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Implications of female genital mutilation on girls' education and psychological wellbeing in Tarime, Tanzania

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ABSTRACT

Though female genital mutilation is widely practiced in Tanzania, there has been no systematic examination of its long-term implications on girls' wellbeing. Employing interviews and focus group discussions, this study explored the implications of female genital mutilation (FGM) on girls' wellbeing in Tarime, Tanzania. The results revealed that the effect of FGM on girls are multifaceted, including early marriages, parents' negative attitudes towards girls' education, girls' change in attitudes and loss of interest in schooling, which lead to poor educational achievement in many ways. Notably, girls who manage to escape FGM suffer from isolation and stigma from their peers who have been circumcised. Arguably, FGM is both a protective and risk factor for girls in Tarime. FGM is a protective factor against stigma and isolation for circumcised girls, and it is a risk factor in denying circumcised girls' opportunities for education, and in perpetuating stigmatisation for the uncircumcised girls. We have concluded that, in the absence of more positive alternative rites of passage for adolescent girls in Tarime, and despite the widespread awareness about its negative consequences, FGM is likely to continue due to its centrality in the Kuryan cultural, social and economic necessities.

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Introduction

Female genital mutilation (FGM), sometimes referred to as female circumcision (FC) or female genital cutting (FGC), is defined by the World Health Organisation (2010, 1) as 'all procedures involving partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons'. The FGM practice is a socio-cultural practice that continues to be practised in various parts of the world, particularly in Africa, Asia, and the Middle East. The World Health Organisation (2010) estimates that between 100 and 140 million women, girls and babies throughout the world have been genitally mutilated, and another three million girls are at risk of such mutilation each year. The practice is predominant in Africa, where 28 countries are reported to have various forms of FGM (United Nations Children's Fund [UNICEF] 2009). In many African countries, the national rates for the FGM practice range from 0.6 percent to 97.9 percent. It is estimated that about 91.5 million girls aged ten years and above have

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undergone FGM in the African continent by 2009 (WHO 2010). The WHO further shows that FGM is still a major problem in many African countries. In Tanzania, in particular, FGM is widely practised in almost all regions (NBS & ICF Macro, 2011). According to this report (THDHS 2010), more than 1.2 million women aged between 15 and 49 years in Tanzania are reported to have been genitally circumcised and about 15 percent of women undergo FGM every year.

Although the factors for FGM vary from one society to another, in most cases, the factors for the practice range from the socio-cultural and religious motives to economic reasons. In the case of Tarime, the socio-cultural and economic factors take precedence over religious factors. As such, among the Kurya, the circumcision of both boys and girls is a 'rite of passage' for the transition of children from the childhood to adulthood status with specific rights and obligations (Ndimba 1995). For the Kurya, the notion of 'childhood' is culturally and socially constructed through the circumcision of both boys and girls (Mukama 2002). Before circumcision, the young boys and girls are viewed as kids who are still under the control of their parents and the community. Nevertheless, among the Kurya, childhood ends once a child undergoes circumcision, and this takes place in puberty for girls particularly. This trend suggests that circumcision is a strong factor that indicates the transformation of a person from childhood to adulthood. Once circumcised, a person is no longer taken as a child, regardless of his or her age and may be allowed to get married anytime. The association of FGM with 'childhood' and 'adulthood' statuses have far-reaching repercussions for the education of girls in Tarime.

Various studies have documented the health effects of FGM and its major complications for women (Smith 1995; Rahman and Toubia 2000; Mitike and Deressa 2009; Kinuthia 2010; Ondiek 2010; WHO 2010). Other studies portray FGM as one of the leading factors affecting girls' education (Forum for African Women Educationists [FAWE] 2001; Hungi 2006; Ondiek 2010). The previous studies, for instance, demonstrate that many problems that affect girls' education such as dropout, early marriages, and teen's pregnancies are caused by the socio-cultural practices, including the FGM practice (Mukama 2002; FAWE 2004).

Studies have also shown that FGM practice is one of the major forms of gender violence that negatively impacts on girls' access to education, retention, and performance in schools (Elimu Yetu Coalition [EYC] 2005; Hungi 2006; Save the Children Denmark [SCD] 2008). Despite the growing body of knowledge on FGM, most studies conducted to investigate the practice in various parts of the world focus much on health, medical, and legal aspects of FGM on women and/girls, and pay only cursory attention to girls' education.

