EFFECT OF FEMALE GENITAL MUTILATION (FGM) ON THE WORK PERFORMANCE OF WOMEN WORKING IN NON-GOVERNMENTAL ORGANIZATIONS (NGOs) (CASE OF HARGEISA AND BORAMA REGIONS/SOMALILAND)

By

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D53/10917/06

A Research Project submitted to the School of Business in Partial Fulfillment of the Requirements for the Award of the Degree of Masters of Business Administration of Kenyatta University

KENYATTA UNIVERSITY
DECLARATION

STUDENT'S APPROVAL

I declare that this proposal is my original work and has not previously been published or presented for an award of degree or diploma in this or any other university or college.

Signature: Yurub Abdirahman Mumin
Date: 20/08/08

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SUPERVISOR'S APPROVAL

This proposal has been submitted for examination with my approval as a university supervisor.

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DEDICATION

I dedicated the project to my beloved mother (Khadija Muhumed Omer) my Allah bless her soul in the paradise Aamin Aamin Aamin
ACKNOWLEDGMENT

I thank to all respondents, who took part in this study. Without their useful contribution this study would have not been successful.

I express thanks and gratitude to my supervisor (Miss. L.KAVINDA) for her encouraging support and guidance in carrying out the project.

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ABSTRACT

The purpose of the study was to investigate the extent to which female genital mutilation (FGM) affect the work performance of women. Female genital mutilation is recognized by many as an issue of medical, social and legal concern. While the term "female genital mutilation" (FGM) has only recently been coined, the practice has a long and complex history. At present, female genital mutilation remains common in many cultures in Africa and the Middle East. The study was examining how Female Genital Mutilation (difficulty during childbirth, frequent pain during the period and physical and psychological problems) affect the work performance of women working in non governmental organizations (NGOs).

The study was carried out on survey design to achieve its objectives. The sample of 60 women, working in non governmental organizations was selected randomly from the 5 NGOs existing in Hargeisa and Borama Regions. The study was done in Somaliland (Hargeisa and Borama Regions). This is because FGM is still performed there.

The aim of the study was to look at how Female Genital Mutilation affects the work performance of women.

Data collection used questionnaire (both open-ended and close ended questions) and face-to-face interview, so as to collected more complete, valid and reliable data. It was collected from 5 Non-governmental Organizations (NGOs) which was selected from the 15 NGOs existing in Hargeisa and Borama regions.

The data was analyzed with the help of computer software, the Statistical Package for Social Science (SPSS). The results of the study provided useful information to non
governmental organizations so that they could contribute to the development of women. The researchers used frequencies and percentages to summarize the data. The study found that women faced various problems including frequent pain during the period, difficult during giving birth as well as physical and psychological problems after they undergo the circumcision. The study found that girls undergo circumcision when they are at the age of 4-6 as 53.33% of the respondents said, this is where the physical and psychological problems are starting since the young girls have not choice to refuse process. The study found that women faced certain difficulties due to their dual role as mother and the office responsibility based on the findings of the study, it is recommended; education for women is very important to the realization of their work. Unless women’s’ education is promoted so that they realize their full potential, the status of women in Somaliland will remain low, and women’s ability to work are likely to continue to be violated, so Somaliland society should support the activities of women in order to encourage their activities.

The study concluded that female genital mutilation (FGM) has health implications on the women. It will lead to uncontrollable hemorrhage, frequently pain and infection since it is not done with hygienic and sterilized instruments. All such health problems and some other variables like frequently pain during the period, difficulty during the childbirth, physical and psychological problems will contribute the poor work performance of women, so Somaliland society including, religious people, youth, local organizations and government need to take steps to improve the elimination of this practice.
LIST OF ABBREVIATIONS

CEDAW Convention on the Elimination of All Forms of Discrimination Against Women
CRC Convention on the Rights of the Child
FGM Female Genital Mutilation
HIV Human Immune-deficiency Virus
ICPD International Conference on Population and Development
MBO Management by Objectives
NGO Non-Governmental Organization
TFG Transitional Federal Government
UN United Nations
UNESCO United Nations Educational, Scientific and Cultural Organization
UNFP United Nations Food Programme
UNICEF United Nations Children’s Fund
WHO World Health Organization
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CHAPTER ONE

1.0 INTRODUCTION

Somalia has had no effective national government since 1991, though there is an internationally recognized government in Mogadishu and Baidoa. This government, called the Transitional Federal Government, (TFG) controls only Southern Somalia. In the northwest, there is the breakaway republic of Somaliland, which declared its independence in 1991. This governing zone is not internationally recognized although it has remained more stable and certainly more peaceful than the south and northeast.

(Source: www.somalilandgov.com)

Like any other society in the world, Somaliland is governed by a culture whose beliefs, values, customs, and a host of social practices have a powerful influence on community life. Culture is very important for national identity. Each nation has some ways of life that are unique to it. Each nation has its own specific traditional cultural practices and belief, some of which are beneficial to all members, while others affect a specific group, such as women. Culture is at the root of national development, and for that development to be sustainable that cultural must be vibrant. At the same time it is worth nothing that, some elements of culture can be obstacles to development.

