

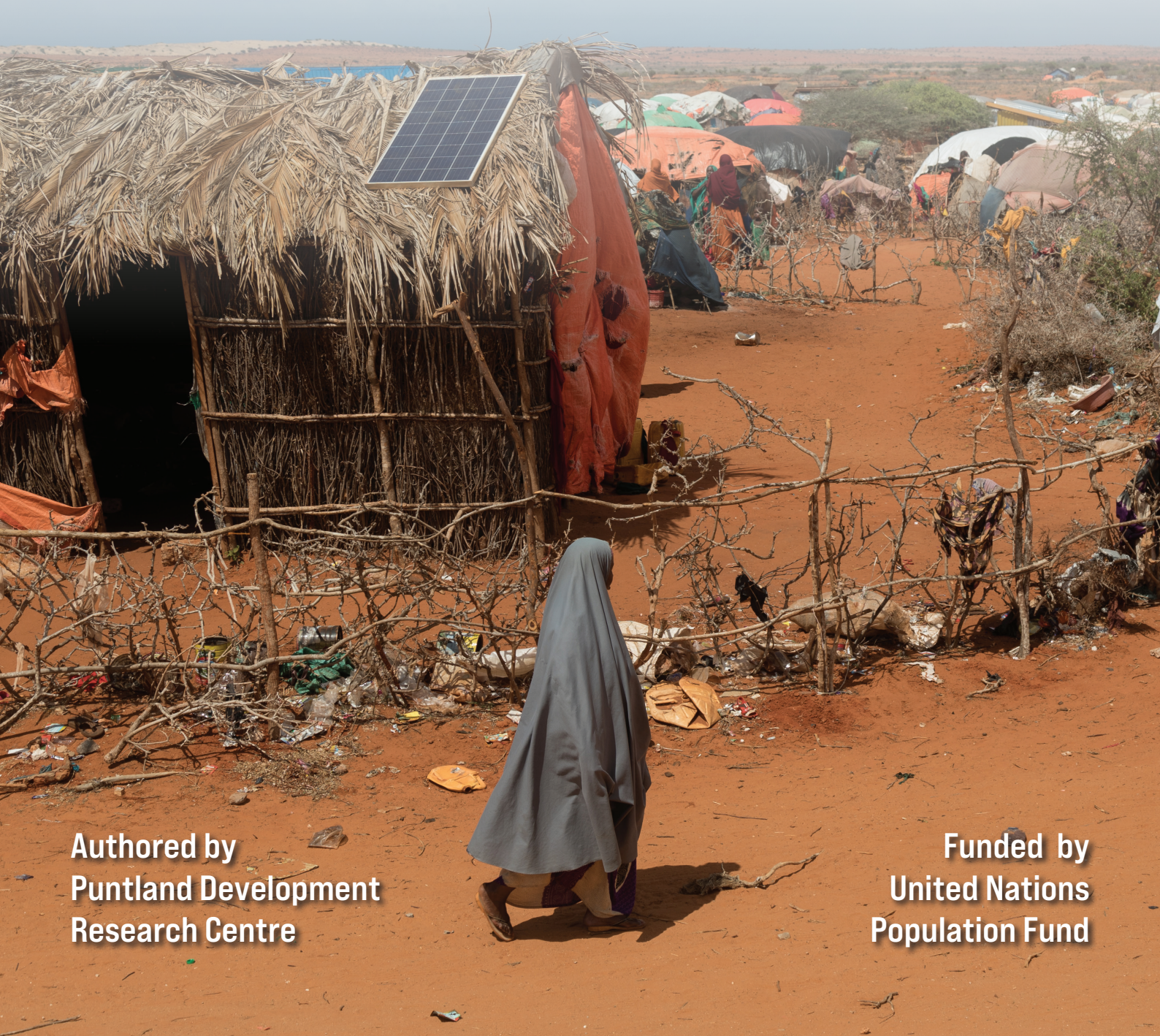
XARUNTA CILMIBAARISTA
NABADDA & HORUMARINTA



PEACE & DEVELOPMENT
RESEARCH CENTER



A Research Study on The Provisions of Islam on the Eradication of FGM in Somalia



Authored by
Puntland Development
Research Centre

Funded by
United Nations
Population Fund

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ACRONYMS

BC	Before Christ
BCE	Before the common or current era
BUH	Blessings be Upon Him
FC	Female Circumcision
FGM	Female Genital Mutilation
PDRC	Puntland Development and Research Centre
PBUH/PBUH	Peace be Upon Him
UNFPA	The United Nations Population Fund
WHO	World Health Organization

GLOSSARY OF TERMS

Ahadith	Plural of Hadith. A collection of Hadith.
Hadith	A record of the words, and actions (including silent approval) of the prophet Muhammad (Peace be Upon Him) transmitted through chains of narrators.
Chains of narrators	Refers to the first part of a Hadith, that lists the names of narrators through time, who conveyed that particular Hadith from one person to another; starting from the most recent and all the way to the person who heard it from Prophet Muhammad (Peace be upon him).
Da'if	Weak
Fatwa	A ruling on a point of Islamic law given by a recognized authority
Fard	Compulsory practice of Islam
Fiqh	Islamic jurisprudence
Ijma'	Juridical consensus
Kitaab	Book
Makramah	Virtuous deed
Qiyas	Analogical deductions or the use of analogical arguments
Sheikh	A religious title for men in Somalia
Sunna¹	Traditions and practices of the Prophet Muhammad (PBUH)
Sunna circumcision	Considered to be encouraged, supported or accepted in Islam and generally described as minor in terms of its physical infringement ² .
Surah	A chapter in the sacred scripture of Islam, the Qur'ān
SWT	Subhannahu Wa Taala - the most praised, and exalted.; An attribute of Allah, often suffixed with His name as a show of respect
Ulama	A body of scholars those who possess knowledge, particularly Islamic knowledge.
Wajib	Religious duty

¹ This should not be confused with FGM Type I, also commonly referred to as 'Sunna' (Sunna circumcision).

² Johansen REB (2022) Discourses of change: The shift from infibulation to sunna circumcision among Somali and Sudanese migrants in Norway. PLOS ONE 17(6): e0268322. <https://doi.org/10.1371/journal.pone.0268322>

ABSTRACT

Female Genital Mutilation (FGM) or Female Genital Cutting (FGC) is a deeply rooted cultural and religious practice. The campaign to eradicate FGM in Somalia dates back to 1977 when the Somali Women's Democratic Organization (SWDO) was formed by the military regime of Siad Barre. Since then, many efforts have been made to achieve the abandonment of FGM in Somalia. Following the fall of the military government, international organizations reactivated the campaign to eradicate FGM in Somalia. In 1996, UNICEF Somalia supported a series of awareness-raising seminars. In collaboration with local organizations, UNFPA and UNICEF held various programs and training to eradicate FGM³. However, the practice of FGM persists, with 98 percent of Somali women and girls aged 15–59 reported to have undergone FGM in Somalia⁴.

This research study, commissioned by UNFPA and undertaken by PDRC, is vital for understanding the historical precedence of FGM in Somalia and the resistance it has faced from the Ulama. The research was conducted through a literature review, key informant interviews (KII), focus group discussions (FGD), and semi-structured interviews with 45 different stakeholders, including the Ulama (Somali religious scholars), academics, medical practitioners, public servants, and civil society. The FGDs and KIIs were conducted in Mogadishu, Kismayo, Baidoa, Galkayo, and Garowe. Thematic analysis was used to identify patterns in the data from interviews, focus groups, and key informant interviews.

Key findings from the literature review revealed that no single verse in the Qur'an could justify FGM. Furthermore, there is neither authentic Hadith (a record of the words and actions of the prophet Muhammad, PBUH) nor evidence from the tradition of the Prophet (PBUH) about FGM. In addition, there are no Ijma'a (consensus of scholars) or qiyas (analogical deductions) to support FGM. However, the findings revealed that interpretations of FGM and FGC rulings vary among the Ulama. For example, some perceive Type I FGM or Sunna as parts of the Islamic religion presumed to be recommended by the Prophet (PBUH). At the same time, FGM Type III, or Pharaonic, is perceived as not being part of the religion and should be prohibited. Their argument is based on a Hadith known as "Hadith Om Attiyah" and some other Ahadith related to FGM. Others argue that FGM is Makramah (a virtuous deed) and that the benefits far exceed the harm.

The Ulama who participated in this study propose that all Ulama should listen to and consult medical practitioners before giving any ruling on FGM. In addition, the Ulama agree with the findings of the literature review in this assessment, arguing that the Ahadith related to FGM are not authentic and can be misunderstood and misapplied to advocate or practice FGM. Furthermore, they state that if FGM is indeed an Islamic precept or principle, the Prophet (PBUH) would have been the first to apply this practice to his wives and daughters, something the Prophet (PBUH) never did. Moreover, the Ulama state that the "Sunna" currently practiced in Somalia differs from the FGM mentioned in the unauthentic Ahadith. They conclude that some people use the "Sunna" as an

³ Refworld. [Somalia: Report on Female Genital Mutilation](#), 1 June, 2001. Retrieved 25 December, 2021.

⁴ WHO. (2021, February 4). [In Somalia, health workers, girls and women are experts in preventing female genital mutilation](#). Retrieved September 05, 2021



excuse to subject girls to FGM Type III or Pharaonic and cause harm. According to these Ulama, FGM is not permissible in Islam, as advocated by the authentic Hadith, "Do not harm yourself or others." ⁵

⁵ Narrated by Al Dar Qutny on the authority of Abu Said Al Khidri of whom Al Hakem said: authentic on the condition of Muslim; Sunnan Ibn Majeh, 2/784 No. 2340; Mawta Malik: 2/745; Al Sunnan Al Kobra by Bahiqi: 6/69; Al Mostadrak by Al Hakim, 2/58; Sunnan Al Dar Qutny, 4/227; Majma' Al Zawa'id, 4/110

BACKGROUND

Throughout history, cultural and traditional practices have been used to justify abhorrent and inhumane acts, and FGM is no exception. FGM is reported to be practiced worldwide, with the highest prevalence in western, eastern, and north-eastern regions of Africa, certain countries in Asia and the Middle East, and among specific immigrant communities in North America and Europe.⁶ According to a World Health Organization (WHO) report, more than 200 million girls and women are estimated to have undergone FGM in 30 countries across Africa, the Middle East, and Asia.⁷ Somalia, in particular, has one of the highest rates of FGM, with an alarming 98 percent of women and girls aged 15–59 having undergone the procedure, often between the ages of five and eleven. This harmful practice persists due to cultural and religious justifications among the general public and some religious scholars.⁸

FGM, also known as "female circumcision" or "female genital cutting," encompasses all procedures involving the partial or total removal of the external female genitalia⁹ or other non-medical injuries to the female genital organs¹⁰. The procedure can lead to severe bleeding, urinary issues, cysts, infections, childbirth complications, and an increased risk of newborn deaths¹¹.