In particular, there has been a paucity of studies which explore the implications of the FGM practice for girls' education in Tanzania and only limited documentation exist (Deutsche Gesellschaftfür Technische Zusammenarbeit [GTZ] 2009). Most studies conducted in Tanzania mainly focus on the sociological, medical, and legal aspects of FGM with little attention on education (See, for example, Ndimba 1995; Kitambi 2001; Mukama 2002; Bingi 2007). This paper, therefore, reports on the findings of research that examined the implications of female genital mutilation on girls' education. Specifically, this part of the study explored: (1) the manner in which FGM affects girls' access to education, and (2) the manner in which FGM affects girls' academic achievement in schools, with a focus on Tarime District, where FGM practices are particularly more widespread than other parts in Tanzania.

Theoretical basis of the study

The study was guided by the Foucault's theoretical framework. In his book 'Discipline and Punish: The Birth of the Prison', Foucault (1977) analyses human body as an object and target of power that is manipulated and shaped by human beings. He argues, 'discipline produces subjected and practised bodies, "docile" bodies' (Foucault 1977, 138). Of particular significance to the FGM practice are the Foucault's ideas of discourse, power, and biopolitics. For Foucault (1989), the discourse is regulated by social forces that preserve the established power structures, political, and social order. The social forces monitor possible discourses through the 'rules of exclusion' as well as cultural prohibitions, which, inevitably lead to the control of the people (Foucault 1972). Such control, Foucault and Gordon (1980) argue, is made possible through the presence of *power* (knowledge) that create the conditions for an exclusion to occur, while also defining other things as 'taboo' or 'true/false' through the discourse. Closely related to the ideas of discourse and power too, is the Foucault's concept of biopolitics. Foucault (1990) contends that an 'entire micro-power' is concerned with the body which is regulated by biopolitics. Through biopolitics, human life, including its biological and anatomical mechanisms are controlled by the discourses and institutions of power. The discourse, power, and biopolitics, in Foucault's sense, therefore, utilise diverse mechanisms to subjugate human body by disciplining and rendering it more 'docile' for efficient control.

Many feminist scholars have used the Foucault's approach to portray the 'female body' as a surface inscribed with culturally and historically specific practices subject to the political and economic forces (Schildkrout 2004; King 2004). As such, the female body is considered as a material object and acting organism that gains social identity through its appropriation as a cultural subject (Turner 1995; Schildkrout 2004). Reischer and Koo (2004) further reason that the body is a symbol of society, a signifier of the social world it inhabits, an instrument of the lived experiences, and a surface of inscription. For other Feminist scholars, a woman has been socially and culturally constructed as inferior in many societies, yet threatening to man (King 2004). This threat gives in the woman's body to particular disciplinary techniques for containment (Esho et al. 2010). In the views of such scholars, the containment is indispensable for subjecting female bodies to societal norms, etiquettes, and expectations. In her analysis of female body using Foucault framework, King (2004), for instance, argues that men and women are considered as opposites, while being supported by polarised categories such as mind/body, culture/nature, and spirit/matter that are inflected with gender ideologies. As a consequence, a woman to man has been considered as inferior whose sexuality and her body must be controlled for reproductive purposes (Clarence-Smith 2008; Esho et al. 2010). This is because the human body is an important aspect of culture through which various social meanings are created and conveyed (Reischer and Koo 2004).

However, the disciplining of female body takes diverse forms which vary in respect of the local, economic, and socio-cultural contexts. These forms may involve material modifications of human flesh through cutting, piercing, paining, and tattooing (Schildkrout 2004). The body modification is done for several reasons which include claiming an identity in opposition to a social group, controlling human behaviours, and signalling a significant change in social status (Reischer and Koo 2004). Being one of the varied forms of body modifications, FGM is perceived as 'the physical and symbolic manipulation of the body in

relation to the world and of the world in relation to the body' (Moore 1999, 13). Moore's idea is crucial in the context of this research as it connects FGM to Foucauldian perspective of disciplining female body through both physical and social inscriptions communicated through the practice. Our argument is in line with Johnsdotter and Essen (2010) who contend that genital modifications are never purely about anatomy and physiology, but are entangled in a broader web of cultural norms and ideologies. In that way, FGM becomes an important aspect of culture through which gender construction and social identities are shaped and defined (Reischer and Koo 2004). Accordingly, in many African societies, FGM acts as a mark inscribed on the female body, thereby playing a key role in identity formation and gender construction (Parker 1995; Silverman 2004; Esho et al. 2010).