(Source: Somaliland Ministry of Culture and Rural Development)

Culture is a very important element of any nation as it determines, to a large extent, the way people behave and go about their day-to-day lives. It is also one of the major factors influencing the pace of development and the direction that the process of development
takes. Without a systematic analysis of culture, it is difficult to gain a meaningful understanding of why some individuals, communities, and societies operate the way they do. In any culture, there are some practices that infringe upon human rights and others that are in line with the principles of human rights. Therefore, it is important that a careful and systematic analysis of the major cultural practices prevalent in Somaliland is undertaken to see how they impact on the performance and the enjoyment of women. Such a research will form the basis upon which action can be taken to encourage or discourage some of the cultural practices particularly FGM to ensure that all Somalilanders perform their jobs to the maximum.

It is in recognition of the important role that culture plays at all levels of society, including the personal level. Somaliland Republican Constitution regards culture and Human Rights say:

"Every person shall have the right to use the language and to participate in the cultural life of his or her choice".

FGM is not condoned in the Koran and is not authorized in Islamic practices. In fact, the Koran disallows the negative practices to all human beings. Such practice is against the law in Somaliland, but still some people are practicing and it impacts on the health of women and they may not perform as the way organization was expecting from them.

Without a clear understanding of how the FGM impact on the performance of women working in Non-Governmental Organizations (NGOs), it is difficult to design strategies
for intervention where the impact is negative. Consequently, more and more people, especially women, will continue not performing their work because of the impact of cultural practices, including FGM (Oboler 2001, 317)

The study provided more information about the effect of FGM on the work performance of women working in Non-Governmental Organizations

1.1 BACKGROUND OF THE STUDY

Female Genital Mutilation (FGM) is one of the most cultural practices that Somaliland society does. This practice is not only done in Somaliland but there are some other African and non African countries that do it, including, Djibouti, Egypt, some parts of Ethiopia, Mali, Somalia, Kenya, north of Sudan, and some others. Outside Africa, a certain form of this practice exists in Indonesia, Malaysia and Yemen. So far no comprehensive and systematic study has been carried out on how FGM in Somaliland effect on women, particularly the performance of women. Therefore, it is necessary to undertake this study, which focuses on FGM practices in Somaliland, assessing its impact on the performance of women working in Non-Governmental Organizations (NGOs).

Female genital mutilation is recognized by many as an issue of medical, social and legal concern. While the term "female genital mutilation" (FGM) has only recently been coined, the practice has a long and complex history. At present, female genital mutilation remains common in many cultures in Africa and the Middle East, varying in form and severity as a result of each group's socio-cultural norms and belief systems. It is estimated
that approximately 100 million girls and women alive today are affected by female genital mutilation. (Hedley & Dorkenoo, 1992: 5).

Non Governmental Organization (NGOS) have played important role in the rehabilitation and the reconciliation programs, and they have the potential to play an even greater role in the ongoing recovery and development process in Somaliland. Women’s organizations are now active in all regions of Somaliland; although their development is more advanced in some, these organizations faced with specific opportunities and constraints that are gender related include FGM.

Women do not use health care facilities as often as they need to (University of Sussex 1994). Their resulting poor health and nutrition make them less economically productive and more vulnerable to illness. Poor health not only leads to physical suffering but also diminished learning ability, limiting women’s work performance which can decrease their future economic productivity. Part of the reason women do not use health care facilities enough is that the health care system does not adequately address women’s needs; this will increase the likelihood of missing work. Providers do not make an effort to inform households about women’s specific health needs, and the national school curriculum does not contain sufficient information on reproduction, FGM, HIV and AIDS and other

(Source: University of Sussex of Deployment Studies 1994)
Opportunities

Women NGOs are on the whole drug free since women staffs do not chew Kat, this translates into enormous benefits in work discipline and reduced overhead expenses. This boosts morale for programme implementers.

Constraints:

Women’s NGOs are severely constrained by the near total absence of education and skilled women in the country. Somaliland women have had limited access to education, and many who are educated have poor performance because of cultural practices which include FGM; while some others who are educated have left the country for better opportunities, the few remaining with any education or skill are being hotly pursued by international organizations, which recruit them as secretaries and gender assistants only.

(Source: www.Somalilandnet.com)

Female genital mutilation can have severe medical and psychological consequences for the girls and women on whom it is performed. Government, international human rights bodies, and non-governmental organizations have engaged in efforts to eradicate the practice of FGM, including specific legislation prohibiting the practice, public education campaigns and international conventions and resolutions condemning the practice.(WHO,1994).
1.2 STATEMENT OF THE PROBLEM

A number of negative health consequences can arise as a result of FGM; consequences include pain, shock, hemorrhage, abscesses, physical and psychological problems and obstetric complications, which increase the likelihood of infant and maternal mortality. Psychological consequences include feelings of incompleteness, anxiety and depression (WHO 2000).

These effects makes women to under perform their work due to the problems associated with it, for example; painful period that makes them miss work for a week and difficulty while having children which makes them stay at home for a long time nursing wounds. (Sen. 2005, 160-161).

Therefore, this study came across out of the effect of FGM on the performance of women working in Non Governmental Organizations (NGOs) in Hargeisa and Borama Regions then recommends the solution to overcome this problem.

