

**TAQWA AND ETHICS: THE CORRELATION BETWEEN FEMALE GENITAL
MUTILATION (FGM) AND TAQWA AMONG THE ORMA MUSLIM WOMEN IN
TANARIVER COUNTY**

Pauline Wangari Mukuria

Institute for the Study of African Realities (ISAR)
Africa International University
Email: pauline.mukuria@sim.org

Abstract

This study involved an investigation into the effects of Female Genital Mutilation (FGM) among the Orma Muslim Women in Tana River County, Kenya. The author examined the interplay between FGM and taqwa, and whether it plays a role in the interpretation of taqwa. The study indicated that the majority of the Orma Muslim women believed that FGM helps in inculcating taqwa. They pointed to culture and religion as the two foremost leading advocates of the practice. The study adopted a qualitative method and was guided by phenomenological research design in collecting data. Structured interview questions, focus groups, and participant observations were the three essential tools that were used in collecting data. The interview questions were translated into the language of the informants and then administered directly to the sampled respondents through the help of a research assistant. The research population was composed of the Orma Muslim women aged 12-45 years of age. A sample was drawn from Orma Muslim women in Garsen constituency. The resultant data was analysed through Thematic Coding Analysis (TCA). Findings indicated that although highlighted as one way in which taqwa is achieved, the practice is unethical. Yet, the efforts to decimate FGM among the Orma Muslim women have yielded insignificant results. The study observed that there is a need to have a stepped-up action on the importance of stopping FGM. The action calls for a joint effort by all the stakeholders consisting of the Orma community, the government, and Orma Muslim women themselves to arise and speak against the practice. This study recommends that additional exertions need to be utilized so as to eradicate the practice among those who are exposed to it. Creating awareness on the integral dimension in the inclusivity of Orma girls in education, discouraging early marriages, and raising awareness on the health factors that arise from FGM is also crucial. These recommendations call for serious deliberation in curbing FGM among the Orma Muslim women.

Key Words: Taqwa, FGM, Orma, Sunna, Religion

INTRODUCTION

Female Genital Mutilation (*khitān*) is one of the practices that are relatively common among Muslim women (Musnad, 1998). However, it has come under growing censure for either being un-Islamic or detrimental to women's health and pietism (Mahmood, 2005, p. 85). The ultimate tension is whether or not FGM poses any spiritual benefit to Muslim women. Although having been declared un-Islamic, some Islamic communities seem to rally behind FGM and consider it to contribute to pietism (*taqwa*). *Taqwa*, which is translated as piety or fear of Allah, is an Islamic concept of fulfilling Allah's commandments both outwardly and inwardly (Al-Haddad, 2018). This study is an investigation into the correlation between FGM and *taqwa*. The question arising is whether or not FGM is ethically placed in the interpretation of *taqwa*. The study is geared to bring enlightenment into the effects of FGM on the female population.

It is believed that any form of piety (*taqwa*) draws the adherents closer to Allah. In this light, some Muslim communities have enjoined themselves to the practice of FGM in their endeavor to fulfill this obligation. The enthusiasts often believe the practice has religious backing in the Qur'an and Sunna-Ladabul-Muffrad, Hadith, 1281) (Hekmat, 1997). However, substantial deliberation has ensued around the question of whether the Sunna used in tolerating FGM is ethical or not. As the debate unfolds, the Islamic jurisprudence refers to sets of essentials that are not binding but, if undertaken, they add value to one's piety (Mahmood, 2005, p. 85; Khatabul, 2006). This study will, therefore, be looking at the correlation between FGM and piety (*taqwa*) among Orma Muslim women in Garsen, Tana River County.