An analysis of FGM by using Foucault's approach rationalises our choice of focusing on FGM practice from the complex and interrelated array of economic issues like poverty and the bride-wealth as well as socio-cultural practices such as early/forced marriage and patriarchal ideologies that impact adversely on girls' education. As Abusharaf (1995) argues, women are not subordinated because of the removal of their genitals through FGM, but because of the meanings, ideologies, and the politics attached to the practice. In essence, this suggests that the socio-cultural practices such as the early/forced marriages, patriarchal ideologies, and bride-wealth are the outcomes of the multivocal meanings and symbolic nexus associated with the FGM practice (Hungi 2006; Ondiek 2010). For Esho et al. (2010), for instance, FGM is a crucial element in legitimising the status of womanhood, signifying the onset of puberty, and opening the door to matrimony and motherhood. The socio-cultural meanings and symbolic nexus associated with FGM practice, therefore, are of vital importance in impacting on girls' education.

Methods

Research design

This research was rooted within the framework of qualitative approach in which a case study design informed the research procedures. The choice of the *case study design* was guided by the need to conduct an in-depth investigation of issues related to the FGM practice in Tarime (Yin 2003; Fellows and Liu 2008). The case study design was also preferred to other research designs because of its usefulness in investigating contemporary phenomena within its real-life context, and particularly when the boundaries between phenomenon and context are not clearly evident (Yin 2003). The study approach was, therefore, guided by the notion of *bounded system*, which has been suggested as appropriate for achieving a detailed exploration of contemporary phenomena (Hatch 2002; Yin 2003; Creswell 2012). In this research, the *system* was defined in terms of geographical setting and four sampled schools in Tarime District. Although this research was primarily qualitative in approach, some quantitative data, were used to illuminate the state of girls' education in the study area.

Interviews and focus group discussion (FGD*)* were chosen as both the research methods and instruments for generating qualitative data. Both interview and FGD sessions were conducted in Kiswahili, which is a working language for the majority of

respondents in the study area and Tanzania in general. Subsequent translations in local languages were conducted for respondents who were not conversant in Kiswahili such as the Kurya elders.

In-depth interviews were conducted with a wide range of respondents, including circumcised girls, elders, parents, and heads of schools. The interviews focused on respondents' experiences, knowledge, opinions, and feelings about FGM. The types of interviews used were one-on-one with open-ended questions so that the participants could best voice their experiences unconstrained by any perspectives of the researchers (Creswell 2012). Interviews were administered with the help of two trained research assistants who also served as translators for elders who were not proficient in Kiswahili. These were recruited from amongst heads of schools for the reason that they were familiar with the context and cultural sensitivities of the study area and participants. Prior to the administration of the instruments, these research assistants were properly trained on basic qualitative research methodological processes and oriented on the key attributes of the study. All interview proceedings were recorded using a digital voice recorder, and supplemented with jotting down notes on notebooks. In total, 42 in-depth interviews were conducted with various respondents as highlighted above.

The focus group discussion method was further employed in this research for purposes of gauging a wide range of opinions, beliefs, and experiences of FGM practice from the uncircumcised girls' who were the potential victims of the practice. The homogeneity of the uncircumcised girls' subgroup provided a good justification for employing focus groups, which made it possible to bring together individuals of similar backgrounds and experiences about FGM practice. As Darlington and Scott (2002) argue, the focus groups are particularly well suited in collecting in-depth qualitative data about individuals' definitions of problems, opinions, feelings, and meanings associated with various phenomena. In line with Bloor et al. (2001) recommendation for focus groups involving sensitive topics, a total of four focus groups consisting of five members for each session was conducted. Two groups consisted of the primary school's students and the other two groups consisted of the secondary school's students.

Study site, participants, and sampling procedures

This study was carried out in Tarime District, which is in the north-eastern part of Tanzania. The Tarime District was selected as a case of study among many districts in Tanzania owing to the evidence indicating that the district has the highest prevalence rate (85%) of FGM compared to other districts in Tanzania (Equality Now 2011). We used an *approach strategy* to access the research sites and participants. The *approach strategy* is defined here as a means of gaining entry to the research sites through the use of a link person such as a colleague, mutual friend, and professional worker who might be sympathetic and receptive to the research (cf. Walford 2001, 36; Cohen, Manion, and Morrison 2007, 122). Through the initial conduct of the interviews with four heads of schools, we built the rapport with two of them from different villages. Later, we consulted and trained two heads of schools as our link persons who helped us in gaining entry to the research sites and also recruiting the participants.

School heads provided useful link with village leaders, who were key gatekeepers for gaining entry into the villages and target girls. These are well acquainted with the local

culture and language. School heads and teachers in general are well respected in Tarime communities in which they are viewed as guardians of children.