Internationally, FGM is recognized as a violation of the human rights¹² of girls and women. It perpetuates deep-rooted gender inequality and constitutes an extreme form of discrimination against women, infringing upon several fundamental human rights. FGM is predominantly carried out on minors who lack the capacity to make informed decisions due to their age. This practice violates their rights to health, security, and physical integrity, as well as their right to be free from torture and cruel, inhuman, or degrading treatment. In cases where the procedure results

⁶ WHO. (2008). *Eliminating Female Genital Mutilation*. Geneva: WHO Press, World Health. Retrieved October 20, 2021

⁷ Arab States Regional Office (ASRO). *Impact of COVID-19 on FGM trends and Programming in the Arab Region*. P.11, 2019

⁸ WHO. (2021, February 4). In Somalia, health workers, girls and women are experts in preventing female genital mutilation. Retrieved September 05, 2021

⁹ Gharib EL. (2019, January 24). The Challenge of Female Genital Mutilation. *Scientific Journal of Research & Reviews - SJRR*, Volume 1(Issue 3). doi:10.33552/SJRR.2019.01.000512

¹⁰ WHO. (2021, February 04). <https://www.who.int/news-room/feature-stories/detail/in-somalia-health-workers-girls-and-women-are-experts-in-preventing-female-genital-mutilation>. Retrieved from <https://www.who.int/: who.int/news-room/feature-stories/detail/in-somalia-health-workers-girls-and-women-are-experts-in-preventing-female-genital-mutilation>

¹¹ WHO, Female Genital Mutilation, Fact Sheet. <https://www.afro.who.int/health-topics/female-genital-mutilation>. Retrieved September 05, 2021.

¹² WHO. (2008). *Eliminating Female Genital Mutilation*. Geneva: WHO Press, World Health. Retrieved October 20, 2021, from https://www.un.org/womenwatch/daw/csw/csw52/statements_missions/Interagency_Statement_on_Eliminating_FGM.pdf

in death, it also violates the right to life. The abandonment of FGM is a critical objective of the Sustainable Development Goals for the period 2015–2020.¹³

A recent survey conducted by Plan International in February 2021 revealed that 61 percent of respondents believed that FGM had increased in Somalia as a result of COVID-19 measures and school closures. Sadia Allin, the country director for Plan International Somalia, expressed concern, stating, "Without renewed efforts, there is a real risk that the progress we have made in raising awareness of the dangers of FGM and encouraging communities to stop the practice will be lost."¹⁴

This study aims to conduct an analytical assessment of the various perspectives of Islamic scholars regarding FGM. By examining extensive literature and researching different Islamic views on FGM among Somali religious scholars, medical practitioners, academics, public servants, and members of civil society, the study seeks to provide information on the Islamic provisions regarding the abandonment of FGM. Ultimately, this research aims to contribute to informed advocacy for ending the practice of FGM.

PURPOSE AND OBJECTIVES

The purpose of this study was to conduct an analytical assessment of the provisions of Islam concerning FGM. The primary objective of the study was to promote the achievement of zero tolerance for FGM through policy, legislation, and programs.

SPECIFIC OBJECTIVES

1. Conduct a literature review on the relationship between Islam and FGM in Somalia with regards to
 - a. doctrinal - how the religion, its texts, scriptures, or doctrines address or influence the perspective on the practice and
 - b. Interpretative - how religious scholars interpret/understand teachings of the religion in relation to the practice.
2. Gather and present information regarding the different provisions of Islam pertaining to the eradication of FGM in Somalia.
3. Formulate recommendations on essential strategies to promote the abandonment of FGM in Somalia.

RESEARCH QUESTION

The study aimed to achieve its objectives by addressing the following research questions using a variety of research methodologies:

¹³ Economic Development & Institutions . (2020, February). Female Genital Cutting and the Slave Trade. Retrieved October 08, 2021, from <https://edi.opml.co.uk/>: <https://edi.opml.co.uk/wp-content/uploads/2020/02/Female-Genital-Cutting-.pdf>

¹⁴ Plan International. Covid-19 Leading to Rise in Group FGM gatherings in Somalia. Retrieved October 9, 2021, from: <https://plan-international.org/news/2021-02-06-covid-19-leading-rise-group-fgm-gatherings-somalia>

4. What are the Islamic teachings and principles concerning FGM?
5. How do Somali Ulama interpret and understand the practice of FGM?
6. What factors contribute to the high prevalence and continued practice of FGM within Somali communities?
7. What actions and influence do Somali religious scholars have in eliminating the practice of FGM in Somalia?

RATIONALE OF THE STUDY

The rationale for conducting this study on FGM in Somalia is based on the historical efforts and current initiatives to address and eradicate the practice. The section provides an overview of the context, challenges, and progress made in relation to FGM in Somalia, and the need for research based insights for policymakers and organizations involved in combating FGM. The following historical and political developments provide the basis for the conduction of the study:

1. **Historical Efforts:** The study acknowledges the early initiatives that started in 1977, with the formation of the Somali Women's Democratic Organization (SWDO) and the support of the military government to eradicate FGM and the implementation of an alternative - method as a step towards reducing harm and infection¹⁵, and the subsequent multi-sectoral campaigns based on health concerns and religious arguments against FGM¹⁶.
2. **Impact of Political Changes:** The study recognizes the impact of political changes and the collapse of the military regime in 1991, that disrupted the progress and technical basis of the campaign against FGM¹⁷. It acknowledges the subsequent reactivation of efforts by international organizations to address FGM in Somalia. For example, in 1996, UNICEF Somalia supported a series of awareness-raising seminars attended by women's grassroots organizations, religious leaders, politicians, health professionals, and other representatives of the population.¹⁸
3. **Policy and Legislative Initiatives:** The study acknowledges the various efforts and attempts to ban and eradicate FGM in Somalia including policies and legislative initiatives undertaken at both federal and local government levels in Somalia. Specifically, the inclusion of provisions in

¹⁵ This alternative circumcision method received public acceptance as planned. US. Department of State. Somalia: Report on Female Genital Mutilation (FGM) or Female Genital Cutting (FGC). 11/04/2003. Retrieved November 17 December, 2021, from: https://www.justice.gov/sites/default/files/eoir/legacy/2013/06/10/somalia_2.pdf

¹⁶ The military government introduced an alternative method in healthcare facilities to replace the more harmful Pharaonic procedure, which gained public acceptance. Followed by multi-sectoral campaigns highlighting FGM's dangers to women's health, absence of any Quranic justification, and the myth of its association with chastity. In 1989, an international conference was held in Mogadishu to address strategies for change in female circumcision. However, despite its policy to eradicate FGM, the government did not translate it in to a law. The only existing legal framework addressing FGM-related issues were the provisions within the penal code that addressed the categories of "hurt," "grievous hurt," and "very grievous hurt"; there provisions were used to address FGM cases and their associated legal consequences.

¹⁷ Plan International. Covid-19 Leading to Rise in Group FGM gatherings in Somalia. Retrieved October 9, 2021, from: <https://plan-international.org/news/2021-02-06-covid-19-leading-rise-group-fgm-gatherings-somalia>

¹⁸ Refworld. Somalia: Report on Female Genital Mutilation, 1 June, 2001. Retrieved 25 December, 2021, from: <https://www.refworld.org/docid/46d5787c32.html>

- Somalia's Provisional Constitution that categorize FGM as "torture" and prohibit the circumcision of girls¹⁹.
4. **Regional Efforts:** The study also recognizes the efforts made in Puntland, including; the passing of a law making FGM illegal by the parliament of the Puntland administration (1999)²⁰, even though, no evidence currently suggests the enforcement of the law; the Fatwa issued by Ulama to end FGM (2013)²¹; and the unanimous endorsement of a Zero-Tolerance FGM bill banning all forms of FGM by the Puntland cabinet (2021). While local and international organizations such as UNFPA, Puntland Development and Research Centre, Puntland Media Association, and Puntland Youth Peer Network have supported the bill. The bill is still facing resistance from Ulama (religious leaders) who advocate for the legitimization of Sunna FGM, and is yet to be presented to the parliament.
 5. **Role of Ulama and Stakeholders:** The study acknowledges the role of Ulama in shaping public opinion and influencing the discourse on FGM in Somalia. It recognizes the existence of differing viewpoints among Ulama and the ongoing efforts by local and international organizations to engage with them and promote change.

Based on the historical and political developments mentioned above, the findings and recommendations of this study, which provide an analytical assessment of Islam's stance on FGM, will serve as a valuable knowledge resource for government officials and legislators. This will enable them to make informed decisions regarding FGM. Furthermore, it will contribute to the development of more effective strategies for local and international organizations involved in eradicating FGM in Somalia.

METHODOLOGY

The study employed an analytical research method to investigate the presence of FGM as a precept in Islam and to explore potential gaps in knowledge, uncover novel perspectives, and verify or challenge existing assumptions²².

Extensive literature reviews were conducted, focusing on FGM in general and Islamic literature specifically related to FGM. Emphasis was placed on analyzing the Ahadith associated with the practice. The objective was to examine the available literature on FGM and the interpretations of FGM among Islamic scholars, with the aim of establishing whether FGM has a foundation within Islamic teachings.

Key Informant Interviews (KII), Focus Group Discussions (FGDs), and semi-structured interviews were conducted with a diverse range of participants, totaling

¹⁹ The Federal Republic of Somalia. Provisional Constitution. Adopted August 1, 2012 Mogadishu, Somalia. Retrieved 25 December, 2021, from: <http://hrlibrary.umn.edu/research/Somalia-Constitution2012.pdf>

²⁰ The parliament of the Puntland administration unanimously approved legislation that makes the practise of FGM illegal, in November 1999.

²¹ US. Department of State. Somalia: Report on Female Genital Mutilation (FGM) or Female Genital Cutting (FGC). 11/04/2003. Retrieved November 17 December, 2021, from: https://www.justice.gov/sites/default/files/eoir/legacy/2013/06/10/somalia_2.pdf

²² Valcárcel, M. (2017). Usefulness of Analytical Research: Rethinking Analytical R&D&T Strategies. ACS Publications, 89 (21), 11167-11172.

45 individuals, comprising 12 female and 33 male stakeholders. The study participants included Ulama, academics, medical practitioners, public servants, and members of civil society. The research activities were carried out in multiple locations, namely Mogadishu, Kismayo, Baidoa, Galkayo, and Garowe.

The collected qualitative data were analyzed using thematic analysis, a methodological approach aimed at identifying recurring patterns of meaning across the data set. Through this analysis, themes and conclusions were derived, providing insights into the perspectives of the study participants regarding the Islamic provisions relating to FGM.

The tables below present an overview of the study participants, reflecting the diversity of perspectives sought during the research process.