Different Voices on FGM

According to United Nations Fund for Population Activities (UNFPA)/World Bank, it is estimated that over 132 million women and girls have undergone FGM, while 2 million girls are at risk of experiencing some form of the procedure every year. At least 90 percent of women have undergone the operation in Djibouti, Egypt, Eritrea, Mali, Sierra Leone, and Somalia, an indication that FGM is more prominent in Muslim countries (United Nations Children's Fund (UNICEF), 2016; Willcox, 2005, p. 15). Nonetheless, this study is quick to point out that although FGM is seen to be more prevalent in Islamic societies, it is not entirely an Islamic problem. Contrary to the belief, FGM exists within the majority of traditional groups and especially within the marginalized areas like North Eastern part of Kenya (Nyamongo, 1994, p. 56). World Health Organisation (WHO) asserts that FGM is globally branded as an infringement of the human rights of women and girls (WHO, 2016).

Muslim views are claimed to have permitted, justified, and even encouraged FGM throughout human history (Moghissi, 1999; Adeney, 2002; Cohen, 2005). The extent to which this is true depends on different countries. However, an unequivocal link between FGM and piety (*taqwa*) is established in some sources (Sifuma, 2010, p. 67; WHO, 2016). Although FGM is accepted as Sunna and as a means of achieving a level of piousness, it demeans and denies women a dignified life.

Other views seem to indicate that women have been victims of ruthless power struggles in many cultures around the world (Azumah, 2008). FGM is seen as one concern which Muslim women have struggled with over the centuries. In agreement, some scholars' view is that women are treated as second-class citizens who are inferior to men in terms of intelligence, morals, and faith (Parshall, 2002; Sookhdeo, 2007). However, an Islamic view seems to indicate that Allah offers equality for all those who are pious (*taqwa*). This view is perceptible in the Qur'an (S.9:71).

Muslim scholars argue that Muhammad acts as vicegerent in ensuring justice, freedom and equality for all (Dagher, 1995; Moghissi, 1999; Khatabul, 2006). Nevertheless, the argument that FGM among Muslim women is an indication of gender inequality is far from the truth. Muhammad, for example is hailed as the greatest emancipator of women from cruelty and oppression (Moghissi, 1999, p. 4). A classical study recorded that the "liberated, equitable and dignified" position of women as outlined in the Qur'an (S.29: 69) is far from what is happening on the ground (Hekmat, 1997, p. 122). Several other scholars have taken a common stance. Their view is that although Muslim theologians and clerics maintain that the position of women has improved under Islam, the prerogative needs further proof to be ascertained as factual (Azumah, 2008; Adeney, 2002).

Assertion of FGM among the Orma Muslim Women

Several advantages were given as to why the Orma Muslim women believed that FGM is a prerequisite in the acquisition of *taqwa*. At the outset, *taqwa* is one of the established religious practices that help in guiding the sexuality of Muslim women. The argument is that once the consciousness of Allah (*taqwa*) is prioritized, all other aspects of Muslim women's lives fall into place. For example, virginity among Muslim girls is highly observed. Thus, by going through FGM, a girl can preserve her virginity until marriage. Findings indicated that FGM is one of the most significant forms of respect that a woman could give to her husband as it provides a form of sexual gratification. Others indicated that the removal of genitalia is a spiritual directive from the Qur'an and the Hadith, which increases *taqwa*. FGM also increased the chances of getting many children, which eventually becomes a means by which Islam is propagated biologically. To some, FGM is one of the means by which Islam reinstates the self-worth of women. Notwithstanding, some informants were of a different view. They argued that although some Islamic teachers taught that FGM is Sunna and has been declared Islamic, it is not obligatory within various forms of Islam, thus rendered optional.

Islamic teachings considered FGM to be Sunna and a form of inculcating closeness with Allah (Al-Haddad, 2008; Aladabul-Mufrad, 2003). The understanding here is that FGM decreases the sexual desires of women, hence refraining from sexual acts that would impede their spiritual appetite. The belief in this community is that FGM is equivalent to accruing merit before Allah, consequently, acquiring *taqwa* (piety). The understanding is that what is eliminated during the process is the dirtiest part of the organ. Thus, its removal increases the chances of remaining pure and especially while performing Islamic practices such as prayer and fasting. Religious leaders yield to anecdotal views concerning FGM. Local edifices of power and authority, such as the community leaders, religious leaders, circumcisers, and even some medical personnel, contribute to the perpetuation of the exercise.