Our study was particularly confined to one administrative division called Ingwe Division. This division was purposely selected to participate in the study because it is located in a rural area where the FGM practice is more deeply rooted than other parts in Tarime District. In the Ingwe Division, four schools were randomly selected to participate in the research. These included one primary school and three secondary schools.

Purposive simple random sampling strategy was used to select 20 uncircumcised school girls from a Christian mission centre, which serves as a rescue place for girls fleeing their families and communities to avoid circumcision.

Further, using the criterion sampling strategy, we selected 20 circumcised girls to participate in interviews. We further used the *snowball* technique to identify the circumcised girls by requesting the interviewed participants to recommend their other colleagues with similar characteristics. Both circumcised and uncircumcised girls were selected to participate in the study so as to get a wide range of views and experiences regarding the FGM phenomenon. Additionally, through the *criterion sampling,* four heads of schools and 12 parents and six other elders participated in the interviews. Interviews were conducted both at home and in school settings.

Accordingly, the purposive sampling was preferred to probability sampling strategy because we wanted to capture respondents who had lived experience and were reasonably knowledgeable about FGM. The purposive strategy is suitable for the case study because it ensures the selection of what Patton (1990) calls *information-rich cases* for issues of central importance to the purpose of the research. Thus, school heads were involved in the study because they were deemed to have enough and strategic information about the FGM practice and its consequences on girls' education. Kuryan parents were included because they are key decision makers about whether their daughters should undergo FGM or not. And the elders were included because they are very influential in upholding the cultural traditions in the Kurya society.

Data analysis

The data generated from the interviews and focus groups were recorded verbatim using the digital tape recorder. We transcribed the recorded data in Kiswahili and then translated such data into English. Afterwards, we analysed the translated data using a thematic data analysis approach following the six stages as outlined by Braun and Clarke (2006). These steps are familiarisation with data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and finally, producing the report. The rigour, trustworthiness, and validity of the research data were established through cross-checking and collating the evidence from the interviews and the FGDs. The raw data from the interviews and FGDs were further triangulated with other secondary sources. By so doing, the information obtained from multiple data sources increased the validity and credibility of the findings. The relevant themes from the interview and FGD transcriptions were further identified, described, and illustrated with participants' voices. Although we utilised the thematic analysis on a large scale, the Foucauldian discourse analysis (cf. Foucault 1972) also influenced our research findings. This can be seen through the

contextualisation of results of research by political, social, and economic discourses with multiple perspectives.

Ethical issues

We obtained the research permit from the University of Dar es Salaam, the academic institution of the authors of this paper, as well as appropriate local government authorities in Tarime District. Heads of participating schools and local staff at the Mission Rescue Centre also gave further permission for students in their respective jurisdictions. However, we still asked all participants' consent to volunteer in the interviews and focus groups. Necessary steps were taken to protect the privacy and confidentiality of respondents, including anonymizing their names during the interviews and data analysis.

To ensure appropriate physical security of the participants, and given that this research was carried out during the circumcision season with potential threats from the local population, we conducted the interview sessions for girls within the school premises and administered the focus groups within the Mission centre premises. We chose these two premises because they were free from any access by the local people, and hence, they provided security for both the researchers and the participants. We carefully briefed respondents about the possible negative effects arising from answering some of the research questions. We explained to them that if they become uncomfortable responding to the questions, they can terminate the session anytime, and if necessary, appropriate referal service to a health facility or a counsellor would be arranged for them.

Results

The results are organised into two major sections. The first section highlights the trends in schooling in primary and secondary education by sex, and locates the position of girls' education in Tarime in comparison with the national trend. The second section presents the views of respondents on girls' education generally, and about the implications of genital mutilation on girls' wellbeing.

Girls' education in Tarime

Overall, school enrolment data in Tanzania shows an acceptable level of gender parity in which boys and girls have equal access to basic education (primary and secondary education). Indeed, for both primary education and secondary education levels, girls' enrolment slightly outnumbers that of boys by at least one percent. Statistics show that there were 8.6 million students in primary schools and 1.6 million students in secondary

Table 1. Enrolment rates in primary and secondary education in Tarime and national average.

	Tarime (%)		National (%)	
	Boys	Girls	Boys	Girls
Primary education	51	49	49	51
Secondary education	56	44	49	51

Source: Authors' calculation from Tanzania open government data portal (http://www.opendata.go.tz/organization/ministry-of-education-and-vocational-training).

schools in Tanzania by the end of 2015. The proportion of girls in both primary and secondary schools is 51 percent (see Table 1 below).