Table 1: Overview of Study Participants

Participant Category	Number of Participants
Ulama	20
Academics	10
Medical Practitioners	5
Public Servants	5
Civil Society Members	5

Table 2 Categorization of Study Participants

Category/ Variables		Religious Scholars	Medical Practitioners	Representatives of Government / Politicians	Activists	Total	%
Gender	Male	28	0	4	1	33	73.3
	Female	1	5	4	2	12	26.6
Total		29	5	8	3	45	100

Table 2 Activities and number of activities per location

Location	Mogadishu		Kismayo		Galkayo		Baidoa		Garowe		Total
Activity name	FGD	KII	FGD	KII	FGD	KII	FGD	KII	FGD	KII	
Number of activities	3	3	6	4	5	4	6	4	5	5	
Total	6		10		9		10		10		45

LITERATURE REVIEW

FGM: TERMS AND CLASSIFICATION

The World Health Organization (WHO) has classified FGM into four types²³:

1. **Type I:** clitoridectomy, also known as clitorectomy. It refers to the removal of the clitoral hood, i.e., the cutting away of the upper fold of the clitoris, which may be accompanied by partial or total removal of the clitoris. This is also equivalent to "Sunna circumcision" (i.e., excision of the prepuce and all or part of the clitoris).²⁴
2. **Type II:** known as excision. It is the partial or total removal of the clitoral hood and the clitoris and the cutting away of the labia minora (without excision of the labia majora) in whole or in part. Labia minora and majora are the skin folds that cover the exterior part of the female genitalia.
3. **Type III:** known as infibulation or Pharaonic, this procedure involves the total or partial removal of a woman's external genitalia as well as suturing or narrowing of the vaginal opening, formed by cutting and repositioning the labia minora and/or labia majora, with or without the removal of the clitoris.
4. **Type IV:** This includes all other harmful procedures to the female genitalia for non-medical purposes, e.g., pricking, piercing, or incising the clitoris or labia minora or majora.²⁵

Aside from the classifications mentioned above, literature reveals that the terminologies used for FGM vary by community. For instance, when FGM first attracted international attention, populations in Eastern and Northern Africa used the term "Female Circumcision" (FC) to describe the practice, of FGM Type I, which is equivalent to "Sunna" circumcision. UNFPA discourages the use of the term "Female Circumcision" as it is considered to downplay the significant impact this practice has on the social and mental well-being of women and girls. Instead, UNFPA, along with the United Nations, human rights organizations, and a wide range of women's health organizations, employs the term "FGM" to emphasize the gravity of the practice and to underscore that it constitutes a violation of women's and girls' basic human rights. However, in the late 1990s, the term "Female Genital Cutting" (FGC) was introduced, partially in response to the word "mutilation," which caused dissatisfaction among some communities, particularly

²³ World Health Organization (WHO), "Eliminating Female Genital Mutilation: An Interagency Statement," 2008. (from <https://www.who.int/reproductivehealth/publications/fgm/9789241596442/en/>)

²⁴ Elmusharaf, S. (2006, July 13). Reliability of self reported form of female genital mutilation and WHO classification: cross sectional study. The BMJ, 333(124). Retrieved November 25, 2021, from <https://www.bmj.com/content/333/7559/124>

²⁵ UNICEF. (2019, June). Female Circumcision (FGM/C) between the Incorrect Use of Science and the Misunderstood Doctrine. Cairo: UNICEF. Retrieved October 19, 2021, from <https://www.unicef.org/https://www.unicef.org/egypt/media/3576/file/FGM%20Summary.pdf>

parents, as it conveys a sense of cruelty²⁶. For the purpose of this study, the terms FGM, FC, and FGC are used interchangeably.

FGM: ORIGIN AND HISTORICAL ACCOUNTS

FGM has been practised in many different countries and communities throughout the centuries. FGM is believed to have ancient roots, with evidence of its practice dating back thousands of years in various regions of Africa, the Middle East, and Asia²⁷.

It is often argued that the practise of FGM originated in the Nile Valley and spread to adjacent areas by diffusion along the trade routes. Ancient Egypt, during the rule of the pharaohs, is believed to be the place of origin for FGM.²⁸ This belief, is supported by the discovery of circumcised mummies from 484 B.C.²⁹ providing evidence that FGM was practiced in ancient Egypt, encompassing present-day Sudan and Egypt. Today, the term "Pharaonic circumcisions" (i.e., Egyptian) is used in Sudan, while in Egypt the term "Sudanese circumcisions" is prevalent.³⁰

Herodotus, the Greek historian, documented the practise of FGM during his visit to Egypt in the mid-fifth century B.C. He noted that Nile Nubians performed circumcision on girls aged nine or ten, categorized them as either Sanaa [Sunna] or Pharaonic types.³¹ The association between Egypt and FGM is corroborated by the Greek geographer, philosopher, and historian Strabo, who visited Egypt in 25 BCE. Strabo wrote that both the Egyptians and the Jewish population were circumcising boys and girls.³²

Although the exact origin of the practise remains unknown, these historical records show that FGM existed before the Christianity and Islam and demonstrate that the practice is not exclusive to any particular religion.³³

El-Damanhoury, , stated in his scholarly writings on "The Jewish and Christian View on Female Genital Mutilation," which were published in the ScienceDirect Journal, that *"FGM is neither mentioned in the Torah nor the Gospels, and - like*

²⁶ UNFPA. (2020, July). Female genital mutilation (FGM) frequently asked questions. Retrieved September 2020, from <https://www.unfpa.org/>: https://www.unfpa.org/resources/female-genital-mutilation-fgm-frequently-asked-questions#practice_origins

²⁷ WHO (World Health Organization). (2008). Eliminating Female Genital Mutilation: An Interagency Statement. Retrieved from <https://www.who.int/reproductivehealth/publications/fgm/9789241596442/en/>

²⁸Hicks 1993. As cited in Johnsdotter, S. (2012, March). Projected Cultural Histories of the Cutting of Female Genitalia: A Poor Reflection as in a Mirror. *History and Anthropology*, 23(1), 91–114. doi:10.1080/02757206.2012.649270

²⁹Slack, A. T. (1988). Female Circumcision: A Critical Appraisal. *Human Rights Quarterly*, 10(4), 437-86. Retrieved September 06, 2021, from <https://doi.org/10.2307/761916>.

³⁰Mackie, G. (1996). Ending Footbinding and Infibulation: A Convention Account. *American Sociological Review*, 61(6), 999–1017. Retrieved October 22, 2021

³¹Gharib EL. (2019, January 24). The Challenge of Female Genital Mutilation. *Scientific Journal of Research & Reviews - SJRR*, Volume 1(Issue 3). doi:10.33552/SJRR.2019.01.000512

³²Gharib EL. (2019, January 24). The Challenge of Female Genital Mutilation. *Scientific Journal of Research & Reviews - SJRR*, Volume 1(Issue 3). doi:10.33552/SJRR.2019.01.000512

³³ UNFPA. (2020, July). Female genital mutilation (FGM) frequently asked questions. Retrieved September 2020, from <https://www.unfpa.org/>: https://www.unfpa.org/resources/female-genital-mutilation-fgm-frequently-asked-questions#practice_origins

in Islam - bodily mutilation is condemned by both religions." He concluded that FGM is a combination of mainly cultural and social factors, which may put tremendous pressure on members of the society in question.³⁴

FGM IN SOMALIA

The first clear description of cutting and modification of female genitalia in Africa was made by Pietro Bembo (1470–1547), an Italian historian famous for his accuracy. At the beginning of the 16th century, he wrote a volume in Latin titled "Istoria Venetiana," which contains the first known description of infibulation.³⁵

"...They now left the other countries, sailed into the Red Sea, and visited several other countries, inhabited by blacks, excellent men, brave in war. Among these people, the private parts of the girls are sewn together immediately after birth, but in a way not to hinder the urinary ways. When the girls have become adults, they are given away in marriage in this condition and the husbands' first measure is to cut open with a knife the solidly consolidated private parts of the virgin. Among the barbarous people, indubitable virginity at the marriage is held in such high esteem".³⁶

It is unclear where Bembo obtained this information. Some scholars suggest that he may have acquired such descriptions from Venetian sailors or from Ethiopian delegates who, in 1441, were present at the Council of Florence.³⁷ Besides the prehistoric connection between FGM and Bembo's account, there is also evidence connecting FGM to slavery. Research conducted by Economic Development & Institutions in 2020 on FGM and the slave trade found evidence suggesting that *"women belonging to ethnic groups whose ancestors were traded in the Red Sea route are more likely to be cut today with all types of circumcision, including infibulation [also known as Pharaonic]"*. This study discovered strong evidence that East African communities along the Red Sea slave trade route still practice FGM today. This can be linked to ancestral ethnic groups taken from Murdock's Ethnographic Atlas.³⁸

Based on the literature review, it is unclear when the practise of FGM began in Somalia. However, some 16th-century historians and explorers, including Joao Dos Santos and Forbes, clearly reported that a group in an inland area of Mogadishu used to practise FGM, particularly on their female slaves:

³⁴El-Damanhoury. (2013, September). The Jewish and Christian view on female genital mutilation. African Journal of Urology, 19(3), 127-129. Retrieved October 19, 2021, from <https://www.sciencedirect.com/science/article/pii/S1110570413000258>

³⁵ Bembo, 1st edn 1551 or 1552, in Widstrand 1964: 118n2. As Cited in Johnsdotter, S. (2012, March). Projected Cultural Histories of the Cutting of Female Genitalia: A Poor Reflection as in a Mirror. History and Anthropology, 23(1), 91–114. doi:10.1080/02757206.2012.649270

³⁶Ibid

³⁷Widstrand 1964: 118. As Cited in Johnsdotter, S. (2012, March). Projected Cultural Histories of the Cutting of Female Genitalia: A Poor Reflection as in a Mirror. History and Anthropology, 23(1), 91–114. doi:10.1080/02757206.2012.649270

³⁸Economic Development & Institutions. (2020, February). Female Genital Cutting and the Slave Trade. Retrieved October 08, 2021, from <https://edi.opml.co.uk/>: <https://edi.opml.co.uk/wpcms/wp-content/uploads/2020/02/Female-Genital-Cutting-.pdf>

"A group had a custom tradition to sew up their young female, especially their slaves to make them unable for conception. This is for the chastity of the female slaves, which increases the confidence their masters put in them and to sell dearer".³⁹

Other historians also commented on FGM among Somalis in the 17th century. For instance, in 1833, Forbes noted in Bridges.