Their argument is that lack of circumcision for the girls results in uncleanness, which reduces their religious performance. The uncircumcised women are considered to be unhygienic hence reducing their chances of ever achieving a state of *taqwa*. Thus, FGM is encouraged when vaginal fluid is associated with dirt, which would result in minimising the effectiveness of the women in performing their Islamic obligations. In addition, looking at the Hadith, the study established that FGM is commended as one of the means by which Muslim women are to inculcate *taqwa*. Among the Orma Muslim women, the study did not find a religious obligation saying unequivocally that the practice of FGM is forbidden. Thus, it is left to the community to decide whether it is acceptable or not. As established, the majority of Muslim leaders endorsed and considered FGM as being pertinent to *taqwa* (Forward, 2016; WHO, 2016). Those against the practice argued that FGM brings obscurity among the Orma Muslim women. They advocated for its elimination arguing that there is a universal commandment that applies to all, irrespective of gender or religion, that no one should inflict pain on another.

Correlation between FGM, Religion, and *Taqwa*

Islam defines the way of life of its adherents. In this case, religion becomes a form of allegiance to which all Muslims adhere. Thus, every activity is believed to either demote or promote Islam, and drawing the members close to Allah, thus *taqwa*. With that, religious beliefs play a critical role in determining issues concerning FGM. Variant religious interpretations and conflicting cultural identities complicate the point even further as they claim to establish a close connection between FGM and *taqwa* (Al-Haddad, 2008). Al-Haddad for example, argues that FGM is permissible in Islam as it enhances spirituality among the female population (Al-Haddad, 2008). In agreement, Schlee and Shogollo record that no directive should prevent a Muslim girl from undertaking what is permissible (2012). This is as long as the matter is a subject of interpretation and consideration following the fundamentals of the Shari'a. The authors concur with one of the main Hadiths that promote FGM. It states, "Circumcision is a Sunna for a man and a source of respect for a woman" (Al-Haddad, 2008). Thus, by going through the procedure, the woman is considered to be acquiring piety (*taqwa*). Besides, the Qur'an asserts that men are considered weak, while women are a temptation to men. Thus, they are to be subjected to circumcision to reduce their insatiable sexual urge. The act is believed to work to the advantage of men, as it helps the men in overcoming their sexual temptations. In addition, once they are married, their husbands will be sexually satisfied (S.4:28). On the other hand, Islam decries any display of immodesty or the intermingling of the sexes; thus, women need to be circumcised in the event that they interact with men.

RATIONALE OF THE STUDY

The study adopted a qualitative research method in carrying data collection. The type of qualitative research design used in this study was phenomenology. The design is an inductive, descriptive research approach developed from phenomenological philosophy (Babbie, 1990, p. 63). The design is most useful where the research concerns the lived experiences of the target population. In this study, the model helped the author to understand how Orma Muslim women participate in the practice of Female Genital Mutilation and how this influences their *taqwa*. This brings the understanding of the phenomenon as experienced firsthand by the people under study. In realising the investigation, the author came up with three research questions to steer up the investigation.

Research Questions

- (i) How does FGM engage with *taqwa* among Orma Muslim women?
- (ii) What are the key factors concerning FGM that influence *taqwa* among Orma Muslim women?
- (iii) What are the effects of FGM among Orma Muslim women?

The investigation was conducted in Garsen, in Tana River County. The population of Orma Muslim women was approximately 3500. Purposive and multi-cluster sampling design was used to sample the participants in the study. Hence, a sample size of 200 respondents which was later clustered to form a sample size of 30 Orma Muslim women was adopted. These were 20 younger Orma women between the ages of 12-20, and 10 older women between ages 21-45 years.