1.3 PURPOSE OF THE STUDY

The purpose of the study was to investigate the extent to which women’s background of FGM affected the work performance of women, particularly those working in Non Governmental Organizations (NGOs)

1.3.1 GENERAL OBJECTIVES

The main objective of this study was to assess the effect of FGM on the work performance of women, working in Non-Governmental Organizations (NGOs). In order
to achieve this objective, hence, to develop useful findings the study was pursuing specific objectives.

1.3.2 SPECIFIC OBJECTIVES

1. To find out how difficult during childbirth affecting on the work performance of women

2. To assess how frequent pain during the period will affect the work performance of women

3. To determine how physical and physiological consequences of FGM will affect on the work performance of women

4. To find out how women’s attitudes towards FGM affect their work performance

1.3.3 RESEARCH QUESTIONS

This study attempted to answer the following important questions.

1) How difficulty during childbirth affect on the work performance of women?

2) How frequent pain during the period will affect on the work performance of women?

3) How can we determine the physical and psychological consequences of FGM will affect on the work performance of women?

4) How women’s attitudes towards FGM affect on their work performance?
1.4 SIGNIFICANCE OF THE STUDY

The study had practical advantages for organizational stakeholders, women who are working in the Non-Governmental Organizations and other members who are in the field of human resource management. It provided more insight into how a number of variables, all of which were important in organizational setting and human rights, were related to FGM practices effect to Non-Governmental Organizations in Hargeisa and Borama region.

1.5 SCOPE OF THE STUDY

The study was conducted at 5 Non Governmental Organizations (NGOs) selected from the 15 NGOs existing in Hargeisa and Borama Regions, Somaliland.
DEFINITION OF THE TERMS

**Area of work:** This term refers to women’s area of work specialization. In this study, it comprises of three areas available in the NGOs, namely administration, operational and secretaries

**Culture:** is defined as the learned, shared and transmitted values, beliefs, norms and life practices of a particular group of people (Leininger & McFarland, 2002)

**Female Genital Mutilation:** Female genital mutilation (FGM), also known as female circumcision or female genital cutting, is defined by the World Health Organization (WHO) as the range of procedures which involve 'the partial or complete removal of the external female genitalia or other injury to the female genital organs whether for cultural or any other non-therapeutic reason'.

**Management by Objectives (MBO)** Management by objectives (MBO) is a systematic and organized approach that allows management to focus on achievable goals and to attain the best possible results from available resources.

It aims to increase organizational performance by aligning goals and subordinate objectives throughout the organization. Ideally, employees get strong input to identify their objectives, time lines for completion, etc. MBO includes ongoing tracking and feedback in the process to reach objectives. (The Economist, 2007)

**Non-Governmental Organizations (NGOs):** Is an organization that is not part of a government, NGOs are therefore, typically independent of governments. Although the definition can technically include for profit corporations, the term is generally restricted to social, cultural, legal and environmental advocacy group having goals that are primary non commercial

NGOs are usually non profit organizations that obtain at least a portion of their funding from private sources (Korten 1990).
**Organization:** This term defined as a group of people intentionally organized to accomplish an overall, common goal or set of goals. Business organizations can range in size from two people to tens of thousands. Steve Reid (2002)

**Performance:** This refers to the various ways in which women that are in the administration, operational and secretires carry out their responsibilities or perform their tasks. Performance is the degree of accomplishment of the tasks that make up an employee’s job (Lloyd L. Byars).

**The United Nations:** Is a general international organization established to promote international peace and security, to debate major world issues, and to help improve low standards of living and economic conditions throughout the world.

**360-degree feedback:** Is employee development feedback that comes from all around the employee. "360" refers to the 360 degrees in a circle. The feedback would come from subordinates, peers, and managers in the organizational hierarchy, as well as self assessment, and in some cases external sources such as customers and suppliers or other interested stakeholders. It may be contrasted with upward feedback, where managers are given feedback by their direct reports, or a traditional performance appraisal, where the employees are most often reviewed only by their manager.

The results from 360-degree feedback are often used by the person receiving the feedback to plan their training and development. The results are also used by some organizations for making promotional or pay decisions, which are sometimes called "360-degree review." By Armstrong, Michael, Handbook of Human Resource Management Practice (10th Edition)
CHAPTER TWO

LITERATURE REVIEW

2.0 INTRODUCTIONS TO LITERATURE REVIEW

This literature review examines the issue of female genital mutilation and its affect on work performance of women those who are working in non governmental organizations.

The practice of FGM occurs throughout the world, and it has different types, Somaliland society does Infibulations, which means removal of all/part of the female genitalia or female organ (Abdalla, R. H. D. Sisters in Affliction, 1982)

2.1 JUSTIFYING CULTURE'S ROLE IN SOCIETY

Peoples' culture can be understood through their actions, that is, their behavioural patterns and through understanding why people act in the way they do; their functional patterns (Stier & Olsson, 2004). Culture can also be understood through an interpretation of one's world, through one's cognitive processes, or through a person's understanding of their world, which is linked to their symbolic interactions (Stier & Olsson, 2004). Since cultural background greatly affects several aspects of people's lives, i.e. their beliefs, language, religion, family structure and body image, this must be considered when caring for people from other cultures (Gerrish & Papadopoulos, 1999; Meleis, 1999).