Nevertheless, the enrolment trend for girls is relatively different in Tarime District with a relatively lower proportion of girls' enrolment. For example, district education data show that there were 75,779 primary school students and 4947 secondary school students in Tarime as of December 2015 (United Republic of Tanzania 2016). Of these, 49 percent of the primary school students were female. The proportion of female students in secondary education is particularly lower than the national average, with only 44 percent of the female enrolment. While the aim of this study was not to test the level of statistical significance in the variation between boys' and girls' enrolment, it was important to interrogate qualitatively the extent to which girls' low enrolment is attributed to female genital mutilation.

Education, female genital manipulation and marriageability

In examining the state of girls' education, we looked at the interplay between the three phenomena: education, female genital mutilation and marriageability. In Tarime, female genital mutilation is viewed by most elders instrumentally as a tool to enforce marriageability and, consequently, as a barrier to education. That is, girls who undergo genital mutilation tend to enhance their chances of marriage, and thereby reduce their chances of starting, continuing and/or furthering their education. The relationship between education, female genital mutilation and marriageability was aptly well captured during the interviews.

For example, during focus group interviews, heads of schools directly blamed the FGM practice for girls' poor attendance at school. They observed that the majority of parents and communities value marriage at the expense of education, and FGM is largely seen as an important step in enhancing girls' chance of marriage. The remarks of one interviewee are worthy of quoting:

> In most instances, when these girls are circumcised, they are considered as grown-ups. In the Kuryan culture, people know that if a girl becomes highly educated, parents cannot get enough wealth. According to them, a highly educated Kuryan girl cannot get a man to marry her as most of the uneducated Kuryan boys will be apprehensive of her. The Kuryan people, therefore, see that it is better for their daughter to be circumcised and get married immediately after completing the primary school so that her parents can obtain many cows [wealth]. (Headmaster, School B, Tarime)

The Kuryan parents' emphasis on the FGM practice for their daughters as opposed to the girls' education in their community is also seen in the way they use different means to pressurise school girls to abide by their demands, and eventually, withdraw from school. As testified by school heads during interviews, Kuryan parents, for example, refuse to pay the tuition fees for their daughters so that they succumb to the FGM practice, drop out of school, and ultimately, get married and bring cows to their families as aptly put by one respondent during interviews:

> At times, the Kuryan parents do decline to pay tuition fees for their daughters. Instead, they tell them to stay at home so that they get them married off to their spouses. If you tell a parent that bring your daughter to school so that she carries on studying while one continues seeking

> tuition fee, the parent rejects. As a result, if you make a follow-up, you find that such girl has got married already. (Headmaster, School A, Tarime)

Owing to the lack of parents' support, the uncircumcised Kuryan girls recounted that they experience tough life in school because their parents and caregivers are not ready to finance their education. Such reluctance is intended to force the uncircumcised girls to undergo circumcision and exit school, and at last, get married and bring wealth to their parents. As a result, the heads of schools admitted that they are obliged to put stringent restrictions, including policing and frequent fines to compel the Kuryan parents so that they allow their girls to finish their studies. One head of school, further asserted:

> In this society, if the heads of schools are not strict, no Kuryan daughter can study. This is because once a girl gets circumcised; you find the bride-price is already given to her parents. (Headmaster, School A, Tarime)

Accordingly, participants reported that the FGM practice perpetuates the *patriarchal ideologies* through which the parents and the community have a negative attitude for girls' education, but with much preference for boys' education. In the Kuryan society, girls are considered as not necessary to be educated. One participant, for instance, insisted:

> This community does not put much emphasis on educating girls. This is due to the past legacy in which a girl child had no value of being educated. They inherited this tradition, and they carry it through the FGM practice. They think that the girl should complete standard seven[1] and get married so that her parents can gain wealth. (Head teacher, School D, Tarime)

FGM as a factor for poor girls' school attendance and dropout

Because many parents put more emphasis on marriage than on education, they do not support their children's education needs at school. This makes girls' life at school difficult and may become a major reason for them to abandon school. This was accounted articulately by uncircumcised girls during focus group discussions. For example, in one of the focus group discussions, girls reported that while in the secondary school, their parents deprive them of any financial backing for the basic school needs such as money for personal uses, stationery supplies, and school uniforms in attempts to pressurise them to undergo FGM and exit schooling. One female member of the FGD observed that:

> If we require money for buying the school uniforms and stationery supplies like books, pens, and pencils, our fathers refuse to give us money. If we do not get somebody to help us, most girls do decide to leave school. At the same time, some girls run away and migrate to other places where they live in a challenging environment. (FGD girl Participant, Mission Rescue Camp)

Furthermore some other girls (uncircumcised girls living in a camp) observed that immediately after circumcision many Kuryan parents pull out their daughters from school so that they get married and bring cows to their parents. One uncircumcised girl, for instance, narrated in the focus groups that parent told her that 'This year you have to undergo circumcision. We will pull you out of school because we want to obtain wealth from you'. However, this girl fled home and went to the Mission Rescue Centre for help.