The study was carried out through personal, in-depth structured interviews and guided by both open and closed-ended questions. Interviews provide a rich and detailed description of the human experience (Gorden, 1987, p. 61). Due to the heavy reliance on this single method of data collection, and the illiterate nature of the informants, the author conducted the interviews with the help of a research

assistant. His role was to provide interpretation during the interviews. Due to the high rate of illiteracy among the female population, the use of male interpreters is socially acceptable.

Description and Interpretation of the Findings

Data analysis included a thorough description and transcription of data according to how informants responded to each interview question. The author engaged in a sober reflection and analysis of the informants' perceptions, including who said what. The goal was to trim down the raw data into themes. The author then picked the key ideas and themes that emerged from the data. These themes were used to develop patterns that were used in interpreting the data. As Creswell states, the best way to analyze interview questions is through patterns (2007, p. 60). The author organised each day's findings per interview questions and looked across all informants and their answers to identify consistencies and differences.

DISCUSSION OF FINDINGS

Research Question One tried to examine how the practice of FGM interacts with *taqwa* among Orma Muslim women. Findings indicate that in the Orma community, FGM is not only a cultural practice but also a religious issue. It is entrenched within their cultural ancestry, as well as being deeply ingrained in the religion. Seventeen informants indicated that piousness (*taqwa*) is highly associated with FGM. In their explanation, the informants mentioned the Arabic words which the circumcisers recited as they carried out the procedure. The words depict perseverance, patience, and spiritual mileage. Sixteen informants admitted that religiously, FGM gave them a place in the religion as they automatically become marriageable to respectable religious men such as the madrassa teachers. Thus, girls who avoid the cut are stigmatized and isolated in the community. Six informants indicated that they agreed to go through the cut due to pressure received from their parents. One informant reported that before the procedure, which was carried out by her aunt, her mother read some verses from a specific book to prove that FGM contributed to piousness.

In answering Research Question Two, the author examined key factors about FGM. The idea was to investigate these factors and how they influence *taqwa* among Orma Muslim women. The factors investigated included, gender inequality and religion. In regard to gender inequality, the informants expressed that FGM has encouraged male domination in the community. Three informants pointed out that this power derived its strength from the Qur'an and the Hadith (S.4: 34). The informants felt that although FGM is done as a way of acquiring piety (*taqwa*), the cultural aspect puts more emphasis on how it benefits others, for example, their husbands, rather than to women themselves.

This study established that the centrality of FGM is captured in marriage (Pesambili, 2013; Oloo, Wanjiru & Newell 2011; Wambua, 2013). Early marriages are a common cultural practice among the Orma people. As a result, the findings indicated that many girls were required to undergo FGM, which is a requirement before marriage. In most cases, the family of the girl plans for marriage, "sometimes without the knowledge of the girl" (Kituyi, 2010, p. 16). According to Nyamongo, the girl can be married off to any man regardless of age (1994, p. 58). The Orma communities are known to marry off their daughters to offset financial burdens, with many subsequently dropping out of school. This concurred with the Twaweza study that expresses that 34 percent of Kenyan children are borne by teenage mothers (Asante Africa, 2016; Wambua, 2013). Instead of contributing to piety (*taqwa*), FGM denies them an opportunity to not only attend formal schools but even more importantly, they miss a chance to participate in the madrassa whose teachings, in essence, contribute to their piety (*taqwa*).

The interplay between religion and the orientation of FGM was also investigated. The quest here was to try to understand the correlation between religious beliefs within the milieu of FGM. The findings indicated that Islamic fundamentals play a significant role in enhancing FGM. The majority of the women who went through FGM were convinced that they were fulfilling religious obligations. Thirteen informants confessed that their parents believed that by allowing them to go through the cut, they would have helped them achieve part of their religious commitment, hence acquiring *taqwa* in their lives. Dissimilarly, the majority of the informants indicated that they felt confused and far from Allah after the procedure. Notably, all the informants indicated that the outcome was far beyond their expectations. One informant reported, "The pain was unbearable ... I hated my mother, and I hated her

so much. Did she ever care about me?” Then she continued, “I don’t know about others, but for me, there is no piousness in circumcision. Who is this Allah who derives joy through such pain?”¹