"The women [among Somalis] are not only circumcised when very young but the external labia are scarified & allowed to adhere [to] the smallest opening only being left for the passage of the urine. When they are married or go to live with the man who takes them the parts are torn open by separating the adhesions".⁴⁰

Today, FGM is a strong social norm practised in Somalia with deep cultural and religious roots. It is perpetuated due to three major reasons⁴¹: Communities in Somalia believe that a) FGM is a Somali tradition; b) it is seen as an Islamic obligation; and c) it enforces the cultural value of sexual purity in females by controlling female sexual desires. Communities believe that FGM preserves virginity before marriage and fidelity throughout a woman's life. Therefore, almost all Somali ethnic communities, in Kenya, as well as those in Somalia, Djibouti, and Ethiopia, have practised FGM for centuries, and the practise appears to have largely remained unchanged.⁴²

SUMMARY OF ISLAMIC PERSPECTIVE ON FGM

FGM is neither a new issue nor a new topic of debate among Islamic scholars. For instance, in 1940, several Islamic scholars in Egypt debated whether FGM was Fard (obligatory duty for a follower of Islam) or Sunna (practice recommended by the Prophet), concluding that it was Makramah (a virtuous deed). The word Makramah negates FGM as a religious duty (Wajib) or a practice recommended by the Prophet (Sunna).⁴³

These Muslim scholars and jurists based their legal fatwa on a variety of different matters and scientific facts related to FGM, including views given by experts, scientists, and scholars, all of whom have over the years informed jurists about the

³⁹ Dos Santos in Freeman-Grenville 1962:150. As Cited in Johnsdotter, S. (2012, March). Projected Cultural Histories of the Cutting of Female Genitalia: A Poor Reflection as in a Mirror. *History and Anthropology*, 23(1), 91–114. doi:10.1080/02757206.2012.649270

⁴⁰ Forbes 1833, in Bridges 1986:690. As Cited in Johnsdotter, S. (2012, March). Projected Cultural Histories of the Cutting of Female Genitalia: A Poor Reflection as in a Mirror. *History and Anthropology*, 23(1), 91–114. doi:10.1080/02757206.2012.649270

⁴¹ Gele, A. A., Kumar, B., Hjelde, K. H., & Sundby, J. (2012). Attitudes toward female circumcision among Somali immigrants in Oslo: a qualitative study. *International Journal of women's Health*, 7-17

⁴² Asmani; Maryam Sheikh Abdi. (2008). De-linking Female Genital Mutilation/Cutting from Islam. Retrieved November 28, 2021, from <https://www.unfpa.org/sites/default/files/pub-pdf/De-linking%20FGM%20from%20Islam%20final%20report.pdf>

⁴³ Al-Awa, M. S. (2018, September 5). FGM in The Context of Islam. Retrieved December 01, 2021, from [https://www.eg.undp.org](https://www.eg.undp.org/content/egypt/en/home/library/womens_empowerment/fgm-in-the-context-of-islam.html): https://www.eg.undp.org/content/egypt/en/home/library/womens_empowerment/fgm-in-the-context-of-islam.html

negative psychological, physical, and social impacts of FGM on women.⁴⁴ No descriptions of the practise were found in Islamic texts or in the Ahadith.

Additionally, Islam forbids causing harm to one's health. Prophet Muhammad (PBUH) says: *"There should be neither harming nor reciprocating harm."*⁴⁵ FGM has been scientifically and practically proven to be harmful and therefore falls under the Islamic ruling that *"There should be neither harming nor reciprocating harm."*⁴⁶ In light of this, under the Islamic Fiqh, cutting or damaging the labia of a female, whether she is young, old, virgin, or not, causes legal retribution or blood money. Imam Al-Shafi'i described in his famous Fiqh book 'Al-Umm' the retribution of cutting the labia of a female.

*"...If a woman's labia were cut by a man, he will not be legally retributed as he does not have the same body part. However, if the labia were cut by a woman, the damaged person may choose between applying the legal retribution, if probable, or receiving the full Diah (blood money), in her will. Half of the Diah is deserved for each labium. Damaging the labia combined by the upper part of hypogastrium, leads to the full Diah and the arbitration, respectively, even if the latter is disabled like hand paralysis, whether the woman is excised or not. If a person cuts the connection between the severed labia, he shall be subject to arbitration. The labia and hypogastrium for any female, whether she is young, old, youth, virgin, unmaidenly, or experiences imperforate hymen, are equal".*⁴⁷

However, the definitive approach to answering the question of whether female circumcision, in general, is an Islamic principle should be grounded in the four fundamental principles of Islamic jurisprudence: the Holy Quran, the Sunna, the Ijma' (juridical consensus), and analogical deductions.

- The Quran does not make any reference to female circumcision.
- There are a number of Hadith that scholars interpret as referring to female circumcision, but the Hadith are vague, and there is no scholarly consensus on their meaning. Details included in the following section.
- Similarly, there is no consensus (Ijma) among Islamic scholars regarding a specific legal ruling on female circumcision.
- Finally, there is no accepted Qiyas or analogy that supports this practice⁴⁸.

⁴⁴Serour, G., & Ragab, A. R.-H. (2013). Female Circumcision between the Incorrect Use of Science and the Misunderstood Doctrine. Retrieved December 01, 2021, from <https://www.endfgm.eu/>: https://www.endfgm.eu/content/documents/Final_English_FGM_summary.pdf

⁴⁵ Narrated by al-Daraqutni in his Sunan Kitab Al-Bayou' 3/ 77, P. 288, about Abu Saeed al Khudri, and narrated by Al-Hakim in al-Mustadrak Kitab Al-Bayou' 2/ 66, P. 2345, about Abu Saeed Al Khudri, was announced authentic Hadith by Al-Hakim and backed by Imam Az-Zahabi.

⁴⁶Serour, G., & Ragab, A. R.-H. (2013). Female Circumcision between the Incorrect Use of Science and the Misunderstood Doctrine. Retrieved December 01, 2021, from <https://www.endfgm.eu/>: https://www.endfgm.eu/content/documents/Final_English_FGM_summary.pdf

⁴⁷ Kitab Al-Umm, Imam Al-Shafi'i, volume 7, p. 185, 1st ed. published by Dar Al-wafaa, Masuura, Egypt, 2000.

⁴⁸ Al-Awa, M. S. (2018, September 5). FGM in The Context of Islam. Retrieved December 01, 2021, from <https://www.eg.undp.or>: https://www.eg.undp.org/content/egypt/en/home/library/womens_empowerment/fgm-in-the-context-of-islam.html

The evidence supporting these claims will be provided in the following section. Historically, and among the Ulama who participated in this study, there is no doubt or disagreement regarding the harmfulness of FGM type III (Pharaonic Circumcision). However, diverging views arise when asked the question, *"Is FGM, in general, an Islamic practise?"* Some say "Sunna" FGM (Type I) is part of Islam, while others argue that there is no evidence in the Holy Quran or the Sunna supports FGM. The various understandings of FGM among the Somali religious scholars who participated in this study will be discussed in Section IV.

ANALYSIS ON THE HADITHS RELATED TO FGM

As stated in the previous section, the analysis of FGM in relation to Islamic principles begins by examining the absence of references to FGM in the Quran, which is the primary source of religious guidance for Islam, or the Sunna, the recommended practices of Prophet Muhammad (PBUH), and the second major source of guidance. However, when examining the mention of FGM in Ahadith (i.e., the quotes of Prophet Muhammad, PBUH), doubts arise regarding the authenticity of all five Ahadith⁴⁹ associated with FGM, rendering them as Da'if (weak)⁵⁰. The most well-known hadith in this regard is the "Hadith Om Atteya". In addition, there are four other ahadith related to FGM. These Hadiths fall into two categories: weak Hadiths and authentic Hadiths, and they are wrongly used as arguments or evidence in support of FGM.

HADITH 1:

In this Hadith, a woman named Om Atteya from Medina who performed FGM in Medina, states that the Prophet (PBUH) told her:

يَا أُمَّ عَطِيَّةَ أَشْمِي وَلَا تَنْهَكِي فَإِنَّهُ أَسْرِي لِلْوَجْهِ وَأَحْظَىٰ عِنْدَ الزَّوْجِ - أَخْرَجَهُ أَبُو دَاوُدَ

"Do not cut severely as that is better for a woman and more desirable for a husband."

The Hadith was related by Al Hakim, Al Bayhaqy and Abu Dawood with weak attribution to the Prophet (PBUH), this has also been pointed out by Al Hafez Zeineddin Al Iraqy⁵¹. Abu Dawood, a prominent scholar of the Prophet Muhammad's (PBUH) Hadiths explained in his collections, "Sunnan Abu Dawood,"⁵² that the Hadith of "Om Atteya" was narrated by Obaidullah ibn Amr on the authority of Abdel Malik, with its meaning and ascription. However, he identified the Hadith as da'if⁵³, since its transmission was interrupted and because Mohamed Ibn Hassan, in the chain of narrators⁵⁴ is not known. Scholars such as Ibn 'Ahdy and Al Baqihy agreed with Abu Dawoud on the anonymity of the narrator, however, Al Hafez Abdel Ghany ibn Said disagreed, stating that the identity of the narrator was in fact Mohammad Ibn Said (who was crucified for

⁴⁹ A collection of traditions containing sayings of the prophet Muhammad (PBUH)

⁵⁰ A weak Hadith is a Hadith that fails to meet all of the conditions for a Hadith; and cannot be the basis of legal rulings.,

⁵¹ FGM In the Context of Islam by Dr. Mohamed Selim Al-Awa General Secretary of the International Federation of Islamic Scholars, retrieved December 1, 2022 from <https://egypt.unfpa.org/sites/default/files/pub-pdf/d9174a63-2960-459b-9f78-b33ad795445e.pdf>

⁵² Sunan Abi Dawud is a collection of Hadith compiled by Abu Dawood. It is widely considered to be among the six canonical collections of hadiths of the Prophet Muhammad (Peace Be upon him).

⁵³ Refer to 'Sunnan Abu Dawood with an explanation (Awn Al Ma'boud). 14/125-126.

⁵⁴ The chain of narrators reveals the process and manner of Hadith transmission from the Prophet Muhammad (PBUH).

being an atheist) was a known liar, and that scholars have identified 4000 Hadith fabricated by him.

In terminology of Hadith, when the same "version" of a Hadith is narrated by another individual, it is referred to as having a "witness." However, presence of a "witness" does not establish the authenticity of "Hadith Om Atteya" as the narrators of the "witness Hadith" also include an untrustworthy narrator called Sa'id Binu Fayrooz, also known as Abi Al-Bukhtari. What this means is that the Hadith does not qualify to be an authentic Hadith from the Prophet (PBUH).⁵⁵ Abu Dawood also commented on the status of the "witness Hadith," saying that *"the chain of narration of this Hadith is not strong as there is an unknown person among the narrators, and its chain of narration to the Prophet is broken."*

Despite the fact that "Hadith Om Atteya" has been deemed to be Da'if in various aspects by different Islamic scholars, Sheikh Al-Albani concluded in his book *"Silsilat Al Ahadith Al Sahiha"* that *"since the Hadith was narrated in various ways and by various narrators, it is not impossible to put this Hadith into the 'Hadith Hasan' category"*⁵⁶. "Hadith Hasan" (a good Hadith) is a term that describes a Hadith whose authenticity is not as well-established as that of an authentic Hadith e.g. because of a weak link in the chain of narrators but is sufficient for use as supporting evidence.