The United Nations Educational, Scientific and Cultural Organization (UNESCO, 2002) described culture as; “the set of distinctive spiritual, material, intellectual and emotional feature of society or a social group, and that it encompasses in addition to art and literature, life styles, ways of living together, value systems, traditions and beliefs”.

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2.2 FEMALE GENITAL MUTILATION AND ITS IMPACT

In 2000, the WHO estimated that the number of women who had undergone the procedure was between 100 and 140 million. According to these estimates, each year approximately 2 million women are at risk of undergoing FGM (WHO 2000). The WHO recognizes five primary factors driving the practice, with the significance of each varying from region to region. These factors are:

1. Sociological in nature (initiation of girls into womanhood, social cohesion and identification with cultural heritage, significance for marriage);
2. Based on beliefs about hygiene (belief that FGM promotes hygiene and improves aesthetic appeal);
3. Based on myths (enhancement of child survival, increased fertility);
4. Based on religious belief (some communities practice because they believe it is demanded by Islam; while it predates the faith, it has been incorporated into Islam in many cases); and,
5. Can be psychosexual in nature (the most controversial and gender-discriminating of the forces which act to maintain FGC, including attenuation of sexual desire, maintenance of chastity until, and fidelity during, marriage and enhancement of male sexual pleasure)

The International Planned Parenthood Federation estimates that between 85 and 115 million girls and women living today in the Arab world, sub-Saharan Africa, Malaysia, Indonesia, as well as in immigrant populations in Canada, the United
States, Europe, Australia and New Zealand, have undergone this traditional procedure (duRocher, 1992: 11). Furthermore, the World Health Organization (WHO) estimates that up to 2 million girls are at risk of female genital mutilation annually (World Health).

All these information is increasing the possibility of performing poorly of women, both at work and at academic places.

Currently, only anecdotal accounts outline the range and forms of female genital mutilation allegedly practised in North America, Europe, Australia and New Zealand. Data does exist, however, for the regions where FGM remains a traditional custom. Sunna circumcision continues in North and South Yemen, Saudi Arabia, Iraq, Jordan, Syria, and Southern Algeria. Cases of excision are found throughout Africa, including Egypt, Mozambique, Botswana, and Lesotho. Infibulation remains customary in Somalia, Ethiopia, the Sudan, Kenya, Nigeria, Mali, Burkina Faso (previously Upper Volta), and parts of the Ivory Coast. Although little information is available, it has been documented that this procedure is practiced by Muslim populations in the Philippines, Malaysia, Pakistan and Indonesia. (duRocher, 1992: 11).
### 2.3 Geographic Distribution and Prevalence of FGM

<table>
<thead>
<tr>
<th>Country</th>
<th>% Prevalence of FGM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Somalia</td>
<td>Close to 100 %</td>
</tr>
<tr>
<td>Djibouti</td>
<td>Close to 100 %</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>90 %</td>
</tr>
<tr>
<td>Mali</td>
<td>90 %</td>
</tr>
<tr>
<td>Sudan North</td>
<td>90 %</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>90 %</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>70 %</td>
</tr>
<tr>
<td>Gambia</td>
<td>60 %</td>
</tr>
<tr>
<td>Ivory Coast</td>
<td>60 %</td>
</tr>
<tr>
<td>Kenya</td>
<td>60 %</td>
</tr>
</tbody>
</table>

The figures relating to female genital mutilation and its geographic distribution came from *Female Genital Mutilation: Proposals for Change* (Minority Rights Group, 2003: 22).

FGM is a term, which describes the removal either in part, or whole of the female external genitalia and/or injury to the female genital organs for cultural or any other non-therapeutic reasons.
Due to the above figures, the prevalence of female genital mutilation is high in Somalia/Somaliland comparing to the other African countries. FGM is carried out at the request of the girl’s parents or relatives, and it’s often performed by traditional, medically untrained elderly female birth attendants, particularly rural areas. A number of negative health consequences can arise as the result of FGM, which will vary according to the type and severity of procedure performed, consequences, include frequent pain, shock, hemorrhage, infection, feeling of incompleteness, anxiety, depression among others. All these health consequences affect the capability of women both physical and psychological; she may not able to perform her work effectively and efficiently. Although its not only Somaliland ladies those who are suffering this practices but its one of those countries with the highest percentage according to this statistics.

In April 1997, three UN agencies - the World Health Organization, the United Nations Children's Fund and the United Nations Population Fund, unveiled a Joint Plan to bring about a major decline in FGM within ten years and to completely eradicate the practice within three generations. The plan focuses on educating the public and lawmakers on the need to eliminate FGM and to encourage every African nation to develop and enforce national plans to stop FGM

One often neglected aspect of the medical and psychological problems ascribed to FGM is their impact on a women’s education: absenteeism, poor concentration, poor performance at work, low academic performance and loss of interest have been associated with FGM. (Nahid Toubia, 2004)
2.4 MAIN REVIEW

EFFECT OF FGM ON PERFORMANCE OF WOMEN

Advocate for Women Article volume 6, state “it is unacceptable that the international community remains passive (about FGM practices) in the name of a distorted vision of multiculturalism. Human behaviors and cultural values, however senseless or destructive they may appear from the personal and cultural standpoint of others, have meaning and fulfill a function for those who practice them. However, culture is not static but is in constant flux, adapting and reforming. People will change their behavior when they understand the hazards and indignity of harmful practices and when they realize that it is possible to give up harmful practices without giving up meaningful aspects of their culture”.