Effects of FGM among Orma Muslim Women

In investigating the effects of female genital mutilation among Orma Muslim women, the findings indicate that once a girl is circumcised, it is believed that she is considered marriageable and mature enough to start her own family. Thus, FGM results in early forced marriages, which impede girls’ lives in many ways. One informant said, “In some cases, girls are married off before they reach age ten” (RQ2SB1-14). The findings showed that the age for undertaking FGM was declining, with the majority facing the cut between ages 5-7 when resistance is minimal. As they now move to a new stage in their lives, the dream of ever going back to school becomes a thing of the past. In sharing their personal experiences, three informants shared how the cut affected them negatively to the extent that they had to drop out of school due to their new roles as mothers.

Another effect that surfaced in every discussion was the severe psychological trauma. It is evident among the Orma Muslim women that those who have been subjected to FGM suffer from post-traumatic stress, anxiety disorders, depression, and fistula. Fistula is a post-birth medical condition that affects women who in most cases have been circumcised. As Cohen asserts, the act of circumcision among the female population is as “violent as murder” (2005, p. 23).

FGM was also seen in the reduction of oxytocin, the love hormone. This was evident among the informants. Although sharing amidst mixed feelings, sometimes crying, sometimes laughing, and even other times shyly, the women expressed that their sexual feelings died with FGM. As studied, oxytocin hormone activates feelings of reliance and desirability between people when it is released in the brain, and it rises in the early stages of romantic love (Khatbul, 2006). *Other* research has shown that oxytocin plays a role in bonding when humans make contact with one another. During the FGM procedure, parts of the genitalia, especially the clitoris, are removed (Khatbul, 2006, p. 23). It is then that the love hormone is destroyed completely. The hormone is believed to increase male sexual pleasure during intercourse in marriage (Khatbul, 2006; Willcox, 2005). FGM is therefore seen as a sure way of controlling women's sexuality, which is sometimes said to be insatiable (Khatbul, 2006). The majority of the informants opened up about their heartbreak in their sexual experiences. An informant confessed, “Although I am married and have children, I dread any time I have sexual intercourse with my husband because of the pain that I go through.” Then she added, “I cannot understand what it means to have an intimate relationship with my husband”.²

In trying to understand the health complications brought about by the practice, the findings indicated that there is not even one Orma Muslim woman who was not affected by the cut directly or indirectly. In addition, it was evident that Human Immunodeficiency Virus HIV is a crucial effect of FGM among women (Haberland, 2015). The informants stated that older women not aware of the dangers of using contaminated tools are the ones who have been assigned the task. Thus, the virus has been said to be spreading softly. In addition, fifteen informants indicated that they had to deal with various health complications. The majority spoke of fistula. This is a condition that leads to the inability to control urine due to the damage in the reproductive system. Out of the twenty informants, fourteen had suffered from complications and five of them had undergone surgery. For the informants who are already married, they indicated that they do not have to think twice about whether or not their daughters are to go through FGM. One informant said, “I almost died myself, why should I allow my daughter to go through the same? What if I lose her? The pain I went through was unbearable and I live with the consequences to this day.”³

FGM denies Orma Muslim women the freedom to live like other women in terms of their human rights. The majority of the informants confessed that FGM automatically moved them from childhood to adulthood regardless of their tender ages, thus fleecing their capacity to participate effectively in society. The researcher observed that irrespective of age, every girl who went through FGM was expected to behave like an adult. One informant said that the famous phrase from the mothers after going through FGM is that, “You are now an adult. Stop behaving like a child.” To another informant,

¹Personal interview with the informant on 27th June 2018.