However, renowned scholar Dr. Mohammad Lotfy Al Sabbagh, in his study on female circumcision said: "Consider those two honorable Imams, Abu Dawoud and Al Iraq, who have described the Hadith as weak, and disregard those who maintain it is authentic"⁵⁷. Shams Aldin Al Haq Al Hazim Al Abady stated that the Hadith on female circumcision was narrated in different ways all of which are da'if and cannot form the bases of any legal ruling⁵⁸. Some contemporary scholars have traced back the ascriptions of "Hadith Om Atteya" and concluded that all the ascriptions are weak and that there is no proof of the authenticity of these narratives that can serve as the basis for a legal ruling on such a life-threatening issue as FGM. Therefore, scholars cannot anchor their arguments on narratives that cannot be traced to a credible source, since a valid argument can only be based on validity.⁵⁹

HADITH 2:

An authentic Hadith that is often wrongly quoted in discussions on FGM is one reported by Imam Bukhari in his book, *Sahih Al-Bukhari*:

"الفطرة خمس: الختان، والاستحدا، وتنف البط، وقص الشارب، وتقليم الظفار" - أخرجه البخاري

⁵⁵ Sunan Abu Da'ud, Kitab Al-Adab, Chapter: 'About Circumcision,' 4/368

⁵⁶ Silsilat Al Ahadith Al Sahiha, Muhammad Nasiruddin al-Albani, 2/353.

⁵⁷ FGM In the Context of Islam by Dr. Mohamed Selim Al-Awa General Secretary of the International Federation of Islamic Scholars, retrieved December 1, 2022 from <https://egypt.unfpa.org/sites/default/files/pub-pdf/d9174a63-2960-459b-9f78-b33ad795445e.pdf>

⁵⁸ Ibid

⁵⁹ Al-Awa, M. S. (2018, September 5). FGM in The Context of Islam. Retrieved December 01, 2021, from <https://www.eg.undp.or>
https://www.eg.undp.org/content/egypt/en/home/library/womens_empowerment/fgm-in-the-context-of-islam.html

"Acts of natural disposition are five: circumcision, removal of the pubic hair, shaving of the moustache, cutting of the fingernails, and plucking of the armpit hair."

The consensus among Muslim scholars in relation to this authentic Hadith is that male circumcision is a Sunna that should not be neglected. It also points out that shaving the moustache and growing a beard are acts pertaining to males only. The Hadith does not provide evidence in support of FGM, and it would therefore be erroneous to regard FGM as an act of natural disposition.⁶⁰

In addition to that, there is no evidence that the Prophet Muhammad (PBUH) had any of his wives or daughters circumcised. If Islam's principles based on the above Hadith were applicable to women, the Prophet (PBUH) would have applied the practise of female circumcision to his wives and daughters. This argument refutes the legitimacy of FGM based on this authentic Hadith.

HADITH 3:

Another authentic Hadith that is used as an argument in support of FGM is a Hadith reported by Aisha (May Allah Bless Her) the wife of the Prophet Muhammad (PBUH):

"إذا التقى الختانان فقد وجب الغسل" - أخرجه البخاري

*"If the two circumcised met [referring to a sexual relationship between a man and a woman] the ritual of ablution is a must"*⁶¹

According to the literature, this Hadith is authentic, but mistakenly - or due to a misunderstanding of the linguistic expression of the Arabic language - used by some as an argument in support of FGM. However, the Hadith is not reliable as evidence for FGM.⁶² Here, 'two circumcised' is referring to 'two organs', i.e., male and female organs.⁶³ The mentioning of two organs does not legitimize FGM. This is a classical stylistic form of duality in the Arabic language that is used in cases to refer to objects and persons that are not necessarily similar. Multiple examples of this classical duality are found in the Arabic language and in the Quran. For instance, the Holy Quran refers to the river and sea: *"And the two seas are not alike, this one is fresh, sweet, good to drink, this other bitter, salt"*.⁶⁴ Al Aswadaan,

⁶⁰ Al-Awa, M. S. (2018, September 5). FGM in The Context of Islam. Retrieved December 01, 2021, from <https://www.eg.undp.org/>:

https://www.eg.undp.org/content/egypt/en/home/library/womens_empowerment/fgm-in-the-context-of-islam.html

⁶¹ Reported by Imam Bukhari in Sahih Al-Bukhari, menstruation book, section of "water comes from water", 1/ 271 - 272, H 349, and was reported by Imam Malik in Muwatta, cleanness book, section of "ablution when the circumcised organs meet", 66/ 1.

⁶² Al-Awa, M. S. (2018, September 5). FGM in The Context of Islam. Retrieved December 01, 2021, from <https://www.eg.undp.org/>: https://www.eg.undp.org/content/egypt/en/home/library/womens_empowerment/fgm-in-the-context-of-islam.html

⁶³ Serour, G., & Ragab, A. R.-H. (2013). Female Circumcision between the Incorrect Use of Science and the Misunderstood Doctrine. Retrieved December 01, 2021, from <https://www.endfgm.eu/>: https://www.endfgm.eu/content/documents/Final_English_FGM_summary.pdf

⁶⁴ Surah Fatir, 12

meaning the two black things, referring to dates and water, although water is colourless; Al Qamaran, meaning the two moons; Al Nayran, meaning the two fires, referring to the sun and the moon, although the moon does not emit any light but reflects the light of the sun; and Al Omaran, meaning the two Omars, referring to Abu Bakr and Omar⁶⁵.

HADITH 4:

Another Hadith is reported to be:

"الختان سنة للرجال مكرمة للنساء"

"Circumcision is Sunna for men and Makramah [virtuous deed] for women"⁶⁶

Ibn Hajar al-'Asqalani deemed this Hadith as weak in his book 'Talkhis al-habir fi takhrij ahadith al-Rafi'i al-kabir'. He agrees with the relevant opinion of Al Hafiz Zin El-Din Al Iraqi in his comment on Imam Ghazali's book of 'Revival of Religious Sciences' that this Hadith has a weak narration. In addition, Ibn Abdul-Barr commented on this Hadith in his book 'Al-Tamhid Lima Fil-Muwatta Min al-Ma'ani Wal-Asanid', by saying: *'its narration is untrustworthy, and it is, therefore, unreliable'*.⁶⁷

HADITH 5:

Finally, the fifth Hadith used in support of FGM is a Hadith reported by Salem Bin Abdullah Ibn Ummar and Al-Bazar, both of whom cited in the narration of Ibn Ummar, that Prophet Muhammad (PBUH) said:

"يأمناء الأنصار اختضين غمسا واخفضن ن وال تنهكن، فإنه أحظى عند أزواجكن وإياكن وكفران المنعم"

"O Wives of Al-Ansar, circumcise slightly without exaggeration, because it is more pleasurable for your husbands, and beware of ingratitude for the grantor."⁶⁸

This Hadith is deemed to be weak, as Muḥammad al-Shawkānī, a prominent Islamic scholar pointed out. This is because one of the narrators in this Hadith, Mandal Ibn Aly is considered to be a weak narrator by consensus among Hadith scholars as he lied in the process of Hadith narrations. If a person is known as be a liar, the Hadiths he narrates are not accepted in Islam.⁶⁹

The remaining Hadiths concerning FGM are considered weak and cannot serve as a valid foundation for legal rulings. Evaluating the strength of a Hadith often involves investigating its chain of narrators, which entails examining the process and accuracy of transmitting the Hadith from Prophet Muhammad (PBUH). If a

⁶⁵ Ibid, 12

⁶⁶ Imam Shawkani said in Nil Al-Awtar, volume 1, P. 139, "... This Hadith was reported by Ahmed, and was reported by Al-Khalal about Shadad Ibn Aws, and was reported by Imam Bayhaqi citing the narration of Hajaj Ibn Artah, about Abu Mulaih, about Usamah, about his father. Hajaj said: misleading Hadith, and Qutadah was confused about it and said: it is weak Hadith.

⁶⁷ A'n Al-Ma'boud fi Sharh Sunan Abi Dawood" by Shams Al-Shaq Al-Azeem Ayadi, 14/ 124

⁶⁸ Reported by Ibn Udai in "alkamil fi da'fa' al-rijal fi tarjamat Khalid Ibn Umro Al-Qurashi Al-Sa'di, 3/ 457

⁶⁹ Al Nahw Al Wafi by Abbas Hassan, 1/118-119. As cited: Al-Awa, M. S. (2018, September 5). FGM in The Context of Islam. Retrieved December 01, 2021, from <https://www.eg.undp.org>:

https://www.eg.undp.org/content/egypt/en/home/library/womens_empowerment/fgm-in-the-context-of-islam.html

narrator within the narrator's chain is known for having a poor memory, frequent memory lapses, or any factors that can cast doubt on their ability to accurately convey the narration, scholars of Hadith may conclude that the narrator made errors. Furthermore, the credibility of the Hadith can be affected if there is evidence of dishonesty during the narration process. For example, a narrator in the chain may falsely claim to have heard the Hadith from an individual who lived in a different era than the narrator.

Upon careful examination and analysis, it can be concluded that the authentic Sunna, which encompasses the sayings and practices of Prophet Muhammad (PBUH), does not provide any substantiation for the legitimacy of FGM. In contrast, the Hadiths that are often cited to endorse FGM as a valid religious practice have all been identified as weak in their authenticity. Therefore, these aforementioned Hadiths lack the necessary credibility and reliability to serve as a foundational source for deriving a legal ruling pertaining to FGM.⁷⁰

ANALYSIS OF DIFFERENT SCHOOLS OF ISLAMIC JURISPRUDENCE (FIQH) ON FGM

Scholars have defined Fiqh (Islamic jurisprudence) "as knowledge of the canonical laws that are based on detailed evidence, that is the Holy Quran, the authentic Sunna, Ijma (Juridical consensus)' according to established conditions and acceptable Qiyas (analogical deductions)".⁷¹ The four major schools of Islamic jurisprudence, also known as fiqh, include: Hanafi School -Founded by Imam Abu Hanifa; Maliki - Founded by Imam Malik ibn Anas; Shafi'i - Founded by Imam Muhammad ibn Idris al-Shafi'i; and Hanbali - Founded by Imam Ahmad ibn Hanbal. The different schools of Islamic jurisprudence hold different opinions on FGM.