Clearly, it would appear the majority of girls in Tarime do not support the FGM practice and they see it as a stumbling block in their education and life in general as the below quoted remarks demonstrate:

> We do not like FGM because once a girl gets circumcised, they have to leave school and they are forced to get married. If parents recognise that a girl has undergone circumcision, a boy goes to her parents anytime and offer the bride-price. Even if a girl is still schooling, they tell her that leave school and get married. (FGD girl Participant, Masanga Mission Camp)

The above quote is an expression of girls' agency in that the uncircumcised girls who fled their homes to escape the FGM practice, viewed it as infringing upon their right to education. The uncircumcised girls' resistance to the FGM practice calls for girls' right to be heard by parents on key matters that affect their lives, including the right to education.

The participants further explained that once a girl undergoes FGM, it is a signal that she is ready for marriage. Following the FGM practice, many circumcised girls were reported to exit school on their own and get married because they consider themselves as adults and not children. Aside from the accumulation of wealth by parents, marriage (which is enhanced through FGM) also conveys respect to a circumcised girl who is offered many cows as the bride-wealth for her parents. The comments one participant made merit attention:

> When a girl is circumcised, she becomes ready for marriage. Some circumcised girls abandon school voluntarily so that they get married early. Such girls believe that early marriage makes them earn respect through the bride-wealth. I have had a number of cases of girls who left school on their own due to the FGM practice. (Headmaster, School A, Tarime)

Another girl gave a personal account of how she was affected educationally when she underwent female genital mutilation. She observed that she missed school for several weeks to allow for a recuperation period to recover her wounds, which it was reported that it may take up to two months.

> Though I underwent circumcision at the time when the school had been closed, I stayed home several weeks to recover my wound. After opening the school in mid-January, my wound had not recovered yet. I remained home for a couple of weeks while missing classes before resuming my studies. Thus, I missed several classes, and it was hard to get on with other students. (FGD girl participant, School B, Tarime)

Psychological effects of female genital mutilation on girls

Clearly, the effect of female genital mutilation on girls seems to be multifaceted. Apart from the effects on education as highlighted above, the results of the interviews conducted in this study suggest that the effects go beyond the effect on education. There are also long term psychological consequences. Inevitably, female genital mutilation shortens girls' childhood period leading to early maturation and undertaking of adult responsibility. This was well put by one respondents during FGDs as captured below:

> A girl who is already circumcised sees herself as being transformed from childhood to adulthood. Even though she is still young, she considers herself as a grown-up person. Although the circumcised girl is still young, she starts to indulge herself in adulthood affairs without putting much emphasis on studies. (FGD girl participant, Masanga Mission Camp)

Other participants observed:

> While we are in the classroom, some circumcised girls do not like to study. When you ask someone why don't you want to study, she says "Do you want me to study for what? I am

> a grown-up person, even if I do not study, anytime I can get married". (FGD girl participant, Masanga Mission Camp)

> We (circumcised girls) get married earlier before completing school than uncircumcised girls. This is because of circumcision. One of my friends whom we were circumcised together got married a few months later after circumcision. While in the classroom, she used to tell me that "My friend, I do not want to study. Even if I get married, there is no problem as I am circumcised already". (FGD participant [circumcised Girl], School A, Tarime)

The above remarks show that the FGM practice plays a fundamental role in transforming the attitudes, behaviours, and actions of Kurya girls who undergo it. The interviewees observed that the majority of girls who undergo circumcision consider themselves as transformed from the childhood to adulthood status. As a result, this change in status resulting from the FGM practice affects their study habits, actions, and behaviours.