²Personal Interview with the Informants’ on 28th June 2018

³Personal Interview with the informants on 24th June 2018.

these words were a constant reminder that life would never be the same again. It meant a power shift from childhood to adulthood and being susceptible to domestic violence. This was experienced whenever a girl was unable to measure up to the expectations of the husband. Then she added, “I became an adult when I was only 11 years old.”⁴

The response of WHO in Africa states that FGM constitutes a tragic health and human rights concern for girls in several countries (WHO, 2016). It contravenes the rights of every woman. It is an apparent threat to the health and wellbeing of millions of Muslim girls around the globe. The practice is known to have serious effects, both bodily and mental. Despite the impetus to carry out female circumcision, the procedure has no health benefits. Many girls suffer from health problems, pain and trauma following the procedure (Willcox, 2005, p. 63). Wilcox reveals several reproductive health issues that are connected with FGM. Among them is an increased vaginal and uterine infection, which also increases the risk of infertility (2005, p. 34). Secondly, it causes physical damage among girls and women due to a lack of professionalism on the side of the circumcisers.

Biblical Response to FGM and *Taqwa* (Piety)

Unlike the Qur’an, the Bible speaks only of male circumcision, with the New Testament emphasizing the circumcision of the heart as a way of piety. Several biblical references have primarily expressed their stand regarding the circumcision of the heart. The central message is the understanding that the outer performances of religion are not as imperative to piety (*taqwa*) as the condition of the heart is. The worth of external rites should uphold the sacredness of the heart. Thus, piety cannot result from the rituals that are executed outwardly unless the heart is entirely changed (Matt 22:37). God expects us to be devoted to him by offering our entire lives to him and not by inflicting our bodies to bodily pains. Physical circumcision is only profitable in cases where the law is being followed (Romans 2:28-29, Gal. 2:16). Thus, the external form of circumcision is not a true representative of the true nature of the heart (Gal. 2:16). The Bible is clear that circumcision is to be done in the spirit and not on the body (Gal. 2:16). In addition, the approval of the one who circumcises does not come from man but God. Paul emphasizes that no forms or ordinances could profit a person without the renewal of the grace of God (Rom. 2:29).

Peter emphasizes the same point. He gives a contrast between the external and internal change of the soul (1 Peter 3:3-4). Addressing women, Peter advises the women not to only mind about their outside adornment, which is merely about arranging the hair, wearing jewelry, or putting on fine apparel. His advice is to hide their beauty in their hearts. The hidden part of the heart has an incorruptible form of beauty, which is characterised by a gentle and quiet spirit. This type of soul is understood to be precious in the sight of the Lord as it leads to real transformation.

In the Old Testament, circumcision of the heart is compared to being set apart for God. Unlike the Pharisees who in the New Testament took pride in the circumcision of the body, the role of circumcision in the Old Testament was to make a distinction between those who were genuinely connected with God from those who were not (Deuteronomy 30:6). In this text, it is God himself who circumcises the heart. The second part of this verse indicates the reason as to why this form of circumcision is to be done so that people may live. Besides, the reason why this circumcision of the heart was to be done is so that God’s chosen people would be set apart to love God, from inside out entirely.

In Islam, as the alleged father of faith, Muslims imitate Abraham. One of the features of being a true child of Abraham is faith. However, the faith that was attributed to Abraham did not come as a result of physical circumcision, but by believing in God. In summary, valid circumcision deals with the heart in which the women attune their lives to pleasing their maker.

CONCLUSION

While the majority of Orma Muslim women claimed that FGM is Sunna (acceptable customs by Muhammad) and that it plays a significant role in achieving the state of *taqwa*, Islam allegedly claims that there is no conclusive ruling evidence that makes female circumcision mandatory or forbidden, claiming that all the judgments related to this matter are likely. The argument is that there is no one unified rule on whether FGM is a religious issue or not. Findings indicate that FGM represents a

⁴Personal Interview with the informants on 22nd June 2018.

custom, which does not find justification in the authoritative sources of Islam such as the Qur'an and the Hadith.

There has been much awareness created concerning FGM such as the ban by governments and the condemnation by international organisations worldwide. However, this research notes that although there have been efforts to eradicate the practice, no success has been achieved. In addition, the researcher noted that most of the informants were unaware that FGM is illegal in Kenya. Advanced efforts are therefore of prime importance and need to be exerted to eliminate the practice and alleviate the sufferings that millions of girls and women are needlessly exposed to. It is important to note that the major proponents are the mothers, the aunts and other women, and not necessarily men.