WHO, (1996). In every culture, important practices exist which celebrate life-cycle transitions, perpetuate community cohesion, or transmit traditional values to subsequent generations. These traditions reflect norms of care and behavior based on age, life stage, gender, and social class. While many traditions promote social cohesion and unity, others erode the physical and psychological health and integrity of individuals, particularly girls and women. Factors such as limited access to education, information, and services allow those that may be most harmful to persist.

Nevertheless, harmful traditions exist in many different forms, but they share origins in the historically unequal social and economic relationships between men and women. Female genital mutilation and gender bias have received global attention due to their
severe, negative impact on the health and well-being of females. Efforts to alter or eradicate these practices are often met with suspicion or hostility from those communities practicing them, particularly when efforts originate from outside the community.

Female Genital Mutilation, Early marriage and heavy work are some of the factors responsible for the poor work performance, lack of skills and lack of professional (Platform for Action of the 1995 Fourth World Conference on Women).

UN(2004) Every social grouping in the world has specific traditional cultural practices and beliefs, some of which are beneficial to all members, while others are harmful to a specific group, such as women. These harmful traditional practices include female genital mutilation (FGM); son preference and early pregnancy and its implications for the status of the girl child; despite their harmful nature and their violation of international human rights laws, such practices persist because they are not questioned and take on an aura of morality in the eyes of those practicing them.

(ICPD, 2006) Health consequences of FGM seem to vary according to the type and severity of the procedure. Complications may range from immediate, such as bleeding and shock, to a wide range of longer-term problems for women and their newborn children. Psychological effects may be profound and permanent. Additionally, FGM may increase the risk of HIV, due to unclean conditions often associated with the procedure. Due to all consequences women will not carry out their tasks as effective as the organization expecting from them.
2.5 CRITICAL REVIEW OF THE MAIN ISSUE

The Convention on the Elimination of All Forms of Discrimination (CEAFO) against Women calls for the elimination of discrimination against women in the field of employment, "in order to ensure, on a basis of equality of men and women, the same rights" (art. 11, Para). Major inequalities persist in employment, access to credit, inheritance rights, marriage laws and other socio-economic dispensations. Compared with men, women have fewer opportunities for paid employment and less access to skill training that would make such employment possible. Women are usually restricted to low-paid and casual jobs, or to informal activities.

UNICEF (2002) difficulty of giving birth also has an effect on the performance and physical development of the women. Early marriage like early sexual encounters can have health consequences on the life of the women; this can increase the number of women who are leaving their occupations.

2.6 SUMMARY AND THE GAPS TO BE FILLED BY THE STUDY

It's true that women are playing an important role in the society, both in providing financial support to the family and bringing up a close neat family. If we have a glance over the history, we will come to know that behind every successful man is a woman. Women therefore should be given all the support from their work places to be able to achieve the above objectives.

So far no comprehensive and systematic study about how FGM effect the work performance of women has been carried out in Somaliland, so the current study will fill
this gap. Moreover, the study will help the organization management to understand more about women and help them in achieving their personal development and the organizational development.

The study will also help women to achieve their ambition and personal goals after they got the information about how FGM is affecting their work performance.
2.7 CONCEPTUAL FRAMEWORK

Figure 1: Conceptual framework

- Woman's capabilities are limited if negative mental and/or physical health consequences result from the procedure; she will not be able to take full advantage of her set of personal abilities if she suffers from infection and pain. Therefore, she may not be able to perform her work effectively and efficiently in the organization, where she is employed.
• Hemorrhaging may occur as a result of complete removal of the prepuce and clitoris. Infection and frequent pain may also be a consequence of FGM. This can cause missing work (Brown, Calder, & Rae, 1989).

• Due to the inelasticity of scar tissue, sexual intercourse and childbirth can also become complicated and painful.

The created clear understanding of how FGM affect the work performance of women particularly those who working in Non-Governmental Organization (NGOs)
3.0 INTRODUCTION

This chapter brings out the research methodology that used to meet objectives of the study. It was organized into five subsections namely: the research design, target population, sampling design, data collection instruments and procedures, and analysis.

3.1 RESEARCH DESIGN

The study was carried out using a simple random sampling in order to explore the affect of two variables, both dependent (Work performance) and independent (Female Genital Mutilation). Simple random sampling indicated where there were free of systematic bias that might stem from choices made. They were better gathering relatively simple facts or reports of behavior (such as how often the respondent misses work or school) (Cohen & Manion, 1994; Gall, Borg & Gall, 1996; Scott, 1996; Scott & Usher, 1999). The design was appropriate as it allows us to analyze the affect between a number of variables and provided information about the degree of the affect among the variables (Gall, Borg & Gall, 1996).