The **Shafi'i** school, which is reportedly followed by the majority of the Somali population holds two opinions on FGM. The followers of the Shafi'i school adhere to the opinion of Imam Shafi'i, who considers circumcision obligatory for both males and females"⁷² while, Ar Rafi'i believe that "Circumcision is Sunna for women".⁷³ This view is also supported by Imam Malik, claiming that "circumcision is Sunna for both males and female".⁷⁴

Among **Maliki** followers, FGM is mentioned as 'Makramah', an honourable act for females⁷⁵, while in the **Hanafi** school or in the jurisprudence of Imam Abu Hanifa, FGM is considered 'Mustahab' (recommended or favoured).⁷⁶ One definition of

⁷⁰ Al-Awa, M. S. (2018, September 5). FGM in The Context of Islam. Retrieved December 01, 2021, from https://www.eg.undp.org/content/egypt/en/home/library/womens_empowerment/fgm-in-the-context-of-islam.html

⁷¹ Al-Awa, M. S. (2018, September 5). FGM in The Context of Islam. Retrieved December 01, 2021, from https://www.eg.undp.org/content/egypt/en/home/library/womens_empowerment/fgm-in-the-context-of-islam.html

⁷² Kitab Al-Majmua Sharh al-Muhazhab, 1/349

⁷³ Ibid

⁷⁴ Refer to Kitab al-Kafi and Al-Tamhid by Imam Ibn 'Abdi'l-Barr al-Qurtubi, 1/621 and 21/61 respectively

⁷⁵ Refer to Kitab Fawākih al-dawānī 'Al risālat ibn Abī Zayd al-Qayrawānī, 1/394

⁷⁶ Refer to Hashiya Dur Al-Mukhtar and Ghamz uyun al-basai'r, 6/751 and 3/381 respectively

'Mustahab' is "the duties that are recommended, but not essential. Their fulfilment is rewarded, though they may be neglected without punishment". Among the **Hanbali** school, or followers of Imam Aḥmad ibn Ḥanbal there are two opinions on FGM: the first one emphasises that 'female circumcision is Sunna for females'⁷⁷, the other one is that it is Mustahab.⁷⁸

Based on this analysis, it is evident that there is no consensus or agreed opinion on FGM among the four major Islamic jurisprudences. Moreover, disagreement also exists within the same school of thought. This variation is not uncommon, as jurisprudences are developed by individuals with expertise in Sharia law to provide Muslims with guidance. As Al-Awa states:

"The words of the jurispudent are not "Sharia" and cannot be regarded as a "religion". They are an understanding of the stipulations of Sharia, adapting them to reality. The jurisprudents are not infallible and may give correct as well as erroneous interpretations. The qualified jurispudent is rewarded twice if correct and once if erroneous. Imam Shafii says: "My opinion is correct but it may be wrong; the opinion of others is wrong but maybe correct".⁷⁹



⁷⁷ Refer to Kitab Al-Insaaf and Kitab Furu'1/124 and 1/105

⁷⁸ Refer to Kitab Furoo by Imam ibn Muflih 1/105

⁷⁹ Al-Awa, M. S. (2018, September 5). FGM in The Context of Islam. Retrieved December 01, 2021, from <https://www.eg.undp.org>:
https://www.eg.undp.org/content/egypt/en/home/library/womens_empowerment/fgm-in-the-context-of-islam.html

DIFFERENT UNDERSTANDINGS OF FGM AMONG SOMALI RELIGIOUS SCHOLARS

Historically, the Somali population is known to predominantly follow the Shafi'i school of jurisprudence, which has been the source of Somali Ulama, and their jurisprudential rulings. More recently, with many Somali scholars having pursued education in various Islamic universities across the Muslim world, have resulted in the introduction of other major Islamic jurisprudences to the country. This has influenced on the Ulama's understanding of FGM, and led to their involvement in campaigns that advocate for its abandonment in Somalia. This exposure to different Islamic perspectives may also be a factor contributing to the varying viewpoints on FGM among the participants of this study. Some scholars make a distinction between FGM and "female circumcision," which influences their interpretation and perception of the practice; some understand female genital mutilation as type III (Infibulation/Pharaonic), arguing that female circumcision, on the other hand, is obligatory.

Sheikh Abdirisak in Galkayo stated: *"circumcision is obligatory to everyone, boys and girls under Shafia school. The practice of [female] circumcision is varied. The Sunna [Type I] is the permitted one, and Pharaonic [Type III] is prohibited [...] Sunna circumcision is obligatory".*⁸⁰

Sheikh Mohamed Abdulahi Bir agreed: *"My view is simple: there are two types of female circumcisions, Sunna and Pharaonic under Shafia. They obligate Sunna female circumcision...The issue arises when the practice is performed. Excess transgressions are done when conducting Pharaonic circumcision".*⁸¹

The distinction between two different forms of FGM, one deemed permissible (Sunna) and the other forbidden (Pharaonic), carries significant implications, as highlighted by Mohamoud Ali Jama, a participant in the focus group discussion (FGD) from Garowe. He explained that *"Pharaonic female circumcision is haram and illegal in Islam. Ulama have openly declared their views many times over the years".*⁸²

Sheikh Jama' Saleban, FGD member from Kismayo, agreed with this claim and said that *"It should be noted that there is another circumcision, other than Pharaonic which is part of the Millah [the religion]. I mean Sunna circumcision".*⁸³ He referred to this as Sunna circumcision and mentioned a Hadith that states that *"acts of natural disposition are five: circumcision, removal of the pubic hair,*

⁸⁰ Sheikh Abdirisak Abdiqadir Nor, FGD participant, Galkayo 24-31, October 2021

⁸¹ Sheikh Mohamed Abdulahi Bir, FGD participant, Galkayo 24-31, October 2021

⁸² Mohamoud Ali Jama, FGD participant, Garowe, 04-09 December

⁸³ Sheikh Jama Salaben Rabi, FGD participant, Kismayo, 18-23, Oct 2021

*shaving of the moustache, cutting of the fingernails, and plucking of the armpit hair”.*⁸⁴

However, as discussed earlier in section I of this study,⁸⁵ although this Hadith is authentic, it is erroneously misinterpreted to justify FGM. Yusuf Sheikh Mohamoud from Baidoa further explained that the authenticity of this Hadith is clear, but that *“Female circumcision is an act of dispute under Islamic religious scholars, some Ulama consider it as Sunna”.*

VIEWS OF RELIGIOUS SCHOLARS ON FGM RULINGS

The literature review revealed discrepancies in the major Hadiths on FGM, particularly in the case of ‘Hadith Om Atteya’. Numerous Islamic scholars regard this Hadith as weak due to a broken chain of narration leading back to the Prophet (PBUH). Consequently, the literature review also revealed that rulings on a life-threatening matter like FGM cannot be derived from a weak Hadith.

Sheikh Abdihayi Sheikh Adam Hassan, a participant in this study, shared the doubts expressed by Islamic scholars regarding the authenticity of ‘Hadith Om Atteya’. He explained that *“in general, there is a controversy among Ulama, particularly [on] the major Hadith [Hadith Om Atteya]. It is the Hadith that is mostly referred to when talking about female circumcision. But according to many scholars, it is not Sahih [authentic]”.*⁸⁶

Dr Mohamed Ali Ibrahim also acknowledged that many Islamic scholars consider the Hadith to be weak, noting that *“many Islamic Scholars deemed the Hadith to be weak.”*⁸⁷

Similarly, Sheikh Muse Ahmed in Mogadishu concurred that although some Shafi’i Ulama accept the practice of female circumcision, particularly the ‘Sunna’ circumcision mentioned in ‘Hadith Om Atteya’, its authenticity is also questioned by other Ulama within the same school. He said; *‘There is some sort of acceptance of the girl’s circumcision among Shafi’iya Ulama, particularly the ‘Sunna’ circumcisions articulated in ‘Hadith Om Atteya’. But the authenticity of this Hadith is also questioned by some other Ulama from the same school. The source of this Hadith is in dispute. This is explained well by many Islamic Scholars. Thus, many Ulama believe that there is no clear evidence to circumcise girls”.*⁸⁸

Sheikh Adam Sheikh Sa’id’s perspective on FGM aligns with that of Sheikh Muse Ahmed. He states, *“Female circumcision is not mandatory according to most Islamic scholars. It is predominantly considered as Makramah, a virtuous or honorable act.”*⁸⁹ Further stating that *“To the extent of my knowledge, there are*

⁸⁴ Sheikh Jama Saleban Raabi, FGD participant, Kismayo, 18-23, Oct 2021

⁸⁵ According to the literature, this is an authentic Hadith that is mistakenly used in support of female circumcision. The origin of this important and relevant Hadith is what was reported by Imam Malik in Muwatta, volume 12, P. 5: that Prophet Abraham (PBUH) was the first person to be circumcised. For a detailed explanation, refer to chapter 1 under ‘Analysis on the Hadiths related to FGM.’

⁸⁶ Sheikh Abdihayi. Sheikh Adam Hassan. KII participant, Benadir, 10-17, Oct 2021

⁸⁷ Dr Mohamed Ali Ibrahim. KII participant, Benadir, 10-17, Oct 2021

⁸⁸ Sheikh Muse Ahmed Mohamed, KII participant, Benadir, 10-17, Oct 2021

⁸⁹ Sheikh Adam sh. Said, KII participant, Baidoa, 18-23, Oct 2021

no clearly indicated Hadith on female circumcision. The reported Hadiths are indirectly used as evidence for practicing female circumcision ".⁹⁰

The study findings also revealed that the FGM Type 1 or Sunna currently practiced in Somalia differs from the 'Sunna FGM' mentioned in 'Hadith Om Atteya'. Prof. Mohamed Abdul-Kadir Enow, the Rector of the University Southern Somalia, emphasized that

"Circumcision and its current application are not part of the religion; it is not the soft one, the 'Sunna circumcision', which is said to be practiced during the prophet period".⁹¹ Omitting 'Sunna' [the prophet recommended practice] is not like omitting 'Wajib' [a religious obligation]. It is therefore necessary to compare the harm that the circumcision inflicts onto the girls to its benefits, which are none in this case. Thus, how things are done here [in Somalia] the Sunna is made Wajib and customs are more applied than the religion. Sunna can never be Wajib, therefore, creating awareness and breaching against female circumcision is necessary".⁹²

Sheikh Abdihayi had a similar opinion saying that *"the practice of FGM in Somalia is not the one that is referred to in the Hadith itself, which is prohibited. The consensus is 'Do not harm'".⁹³*

This position is supported by Sheikh Bashir from Baidoa, who questioned the authenticity of the Hadiths used to support FGM. *"In Somalia, the general perception of Sunna is not highly developed. Some people take the Sunna as Waajib. All the Hadiths that are directly related to FGM are weak, and an Islamic ruling cannot be based on a weak Hadith. Sunna is a recommended practice of Prophet Muhammad (PBUH), and had female circumcision been Sunna, the Prophet would have been the first to apply the practice on his wives and daughters".⁹⁴*

Based on the above accounts, it can be concluded that Ulama hold different perspectives on the understanding of FGM and its rulings. However, all participants in this study unanimously agree that FGM, particularly when performed as Infibulation/Pharaonic or Type III, is extremely harmful, not part of Islam, and should therefore be banned. They also assert that Islamically, the cutting of female genitals results in legal retribution or blood money.

