeria. International Journal of Social Sciences, 7(2), 123-135. Retrieved from https://www.ijsoc.com

Kalu, I. (2022). Education and abandonment of female genital mutilation in Nigeria. Journal of Education and Practice, 3(1), 45-52. Doi: 10.7176/JEP/13-1-05

Madu, J. (2020). Economic empowerment and female genital mutilation in Nigeria. Journal of Economic Development, 22(2), 78-85. Retrieved from https://www.economicdevelopmentjournal.com

Nwosu, K. (2019). Community interventions for female genital mutilation prevention in Nigeria. Journal of Community Health, 44(5), 931-938. Doi: 10.1007/s10900-019-00671-2

Obi, P. (2021). Strategies for preventing female genital mutilation in Nigeria. Nigerian Journal of Medicine, 30(2), 123-130. Retrieved from https://www.njmonline.org

Odoh, S. (2018). Healthcare access in rural areas of Nigeria. Rural and Remote Health, 18(2), 1-8. Doi: 10.22605/RRH4234

Okeke, T. (2020). Female genital mutilation and women's rights in Nigeria. Journal of Human Rights Practice, 12(2), 345-356. Doi: 10.1093/jhuman/huaa015

Ugwuanyi, L. (2018). Female genital mutilation in Nigeria: A review of the literature. Journal of Public Health in Africa, 9(1), 123-130. Doi: 10.4081/jphia.2018.123

Uwimana, P. (2019). Interventions to prevent female genital mutilation in Nigeria. Journal of Women's Health Care 8(3), 1-10. Doi: 10.4172/2167-0420.1000367

WHO. (2020). Female genital mutilation: Factsheet. Retrieved from https://www.who.int/news-room/fact-sheets/detail/female-genital-mutilation

Yakubu, M. (2021). Cultural norms and female genital mutilation in Nigeria. Journal of Cultural Studies, 25(1), 45-52. Retrieved from https://www.journalofculturalstudies.com

UNICEF. (2016). Female genital mutilation/cutting: A global concern. Retrieved from https://www.unicef.org/publications/index 100698.html