3.2 TARGET POPULATION

The population of the study was 60 women including secretaries, operational group and the top management of each organization. These groups were targeted because of their English proficiency.
There were 15 NGOs in Hargeisa and Borama Regions in Somaliland. (Source: Somaliland Ministry of Planning and National Coordination, 2006). The study targeted 5 NGOs out of the 15, where the appropriate data was collected

3.3 SAMPLING DESIGN

The respondents were selected from the staff members using simple random sampling, in which the target population was given an equal chance of being selected (Nchmias & Nachmias, 1996). Krejcie and Morgan (1970) recommend that a population of 50-120 can be adequately represented by a sample of 60 subjects, while Kathuri and Pals (1993) suggest a slightly larger sample size of 74 subjects for the same population. It is desirable to collect data from more subjects than required by the research method to take care of non-response and other forms of casualties (Gupta, 2003). In addition, the numbers of secretaries were already small, and any further reduction in their number was not facilitated in quantitative analysis. As the result consequently the sample size was 60 staff.

Table 1: Classification of sample according to title of the staff

<table>
<thead>
<tr>
<th>Position/Title</th>
<th>Name of Organizations</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secretaries</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>Operations group</td>
<td>6</td>
<td>4</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>25</td>
</tr>
<tr>
<td>Top management</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>4</td>
<td>6</td>
<td>25</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>60</strong></td>
</tr>
</tbody>
</table>
3.4 DATA COLLECTION PROCEDURE

Before the data collection phase of the study commences, the researcher was seeking approval from the top management of each organization. After such approval granted, the list of the staff registered from the office of human resource, that were to take part in the study were selected from these lists, using simple random sampling. Then, the researcher contacted the selected employees and requested them to be available at specific day and time.

The main instrument of collecting primary data were questionnaire, which was consisting of both open-ended and close ended questions and face-to-face interviews in order to capture more complete, valid and reliable data.

The office of the human resource was requested to distribute questionnaires, with clear instructions on how to do, when and where to return them after completion. Follow-up steps were taken to achieve the maximum response rate possible.

3.5 TECHNIQUES OF DATA ANALYSIS

The study used the Statistical Package for Social Sciences (SPSS), version 12.0 to analyse the data. As has been pointed out in the preceding of this research, the study focused on the effect of Female Genital Mutilation on the work performance of women.
CHAPTER FOUR

DATA FINDINGS, ANALYSIS AND INTERPRETATION OF RESULTS

4.0 INTRODUCTION

In this chapter an endeavor was made to analyze data and present the findings of the study. The results are presented in the form of frequency distribution, percentage tables and charts. The respond rate was high at 100% at out of 5 non governmental organizations which were surveyed.

On analysis of question 3 (respondent’s age) the frequency table below was generated and following observations made.

Table 2: Ages of Respondents

<table>
<thead>
<tr>
<th>Categories</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-24</td>
<td>12</td>
<td>20.00</td>
</tr>
<tr>
<td>25-30</td>
<td>25</td>
<td>41.66</td>
</tr>
<tr>
<td>31-35</td>
<td>11</td>
<td>18.33</td>
</tr>
<tr>
<td>36-40</td>
<td>4</td>
<td>6.66</td>
</tr>
<tr>
<td>41-45</td>
<td>6</td>
<td>10.00</td>
</tr>
<tr>
<td>46-50</td>
<td>2</td>
<td>3.33</td>
</tr>
<tr>
<td>50+</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>
Figure 2: Age Respondents

Source: Researcher 2008

A big portion of women whose ages ranged from 18-30 seemed to be the category with the most frequent workers of women NGOs. On the other hand, from the responses given by respondents the numbers of young skilled ladies are increasing according to the age of ladies interviewed. Alternatively, none of the respondents were older than 50, this is an opportunity to encourage the young ladies to work and get higher opportunities in the field of work.
On analysis of question 4 (respondent's marital status) the frequency table below was generated and following observations made.

**Table 3: Marital status of the respondents**

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>14</td>
<td>23.33</td>
</tr>
<tr>
<td>Married</td>
<td>25</td>
<td>41.66</td>
</tr>
<tr>
<td>Widow</td>
<td>9</td>
<td>15.00</td>
</tr>
<tr>
<td>Divorced</td>
<td>12</td>
<td>20.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>60</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

This table shows that most of the respondents were married, meaning that a greater percentage of married women were willing to respond to the given questionnaires. On the other hand this showed that the most of the people who were selected happened to be married; whereas 20% of the women interviewed were single and 15% were widowed. So the implication of this table showing is that most of the women responding the questionnaire were married, so they have more practical examples on the effect of FGM.

On analysis of question 4 (respondent's marital status) the frequency table below was generated and following observations made.

![Figure 3: Marital status](Source: Researcher 2008)
On analysis of question 5 (respondent’s level of education) the frequency table below was generated and following observations made.