FGM mirrors a deep-rooted inequality between the sexes and comprises a life-threatening action against women. The study shows that it is carried out on minors, and is an intrusion on the privileges of children. The tradition also infringes on women's opportunities to health, security and physical uprightness, the right to be free from anguish and brutal, merciless or demeaning actions, and the right to life when the process ends in death.

Questioning widely and culturally accepted norms concerning FGM is of the essence. There is need for a strategy to address culture, religion, and gender inequality especially in marginalised areas. Christian voices should be at the forefront in breaking the culture of silence. They are to question the widely and culturally accepted norms about FGM. Besides, Christian women need to recognise that the primary responsibility for the spiritual instruction of Muslim women depends on them. The nature of Islam discourages the intermixing of genders, thereby making it hard for males to reach out to the female population. Christian women are therefore in a better place to redirect and redefine the Orma Muslim women's ideas of FGM by sharing the truth as recorded in the word of God. However, helping Muslim women find a voice in curbing FGM will always be under more enormous pressure from the more vigorous, prolific and liberal Muslim societies on the periphery.

The method of thinking about FGM represented by the Orma Muslim women indicated the need for careful analysis of what is entrenched in their minds. This study shows that it is hard to confront issues that have already been embedded in the Qur'an and the Hadith; meaning, every well-authenticated Sunna going back to the Prophet has precedence over the judgments of any other opinion. Thus, nothing can override the Islamic traditions even if it were verified only by an isolated culture. There is a need therefore for religious leaders to censure that Sunna which speaks in favor of FGM and yet is outdated.

The Orma Muslim women are trapped in the outward Islamic identity without internalising the ritualistic Islam that oppresses their needs. Sadly to say, this research realised that the Orma Muslim women are, in most cases, sentient of the awkwardness of being a Muslim woman within a system that is inimical to justice. The question arising is that it is unethical to have FGM as one means by which *taqwa* is inculcated.

RECOMMENDATIONS

In finding a voice for the Orma Muslim women, there is a need for the government and Christian organisations to come up with safe havens for girls who have run away from homes due to the threat of FGM and early marriages. There is also a need for the practitioners to come up with measures in addressing shame and stigma that the Orma Muslim women who have rejected female genital mutilation face.

Critical attention to the issues regarding FGM by all the stakeholders is of the essence. This study observed that ideologies such as FGM and how it connects with piety (*taqwa*) are unfortunately assumed despite their caustic nature, and the dangers they pose to Orma Muslim girls. Thus, researchers, scholars, and practitioners should rise and become the voice in addressing the real form of *taqwa* (piety).

Orma Muslim women need to be supported so that their influence would go far and wide in making lasting solutions to issues concerning FGM. However, to bring change, there is a need for the women to understand that they can never consent to fear, detention and other forms of oppression regardless of where they are coming from.

In conclusion, this research presents another gracious invitation for scholars in gender studies, Islamicists, anthropologists, and practitioners to make more strident attempts in helping Muslim women find their voices. Thus, it is time for all the stakeholders to speak out against FGM and liberate women and girls.