Moreover, the participants reported that the pain p associated with FGM creates a phobia for some girls who became psychologically disoriented, thereby making them unable to concentrate on their classroom instructions. For example, one circumcised girl recounted her experience as follows:

> I was very fearful and unwilling to be circumcised, but my parents forced me. I even remember during that time when I was supposed to be circumcised, I became ill for more than a week, though I was not really ill but fearful. This affected me psychologically so much. I was attending school, but I could not even follow what teachers were teaching in the classroom because of fear. I was only thinking about what will happen to me during the circumcision procedure. (FGD participant [Circumcised Girl], School A, Tarime)

Closely connected to the above factor, the peer isolation, stigma, and at times, the unfriendly relationship between the circumcised and uncircumcised girls affect social interaction and learning habits between the two groups. The peer and social isolation have negative consequences on the psychological well-being of girls who had not undergone circumcision. For example, one FGD participant reported that:

> When we join the circumcised girls, they tell us that "We do not want to be with you". While we are in the classroom, they call us "Wasaghane". (FGD participant [uncircumcised girl], Mission Rescue Camp)

The use of the Kurya term 'Msaghane' for the 'uncircumcised girl' is pejorative. In most cases, the term is used for stigmatisation purposes. The stigma directed to the uncircumcised girls take place both in home and school settings. In support of this position, one female elder, for instance, explained that:

> Circumcision is our tradition. If a girl is not circumcised, she is viewed as not a human. Hence, such girl cannot get married and must be called "Msaghane", by others wherever she is. (female elder, Nyanungu,)

Another girl who was circumcised made the following remarks:

> Due to the Kuryan traditions, we are directly or indirectly forced to be circumcised. Since a long time ago, girls who refused to be circumcised were isolated, a practice that continues till today. Many girls who refuse to be circumcised get isolated from the community for not adhering to Kuryan traditions. (FGD participant [Circumcised Girl], School C, Tarime)

Discussion

This study examined the implications of FGM practice on girls' wellbeing in Tarime, Tanzania, with specific reference to education. The results show that FGM contributes to girls' low access to education by placing a premium on the matrimony and reproductive roles of women in the Kuryan community. This implies that, as observed by Silverman (2004), girls' access to education in Tarime is limited because the reproductive roles propagated through FGM prepare them for marriageability rather than schooling and career. With an emphasis on matrimony and reproductive roles of women, the main function of FGM is to preserve virginity and chastity considered as necessary for girls' marriageability (Clarence-Smith 2008; Esho et al. 2010) in the Kurya community. The control of women's sexuality through FGM intends to produce what Foucault (1977) calls 'docile bodies', which later become subjected to a biological reproduction through the institution of marriage. Among the Kurya, the FGM practice, therefore, guarantees the marriageability of a girl, and ultimately, the accumulation of wealth by one's parents. As such, in several poverty-stricken families in Tarime, the circumcised girls are more likely to be entrapped into early and forced marriages, which, in turn, pull them out of school.

The results also demonstrate how FGM contributes to negative attitudes and lowest value attached by parents to girls' education. As Chimombo et al. (2000) have observed, the parental attitudes play a major role in determining a child's chances of education through controlling the initial decision of a child to attend school, as well as influencing children participation in education.

Furthermore, the findings of this study revealed that parents' negative attitudes and low value attached to female education constrain girls' access to education in Tarime. As a result, some Kuryan parents placed various obstacles to force their daughters give in to the FGM practice, and eventually, withdraw them from school. For instance, many parents avoided paying tuition fees and providing financial support for their daughters; I Instead, they subject them FGM, pull them out of school, and ultimately marry them off so that they accumulate wealth.

Encouragingly, despite the difficulties that girls experience in Tarime, many uncircumcised girls can escape the FGM practice by fleeing their homes into mission centres. This has become a copying mechanism in what appears to be an otherwise inevitable FGM practice for girls in Tarime.

The findings of this study also indicate that FGM is influential in perpetuating the *patriarchal system* in the Kuryan society. The patriarchal ideology, in turn, silently maintains the domination of men over women. Our findings suggest that due to the *patriarchal ideology*, a woman in the Kuryan society is defined as what Foucault (1977) terms an 'object' whose body should be repressed, controlled, and dominated by male subjects for socio-cultural embodiments. The findings show that, unlike boys, the circumcised girls in Tarime are unlikely to be sent to secondary education due to parents' expectations of marrying them off and obtaining wealth through dowry. As a result, most Kuryan parents tend to value primary education over secondary education for their daughters. According to the respondents, in the Kuryan society, secondary education is considered by many parents as making girls more unsuitable for marriage, thereby contributing to missing out appropriate husbands to marry them. These findings are consistent with the previous studies (cf. EYC 2005) in Kenya, which revealed that in communities where traditional FGM practices

were widespread, girls' education was not highly valued as boys' education. It is therefore clear that the perpetuation of the patriarchal ideologies through the FGM practice limits girls' access to schooling, while at the same time, arguably, providing more room for boys' access to education as evidenced by boys' higher enrolment rates compared to the national average.