**Table 4: Respondent’s education level**

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secondary</td>
<td>13</td>
<td>21.66</td>
</tr>
<tr>
<td>College</td>
<td>16</td>
<td>26.66</td>
</tr>
<tr>
<td>University</td>
<td>25</td>
<td>41.66</td>
</tr>
<tr>
<td>other</td>
<td>6</td>
<td>10.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>60</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

According to the level of education of the respondents, the workers of Womeñ NGOs varied with the level of education. People with University degrees happened to be the group who’s the most of the employees were working in the organizations whereas the college graduates happened to be the second group workers in the women organizations, secondary and other non formal education graduates were the least employees in the
women NGOs according to the above table. This table indicates that most of women employees in NGOs are educated, this helps organizations to achieve their objectives through the skilled employees.

On analysis of question 7 (Days that women work in organization) the frequency table below was generated and following observations made.

### Table 5: Days that women work in organizations

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saturday-Thursday</td>
<td>45</td>
<td>75</td>
</tr>
<tr>
<td>Saturday-Wednesday</td>
<td>15</td>
<td>25</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>60</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

![Figure 5: Women working days in organization](chart.png)

Source: Researcher 2008

According to the data in the table above, 75% of respondents work from Saturday to Thursday while only 25% work from Saturday to Wednesday. Thus, we can say some of the employees have only one day off while others have two days off each week.
However, the aim of performance assessment is to identify training and development needs, provide guidance on possible directions in which an individual's career might go, and indicate who has a potential for promotion and also to layoff those who does not have the capability to perform, so being absent two days each week is a good example of poor performance although it depends on the policy of the organization.

On analysis of question 8 (major cultural practices performed in Somaliland) the frequency table below was generated and following observations made.

**Table 6: Working Hours (per day)**

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-4hrs</td>
<td>9</td>
<td>15</td>
</tr>
<tr>
<td>4-6hrs</td>
<td>17</td>
<td>28.55</td>
</tr>
<tr>
<td>6-8hrs</td>
<td>25</td>
<td>41.66</td>
</tr>
<tr>
<td>More</td>
<td>9</td>
<td>15</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>60</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

**Figure 6: Working Hours (per day)**

*Source: Researcher 2008*
Consistent with the table above, 41.66% of the employees work 6 to 8 hours per day while 28.55% work 4 to 6 hours. Likewise, 15% of the respondents work only 2 to 4 hours per day. Again, 15% work above 8 hours per day. This shows that most of the employees in the non-governmental organizations work between 6 to 8 hours each day, this is the standard working hours in the international organizations, so it's showing that most interviewed women are working on the basis of international standard hours, though it depends on policies and the procedures of each organization, however, competent and committed employees move the organization forward.

On analysis of question 9 (cultural practices prevalent changing significantly in Somaliland) the frequency table below was generated and following observations made.

**Table 7: Days or hours employee can miss work every week**

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-4hrs</td>
<td>16</td>
</tr>
<tr>
<td>4-6hrs</td>
<td>9</td>
</tr>
<tr>
<td>6-8hrs</td>
<td>9</td>
</tr>
<tr>
<td>1 day or more</td>
<td>26</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>60</strong></td>
</tr>
</tbody>
</table>
In relation to the data, the above table shows 43.33% of the employees miss the work one day or more. 26.66% miss two to four hours, this means they may come late at work or they or they may leave early, the consequences of FGM can lead the employees to miss the work, as they were not suppose to miss the work.

On analysis of question 10 (Do you think problems from the FGM like, difficult giving birth, frequent pain during the period among others can affect your work performance) the frequency table below was generated and following observations made.

**Table 8: Major cultural practices performed in Somaliland**

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female genital mutilation</td>
<td>45</td>
<td>75</td>
</tr>
<tr>
<td>Early marriage</td>
<td>12</td>
<td>20</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>60</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>
According to the respondents, 75% of the interviewed employees responded that the most cultural practices performed in Somaliland is FGM, while 20% of the respondents respond early marriage was common cultural practice that Somaliland society does and only 5% of the respondents replied neither of above two was cultural practices performed in Somaliland. This results that there was heavily practices of FGM in Somaliland society.

On analysis of question 12 (cultural practices prevalent changing significantly in Somaliland) the frequency table below was generated and following observations made.

### Table 9: Cultural practices prevalent changing significantly in Somaliland

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female genital mutilation</td>
<td>41</td>
<td>68.33</td>
</tr>
<tr>
<td>Early marriage</td>
<td>14</td>
<td>23.33</td>
</tr>
</tbody>
</table>
In line with the cultural practices changing significantly in Somaliland, most of the respondents said FGM was the most common cultural practices changing considerably where 23.33% of the respondents said early marriage changing significantly in Somaliland, furthermore, only 8.33% of the respondents replied that there were other cultural practices changing much in Somaliland apart from FGM and Early Marriage but didn’t specify the other cultural practices which were changing significantly. This confirms that Somaliland society have recently understood the difficulty of FGM

On analysis of question 14 (Do you think the problems from the FGM like, difficult giving birth, frequent pain during the period among others can affect your work performance) the frequency table below was generated and following observations made.
Table 10: Do you think problems from the FGM like, difficult giving birth; frequent pain during the period among others can affect your work performance?