PHYSICAL AND PSYCHOLOGICAL IMPLICATIONS OF FGM

According to the findings of this study, as reported by medical practitioners, FGD and KII participants, FGM in Somalia encompasses various names and types, including Pharaonic, 'Sunna Saqir' (little Sunna), and 'Sunna Kabiir' (big Sunna). Regardless of their designation, all these forms involve cutting or altering the

⁹⁰Ibid

⁹¹Prof. Mohamed Abdul-Kadir Enow, Rector of the University Southern Somalia, KII participant, Baidoa, 18-23, Oct 2021

⁹²Ibid

⁹³Sheikh Abdihayi. Sheikh Adam Hassan. KII participant, Benadir, 10-17, Oct 2021

⁹⁴ Sheikh Bashir Hassan Ali, FGD participant, Baidoa, 18-23, Oct 202

female reproductive organs. The practice of 'Sunna FGM' (Type I) is also sometimes used as a pretext to subject girls to 'Pharaonic FGM' (Type III).

Eidle Abdulqadir, a FGD participant from Garowe stated that *"people misuse the accepted circumcision (Sunna) by making a way through to circumcising their girls in the Pharaonic way to harm them. I urge the authority to ban it all for the safety of the girls. The practice of Sunna circumcision became a safe refuge for those seeking the Pharaonic one"*.⁹⁵

While FGM practitioners may claim that the procedure merely removes excess or insignificant skin or 'skin tags' from the female genitals, scientific evidence contradicts this notion. The scientific definition of an organ includes tissues that have essential functions in the body, nourished by blood vessels and nerves. During the process of FGM, the clitoris, which is a female erogenous zone and an organ, is cut and/or damaged. This invalidates the argument of removing extra skin tags from the female reproductive organs. The removal or alteration of such vital organs leads to short- and long-term physical, psychological, and social consequences for survivors.

The study also revealed that FGM is predominantly perceived as a matter concerning women in the domestic sphere, with mothers perceived to be responsible for carrying out the procedure.

Sheikh Abdirisaq Abdikadir Nor, a participant in the FGD, explained that *"mothers are the ones who are responsible and guide the performance of the procedure"*.⁹⁶ This implies that fathers, including male Ulama, often lack basic knowledge of FGM procedures and the specific parts of the female genitalia that are affected.

Supporting this notion, Sheikh Abdihayi emphasized that *"it is obvious that Ulama do not have the basic knowledge about the health aspects of FGM and how it is performed. The Ulama should approach the medical experts in search of this knowledge before legalizing or illegalizing the practice of FGM"*.⁹⁷

Dr. Omar Abdi Abdulle added that understanding Sharia entails more than religious aspects; it involves a broader understanding of people's well-being, *"knowing Sharia is knowing the benefits of people. I think local Ulama need at least acquire the background knowledge on this part of the human body [the female genital anatomy]"*.⁹⁸ Dr. Asha Mohamed Nur, a KII respondent from Baidoa, provided a detailed account of the immediate and long-term consequences of female circumcision. She explained that:

"It [FGM] happens to the girls in an early stage of their life. The immediate effect is mainly bleeding and infection. This happens often in remote villages where access to medical centres is limited. It can cause death. In many cases, little girls become malnourished and suffer a severe undergrowth development cycle. The girls feel both physical and mental pain. They live with constant trauma, from the pain, bleeding, and screaming from the day of excision. When girls become adults, and their menstrual period begins, they go through a lot of pain and

⁹⁵Eidle Abdiqadir Mohamed, FGD member, Garowe, 04-09, December

⁹⁶Sheikh Abdirisaq Abdikadir Nor, FGD participant, Galkayo 24-31, October 2021

⁹⁷Sheikh Abdihayi. Sheikh Adam Hassan. KII participant, Benadir, 10-17, Oct 2021

⁹⁸ Dr. Omar Abdi Abdulle, KII participant, Benadir, 10-17, Oct 2021

anxiety. They always take painkillers during their period to ease the pain and carry them in their bags when they are waiting for their period. They do this as a means of caution or fear from the pain. This means that they are in constant fear. When they get married, some girls develop some sort of anxiety and fear to have sexual intercourse with their husbands. This may create an unhealthy relationship with their husband that may lead to an early divorce. And, if they endure the pain and become pregnant, they experience severe labour. From my personal experience as a doctor, these women suffer delivery complications that may lead to the death of the first baby. Other women also undergo caesarean delivery, which can also lead to the death of the mother or the child. Other mothers develop postnatal complications such as fistula. Unfortunately, all these sufferings are because of FGM".⁹⁹

Dr. Hawo Abdulahi Elmi, a key informant from Mogadishu, supported these findings, emphasizing the continuous pain, infections, and difficulties during childbirth experienced by FGM survivors. *"Bleeding and infections in the female genital organs are the immediate visible effects of FGM on girls. In adulthood, there is continuous pain during their monthly period. This causes severe infections with long-term consequences. When they get married, they experience different pains during sexual intercourse, particularly in the first months. When they become pregnant, there are complications during labour. As the organs are already deformed or altered, the delivery canal is narrowed. Thus, there is a visible suffering and real danger for both the baby and the mother. Sometimes these mothers suffer breathing complications whereby they may lose their consciousness and cannot proceed with the delivery process. This puts their lives in danger"*.¹⁰⁰

These findings underscore the enduring health consequences of FGM for those subjected to the practice.



⁹⁹ Dr Asha Mohamed Nor, KII participant, Baidoa, 18-23, Oct 2021

¹⁰⁰ Dr Hawo Abdulahi Elmi, KII participant, Benadir, 10-17, Oct 2021

WHAT MOTIVATES A SOMALI FAMILY TO CIRCUMCISE THEIR DAUGHTERS?

The findings of this study reveal that FGM is not a religious precept in Islam but rather a deeply ingrained custom that has been incorrectly associated with religion. It is rooted in traditions that existed for centuries in the region that comprises Somalia and that it will take time to change.¹⁰¹

Islamic jurisprudence, norms hold significant importance. While FGM may be considered a norm in some countries, if it is proven to be harmful, it falls under the Islamic ruling of "*There should be neither harming nor reciprocating harm.*"¹⁰² FGM is not an acceptable religious norm for women or girls, as there is no evidence that it was practiced by Prophet Muhammad (PBUH). Islam, as emphasized in authentic Hadiths, upholds the value and well-being of the body, promoting a life free from harm, both physically and psychologically. These Hadiths emphasize that Muslims should avoid any action or practice that causes harm to oneself or others "*Do not harm yourself or others*".¹⁰³

Both modern science and human experience demonstrate that FGM does indeed result in harm to the girl child and later to the mature woman. Removal of vital organs and the deprivation of their natural functions expose them to lifelong health risks and negative psychological consequences.

The responses and shared experiences of key informants, such as Dr. Asha and Dr. Hawo, in this study affirm the harmful nature of FGM. Despite this, many Somali families continue to subject female children and relatives to FGM and its lifelong consequences; due to a lack of understanding or misinterpretation of Hadiths related to FGM. The presence of these Hadiths, along with certain terms used to describe FGM, such as 'Sunna circumcision,' 'Tahara' (ritual cleanliness), 'Xalaalayn' or 'Halaalayn' (making lawful), and the association of FGM with terms like 'Mutaharah' (cleansed or purified) and 'Ghulfa'a' (unclean or impure),¹⁰⁴ contribute to the misconception that FGM has a religious foundation. The term 'chastity' also reinforces the link between FGM and Islam among Somalis.

¹⁰¹ Sheikh Hassan Dooyow, FGDs participant, Baidoa, 18-23, Oct 2021

¹⁰² Narrated by al-Daraqutni in his Sunan Kitab Al-Bayou' 3/ 77, P. 288, about Abu Saeed al Khudri, and narrated by Al-Hakim in al-Mustadrak Kitab Al-Bayou' 2/ 66, P. 2345, about Abu Saeed Al Khudri, was announced authentic Hadith by Al-Hakim and backed by Imam Az-Zahabi.

¹⁰³ Narrated by Al Dar Qutny on the authority of Abu Said Al Khidri of whom Al Hakem said: authentic on the condition of Muslim; Sunnan Ibn Majeh, 2/784 No. 2340; Mawta Malik: 2/745; Al Sunnan Al Kobra by Bahiqi: 6/69; Al Mostadrak by Al Hakim, 2/58; Sunnan Al Dar Qutny, 4/227; Majma' Al Zawa'id, 4/110

¹⁰⁴ Sheikh Ali Hashim as-Siraj, (2002) "Female Genital Mutilation is Female Infanticide" (translation), pg. 31. As Cited in Asmani; Maryam Sheikh Abdi. (2008). De-linking Female Genital Mutilation/Cutting from Islam. Retrieved November 28, 2021, from <https://www.unfpa.org/sites/default/files/pub-pdf/De-linking%20FGM%20from%20Islam%20final%20report.pdf>

Proponents of FGM believe that women have a high libido, or sex drive, and that if their genitalia are not cut, they will become promiscuous.¹⁰⁵ This belief is prevalent among the masses, as highlighted by Sheikh Jama' Saleban Raabi, a participant in the study: *"it [FGM] is mainly related to the traditional belief that girls are protected and preserved with this practice particularly from seeking sexual desire before marriage"*.¹⁰⁶

Prof. Muhammad Abdiqadir Enow from Baidoa further explains that mothers believe FGM, particularly Type III, limits girls' sexual desires before marriage, preserving their dignity and motherhood, he said; *"mothers believe that girls' sexual desire before marriage is best limited when she is secured with FGM type III"*.¹⁰⁷

Dr Asha, a key informant from Mogadishu, affirmed that *"mothers prefer this FGM type III, believing it saves the dignity and motherhood of their daughters"*.¹⁰⁸ Marriageability is another reason behind the continued practice of FGM is practiced in Somalia. Most practitioners believe that mutilated girls are chaste and will remain virgins, as FGM is believed to reduce their desires to have sex before marriage, ultimately making them suitable for marriage. Dr Aisha explained that this belief is widely accepted by the Somali communities: *"FGM is often performed due to social pressure and a cultural myth. Mothers worry that their girls will not be welcomed by the communities and may not get married if they are not circumcised"*.¹⁰⁹

Sadio Sa'eed Ali, a key informant from Galkayo agreed that parents *"believe girls will have a higher chance of getting married when they are circumcised in a Pharaonic way"*.

Sheikh Yusuf A/Kadir, a FGD participant from Galkacyo concluded that *"FGM is mainly a traditional practice that overrides the religious rulings. [Some] people believe they are obliged to do it while knowing it is an unreligious practice, fearing that their daughters will not be accepted by the community if they are not circumcised"*.