The results the FGM practice affects girls' education in many ways. Firstly, girls tend to experience irregular attendance in school. Secondly, after circumcision, the newly initiates spend several weeks at home to recover their wounds, while missing out several classes during the entire recovery period. Thirdly, girls who refuse to undergo FGM tend to experience psychological torture as they are denied essential needs for school such as school uniforms and financial support. Consequently, as demonstrated by Pesambili (2013) the experience that girls undergo in Tarime because of undergoing FGM or refusal to do so affects their academic achievement.

The results of this study largely agree with the findings of Oloo, Wanjiru, and Newell-Jones' study (2011) in Kenya who found that the circumcised and uncircumcised girls differed in their general attitudes, thereby contributing to poor grades among the circumcised girls in schools. Moreover, the results showed that the FGM practice contributes to the poor learning process among the circumcised girls due to the excruciating psychological distortion that is more likely to confront them as a result of FGM. As a result, some girls were reported to have lost interest in education, thereby putting little emphasis on their studies.

The results also concur with Ondiek (2010) study in Kenya, which indicated that circumcised girls were unable to concentrate on their class work and were more likely to perform poorly in their examinations. As such, the study findings suggest that the attitudinal transformation resulting from the FGM practice as a rite of passage is influential in shaping the actions and behaviours of Kuryan girls' towards studies. This attitudinal and behavioural change, ultimately, impacts negatively on girls' academic achievement.

Furthermore, the results of this study have also revealed psychological consequences associated with the FGM practice. These include, for example, that FGM results in feelings of social isolation, as well as stigma against the uncircumcised schoolgirls. It was observed that the isolation and stigma resulting from FGM inevitably lead to the unfriendly relationship and lack of a supportive network of peers among students in schools. Similar resulted were reported by Oloo, Wanjiru, and Newell-Jones (2011) study in Kenya, which unveiled that factions and tensions developed as girls tended to hang out with those of their own circumcision status, thereby making learning and social integration the greatest challenge for the uncircumcised girls.

Conclusions

This study has established that FGM practice in Tarime affects girls' education through both direct and indirect mechanisms. The direct mechanisms include all the ways that affect girls directly such as the peer and social isolation, stigma, girls' change in attitudes and loss of interest in studies, poor learning habits, and psychological disruption resulting from the FGM practice. The indirect mechanisms involve all the ways that affect girls indirectly through the inextricable association between FGM, economic factors such as poverty, and other socio-cultural practices such as early marriages, patriarchal ideology,

parents' negative attitudes and low value attached to girls' education. Our findings indicate that the inevitable, but complex association between FGM, economic factors, and other socio-cultural practices are particularly ascribed to the socio-cultural meanings and the symbolic nexus involved in processes of bodily inscription conveyed by FGM. Through the FGM practice, for instance, Kuryan girls are prepared for marriage and other reproductive roles attached to matrimony, including childbearing and upbringing. The act of marrying off girls who have undergone FGM is used as a survival strategy by several households in Tarime, particularly among poorer families.

In particular, the socio-cultural meanings and symbolic nexus embodied in the FGM practice provide both direct and indirect motives for the perpetuation of socio-cultural practices that impact negatively on girls' education. As Schildkrout (2004) argues, through FGM, the female body becomes a site for the inscription upon which the relationship between the individual and society is constructed. Our findings have established that as a bodily practice, FGM regulates the attitudes, actions, and behaviours of both Kuryan parents and girls towards formal education. As Clarence-Smith (2008) posits, therefore, the power of FGM practice lies in its ability to influence and control actions and behaviours within the social sphere.

Arguably, the results of this study are somewhat contradictory having unearthed both *protective* and *risk factors* associated with the FGM practice on girls' wellbeing. On the one hand, FGM serves as self-protection of girls against isolation and stigma, while, on the other hand, the practice is also seen as a non-protective factor because it limits girls' access to and participation in education.

The results of our study clearly present a challenge for communities like Kurya to give up easily the FGM practice without the alternative rites of passage for girls. We therefore conclude that effective interventions to end FGM practice are likely to succeed if they would take into account the socio-cultural meanings and symbolic-nexus associated with the female circumcision in the Kuryan community.

Note

1. Standard Seven refers to the last year in primary education in Tanzania, which consists of consists of seven years beginning at age 7 and graduating at age 13.

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No potential conflict of interest was reported by the authors.

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