REFERENCES

- Adabul-Mufrad, B. (2003). *Khafdil-Mar'ati: Hadith 1281*. DaralMa'rifah, Beirut.
- Adeney, M. (2002). *Daughters of Islam: Building bridges with Muslim women*. Leicester. London: Intervarsity Press.
- Al-Awa, A. (2012). *United Nations Population Fund*. International Federation of Islamic Scholars Conference, (pp. 6-7).
- Asante Africa. (2016). *The Wezesha Vijana Project: Documentation of Good Practice in Girls' Education and Gender Equality*. Nairobi: ENT Press.
- Azumah, J. (2008). *My neighbors' faith: Islam Explained for Christians*. Plateau State: Africa Christian Textbooks (ACTS).
- Babbie, E. R. (1990). *Phenomenology research methods* 2nd ed. Belmont, CA: Wadsworth.
- Cohen, S. J. D. (2005). *Why Aren't Jewish Women Circumcised? Gender and Covenant in Judaism*. California: University of California Press.
- Creswell, P. (2007). *Foundations of qualitative research: Interpretive and critical approaches*. Thousand Oaks: Sage Publications.
- Dagher, Z.R. (1995). Analysis of analogies used by science teachers. *JRST*, 32(3), 259-270.
- Forward Foundation for Women's Health, Research and Development), (2016). *Now Girls Know. Their Rights: Lessons from an Intervention on Child Marriage and Female Genital Mutilation in Mara*. UNFPA
- Gorden, R. L. (1987). *Interviewing: Strategy, techniques, and tactics*. Chicago: Dorsey.
- Haberland, N. A. (2015). *The Case for Addressing Gender and Power in Sexuality and HIV Education: A Comprehensive Review of Evaluation Studies*. New York: Guttmacher Institute.
- Hekmat, A. (1997). *Women and the Koran: The status of women in Islam*. New York: Prometheus Books.
- Khatabul, A. (2006). *Sexual Ethics and Islam: Feminist Reflections of Qur'an, Hadith, and Jurisprudence*. London: Oxford Press.
- Kituyi, M. (2010). *Becoming Kenyans: Social-economic transformation of the Maasai people*. Nairobi: Acts Press.
- Mahmood, S. (2005). *Politics of Piety: The Islamic Revival and the Feminist Subject*. New Jersey: Princeton University Press
- Moghissi, H. (1999). *Feminism and Islamic Fundamentalism*. London: Zed Books.
- Musnad, A. B. H. (1998). *Hadith and Taqwa: Usamah Hazli; Hadith*, 6(20994) 'Alamul-Kutub; Beirut AD.
- Nyamongo, I. K. (1994). Education and age at first marriage among pastoral Borana girls of Marsabit District, Kenya. *African Anthropology*, 1(1&2), 55- 66.
- Oloo, H., Wanjiru, M. & Newell-Jones, K. (2011). *Female Genital Mutilation Practices in Kenya: The Role of Alternative Rites of Passage—A Case Study of Kisii and Kuria Districts*. London: Feed the Minds.
- Parshall, P. (2002). *Understanding Muslim teachings and traditions: A guide for Christians*. Grand Rapids. Michigan: Baker Books
- Pesambili, J. C. (2013). Consequences of Female Genital Mutilation on Girls' Schooling in Tarime, Tanzania: Voices of the Uncircumcised Girls on the Experiences, Problems, and Coping Strategies. *Journal of Education and Practice* 4, (109), 113-114.
- Schlee, G. & Shongollo. A. A. (2012). *Islam and ethnicity in Northern Kenya and Southern Ethiopia*. Wool Bridge: James and Currey.

- Sifuma, D. (2010). Indigenous education in nomadic communities: A survey of Samburu, Rendille, Gabra, and Borana of Northern Kenya. *Preserved Africaine*, 131 (3), 66-88.
- Sookhdeo, R. (2007). *Stepping into the Shadows: Why Women Convert to Islam*. Hong Kong: Isaac Publishers.
- UNICEF (2016). *Female Genital Mutilation/Cutting. L A Global Concern*. New York: UNICEF,
- Wambua, L. M. (2013). Gender Issues Affecting the Girl Child in Kenya. *International Journal of Humanities and Social Science* 3(4), 125–128.
- Willcox, S. (2005). *Cut flowers: Female genital mutilation (FGM)*. Addis Ababa: SIM Press.
- . (2011). “*Prohibition of Female Genital Mutilation Act No. 32 of 2011*.” Published by the National Council for Law Reporting with the Authority of the Attorney-General.” Nairobi: Government Printer.
- World Health Organization (WHO) (2016). *Female Genital Mutilation*. World Health Organisation