THE ROLE OF THE ULAMA IN THE ERADICATION OF FGM IN SOMALIA

Allah says: *"Verily we created man of the best stature"*.¹¹⁰ The beauty of a human body is to be left as it was created by Allah (SWT) unless there is an authentic basis allowing interference with it.¹¹¹ It is medically proven that FGM, even in its mildest form, is harmful as it alters or interferes with the very natural function of

¹⁰⁵ Asmani; Maryam Sheikh Abdi. (2008). De-linking Female Genital Mutilation/Cutting from Islam. Retrieved November 28, 2021, from <https://www.unfpa.org/>: <https://www.unfpa.org/sites/default/files/pub-pdf/De-linking%20FGM%20from%20Islam%20final%20report.pdf>

¹⁰⁶ Sheikh Jama Saleban Raabi, FGD participant, Kismayo, 18-23, Oct 2021

¹⁰⁷ Mrs. Sadio Sa'eed Ali, KII participant, Galkayo, 24-31 November, 2021

¹⁰⁸ Dr Asha Mohamed Nor, KII participant, Baidoa, 18-23, Oct 2021s

¹⁰⁹ Ibid.

¹¹⁰ Quran: 96:4

¹¹¹ Asmani; Maryam Sheikh Abdi. (2008). De-linking Female Genital Mutilation/Cutting from Islam. Retrieved November 28, 2021, from <https://www.unfpa.org/>: <https://www.unfpa.org/sites/default/files/pub-pdf/De-linking%20FGM%20from%20Islam%20final%20report.pdf>

the female genitalia. Each of the organs affected by FGM (clitoris, labia minora, labia majora) has a specific purpose, and any interference with them affects their functioning and purpose.

Sheikh Abdihayi, a key informant from Benadir region explained that *“the role of the Ulama is very clear and it should be based on solid knowledge”*. Further on the role of the Ulama in Somalia he noted that it is mandatory; *“in the Islamic way that those who don’t know should ask those with the knowledge before any action is taken or opinion related to the religion is given. The role of Ulama in the campaign to end FGM should be based on medical advice issued by medical experts. It is proven that FGM has a lifelong consequence on girls; starting from the day the girls undergo the practice until late in their age. FGM makes the life of women complicated”*.

The suggestion that views on FGM should be based on scientific facts and knowledge, issued by medical practitioners, is supported by Sheikh Abdirahman M Hersi (Known as Tajwiid) from Kismayo: *“The role of Ulama is mainly alerting the impact of FGM, [and] increasing the social awareness in cooperation with medical experts. There are many reasons why we must act now given the sufferings and transgressions done in relation to FGM practice.”*

Dr Omar Abdi Abdulle, a key informant from Benadir region, stated that *“it is obvious that FGM is harmful. Ulama have an exclusive role to advice and act against bad deeds in society. However, they need to unite, because if united with knowledge, they can make a difference in the fight against FGM”*.

Sheikh Abdullahi Mo’ed Ali from Baidoa clearly articulated the role of Ulama in the campaign against FGM in Somalia, saying that *“We, Ulama, have the role to warn against the effects of FGM”*.

*While Ulama involved in this study agree that Ulama, themselves included, have a responsibility towards ending FGM, those who distinguish between Sunna (Type I) and Pharaonic FGM (Type III) made it clear that the eradication concerns only the Pharaonic FGM. For example, Sheikh Mohamed Guure Abdi from Kismayo reiterated that “the role of Ulama is clear. Ulama should clarify FGM, particularly the Pharaonic one and its rulings in Islam. They [Ulama] have specific duties to serve their people in many ways. Warning against Pharaonic female practice entails their divine assignment”.*¹¹²

Sheikh Jama Saleban Rabi, a key informant from Kismayo also made reference to separating the Pharaonic type of FGM from Sunna: *“the biggest step that can halt the continuation of Pharaonic circumcision is that Ulama must take their divine role. They are the potential change-makers in respect of this issue, and they have that responsibility”*.

Another possible way of ‘halting the practice of FGM’ was suggested by a FGD participant in Garowe: *“the only possible way to preclude the Pharaonic practice is to make laws and policies in place. Laws should clearly state the punishments, equal compensation, or sentences to anyone who performs Pharaonic circumcision”*.

¹¹² Sheikh Mohamed Guure Abdi, FGD participant, Kismayo, 18-23, Oct 2021

Sheikh Adam on the other hand viewed the dissemination of information to the general public on the harmful effects of FGM as one of Ulama's duties. *"Ulama have the duty to clarify matters in their knowledge and this one [FGM] comes under their duty and jurisdiction"*.

Sheikh Yusuf Sheikh Mohamoud went further by placing the public wellbeing under the responsibility of the Ulama: *"they [Ulama] have the duty to safeguard the well-being of the citizens"*.

Dr Omar Abdi Abdulle, a key informant from Benadir cited that there should be consequences for inflicting this serious harm [FGM] on innocent girls. He also called for the government and authorities to take action against FGM. *"There is a common Islamic standard of preserving the dignity and body of human beings. Considering this Islamic duty, harm on the body of young females within the practice of FGM, there should be consequences and punishments for performing this practice. Likewise, the political authorities have the guardian role to guide the actions to be taken against FGM"*.

From the above, it can be concluded that majority of the Ulama who participated in this study believe that FGM should be abandoned in Somalia and that the role of Ulama includes (1) collaborating with and listening to medical practitioners; (2) issuing a unanimous Fatwa against FGM; and (3) collaborating with government authorities in issuing laws against and compensations for FGM survivors.



CONCLUSION

The findings of this study reveal that there is no verse in the Qur'an that justifies the practice of FGM. Similarly, there is no authentic Hadith or evidence from the tradition of the Prophet (PBUH) that legitimizes the practice of FGM as part of Islam. FGM is not supported by Ijma'a (judicial consensus) or qiyas (analogical deductions). Rather, the practice of FGM in Somalia is deeply rooted in tradition and cultural practice.

This study further reveals that Ulama's interpretations of FGM rulings are divergent: some believe that Type I, or "Sunna" FGM, is part of religion and that the practice is indeed "Sunna" (a practice recommended by the Prophet), while Type III, or "Infibulation" or "Pharaonic," is not part of religion and should be prohibited. Their position is based on the Hadith known as "Hadith Om Attiyah" and other Ahadith related to FC. On the other hand, there are Ulama who argue that FGM is Makramah (a virtuous deed), implying that if its harm exceed its benefits, it should be abolished. Thus, before making any decisions on FGM, Ulama should listen to and consult with medical practitioners.

Based on the analysis of the Ahadith and in combination with the information provided in the key informant interviews, it is possible to conclude that these Ahadith can be placed in two categories: unauthentic Ahadith and authentic Hadiths. It is also possible to conclude that the authentic Hadiths are misunderstood and incorrectly used to support FGM. Some of the Ulama who participated in this study argue that had FGM been among Islam's precepts or principles, the Prophet (PBUH) would have been the first to undertake the practice on his wives and daughters, something he did not do. Based on this, it is possible to conclude that FGM is not part of the Prophet's (PBUH) Sunna (traditions or practices), and therefore not a part of Islam.

In addition, there are Ulama and medical practitioners who participated in this study who claim the "Sunna circumcision" widely practiced in Somalia to be very different from and more severe than the type of circumcision mentioned in "Hadith Om Atteya." Furthermore, they claim that some people use "Sunna circumcision" as an excuse to subject their daughters to the pharaonic type of FGM. These Ulama and medical practitioners therefore emphasize the importance of governmental bans on all types of FGM, as it is challenging to unite the divergent views of the Ulama on FGM.

RECOMMENDATIONS AND WAYS FORWARD

FGM, a deeply entrenched practice in Somali culture, requires a collaborative and multi-sectoral approach for abandonment. Based on the findings of this study, several recommended actions are proposed.

There is still a belief within communities that the campaign to end FGM is a West-owned or West-backed project.

Recommendation 1: Localization of Efforts: The campaign to end FGM should be community-centered and move beyond seminar halls. Efforts should be focused on empowering and educating local organizations, as well as women, and girls in remote areas, who are the primary victims of FGM and are more likely to lack knowledge about their human rights and the ability to demand their implementation.

All the Ulama who participated in this study, irrespective of their different understandings of FGM, agree to ban pharaonic FGM (Type III). They also expressed sympathy and responsibility towards saving the lives of innocent girls who are subjected to FGM.

Recommendation 2: Uniting Views: Convene an inclusive symposium to unite the Ulama's agreement to ban pharaonic FGM (Type III) and emphasize their shared responsibility and sympathy towards saving the lives of girls subjected to FGM, prioritizing the objective of protecting innocent lives over highlighting individual perspectives and interpretations.

Recommendation 3: Legislative Measures: The government and legislators should take the lead in ending FGM by enacting and enforcing legislation to ban FGM in Somalia.

Academics and scholars can play a crucial role in early education to raise awareness and inform girls about the risks and harmful effects of FGM, so as to ultimately prepare them for becoming educated mothers who will save their future daughters from being subjected to FGM. This may end the chain of "FGM suffering. It is also important to inform boys about the harms and dangers of FGM so that they can become support system for the girls in their families and do not condone it when they are older".

Recommendation 4: Education Modules: FGM education should be integrated into the national curriculum, providing a historical perspective and highlighting the impact on women and girls.

FGM is viewed as a domestic issue in Somali households. Mothers are mainly responsible for carrying out the practice. Therefore, mothers and female members of communities should be prioritised as right-holders to be addressed through the campaigns aiming to end FGM in Somalia.

Recommendation 5: Empowering Mothers and Female Community Members: campaigns should prioritize engaging and empowering them as key stakeholders in efforts to end FGM.

There is a need to improve knowledge and awareness of the impact of FGM based on scientific and religious facts.

Recommendation 6: Effective Messaging: Social media platforms can be utilized to disseminate educational messages, using well-designed clips and community-based dramas based on scientific and religious facts to improve knowledge and awareness of the impact of FGM.

Efforts should counter attempts to justify FGM as a religious obligation, with religious leaders playing a proactive role in promoting the abandonment of the practice.

Recommendation 7: Target Total Eradication: Campaigns should aim for the complete eradication of FGM and discourage the acceptance of "Sunna" circumcision as a harmless form of FGM.

Views on FGM among Ulama differ, but there is agreement that Type III (Pharaonic circumcision) is harmful. While this is not enough, it is a start, and efforts should therefore be made to encourage the Ulama to work together to advance this common ground in the campaign to eradicate FGM in Somalia.

Recommendation 8: Encouraging Collaboration: Encouraging joint symposiums and workshops can foster knowledge sharing and discussions among Ulama with diverging views, advancing the common ground in eradicating FGM.

Further research is needed to explore how Somali Ulama with differing perspectives on FGM can effectively collaborate in the campaign to end FGM in Somalia.

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