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>41</td>
<td>68.33</td>
</tr>
<tr>
<td>No</td>
<td>19</td>
<td>31.66</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

Figure: 10 problems from FGM and its effect on the work performance

Source: Researcher 2008

Considering the above data the 68.33% said that FGM problems like difficult during giving birth, frequent pain during the period, among others can affect the work performance of women; although 31.66% of the interviewed employees reported that the above mentioned problems have no effect on work performance of women. Consequences of FGM like frequent pain during the period, difficult during the giving birth among others can’t affect the work performance of women, finally we can say consequences arise from FGM can affect the work performance of women.
On analysis of question 15 (Do you think the consequences of FGM can include physical and psychological problems) the frequency table below was generated and following observations made.

Table: 11 Do you think the consequences of FGM can include physical and psychological problems?

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>39</td>
<td>65</td>
</tr>
<tr>
<td>No</td>
<td>21</td>
<td>35</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

Figure: 11 consequences of FGM can include Physical and Psychological problems

Source: Researcher 2008

Taking into consideration the above table showed 65% of the employees interviewed responded consequences of FGM can include both physical and psychological problems whereas the rest responded physical and psychological problems can not include the
consequences of FGM, so in generally we can conclude that physical and psychological problems can include the consequences of FGM which will have an affect on their work performance.

On analysis of question 17 (Do people in this area openly discuss FGM) the frequency table below was generated and following observations made.

**Table 12: Do people in this area openly discuss FGM?**

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>22</td>
<td>36.66</td>
</tr>
<tr>
<td>No</td>
<td>38</td>
<td>63.33</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

As the above showed, 36.66% of the interviewed employees responded Somaliland society openly discuss FGM, whereas, 63.33% replied no that Somaliland society do not
openly discuss FGM because of the parents’ unwillingness to discuss with the young children and the vise versa. Thus in conclusion we can report people in this area can openly discuss FGM.

On analysis of question 20 (When you are in the period do you feel pain) the frequency table below was generated and following observations made.

Table: 13 When you are in the period do you feel pain?

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>32</td>
<td>53.33</td>
</tr>
<tr>
<td>No</td>
<td>28</td>
<td>46.66</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

Figure: 13 when you are in the period do you feel pain

Source: Researcher 2008
In accordance with the above table, 53.33% of the respondents said, yes we feel pain when we are in the period, this painful will lead poor work performance, given that they may not work as affective as the other days. Alternatively, 46.66% of the respondents said, we do not feel pain during the period. Finally, women who have undergone the circumstance can feel pain when they are in the period, and this affected their work performance.

On analysis of question 21 (Does this pain affect your work performance) the frequency table below was generated and following observations made.

Table 14 Does this pain affect your work performance?

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>32</td>
<td>53.33</td>
</tr>
<tr>
<td>No</td>
<td>28</td>
<td>46.66</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

Figure: 14 Does the pain affect work performance

Source: Researcher 2008
In relation to the above question 53.33% of the employees interviewed responded the pain have an impact on their work performance, again 46.66% responded the pain does not affect on their work performance. In total the researcher conclude the pain from FGM affect on the work performance of the women working in NGOs.

On analysis of question 23 (Age at which girls' undergo circumcision) the frequency table below was generated and following observations made.

Table 15: Which ages do the girls undergo FGM?

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>4-6 yrs</td>
<td>30</td>
<td>50.00</td>
</tr>
<tr>
<td>6-8 yrs</td>
<td>20</td>
<td>33.33</td>
</tr>
<tr>
<td>8-10 yrs</td>
<td>10</td>
<td>16.66</td>
</tr>
<tr>
<td>10-12 yrs</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>60</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

Figure: 15 Girl’s Age at which girls’ undergo circumcision

Source: Researcher 2008
As the above table showed most of the respondents mentioned that girls are circumcised at the age of 4-8 years, again 16.66% of the respondents’ responded girls are circumcised at the age of 8-10 years. Likewise, none of the respondents said girls are circumcised at the age of 10-12. The implication of the above responses explaining that girls are undergone the circumcision while they are young, so this will result to psychological problems, which will lead them to miss and poorly perform their work.

On analysis of question 28 (Which performance appraisal method is used by your organization) the frequency table below was generated and following observations made.

**Table 16: Performance appraisal method used by your organization**

<table>
<thead>
<tr>
<th>Method</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management by objectives</td>
<td>28</td>
<td>46.66</td>
</tr>
<tr>
<td>Work standards approach</td>
<td>14</td>
<td>23.33</td>
</tr>
<tr>
<td>Easy appraisal Method</td>
<td>10</td>
<td>16.66</td>
</tr>
<tr>
<td>Multi rate assessment</td>
<td>8</td>
<td>13.33</td>
</tr>
<tr>
<td>Others ,specify</td>
<td>0</td>
<td>0.000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>60</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>
In conjunction with the above table 46.66% of the respondents said that; their organization use management by objectives to evaluate employee’s’ performance appraisal while 23.33% said; they use work standard approach, as16.66% replied they use easy appraisal method and 13.33% said their organizations use multi-rate assessment to evaluate the performance of their employees. As mentioned the majority of the respondents, most of the organizations use management by objectives which is giving the employee straight goals and objectives with the support of their subordinates and the employee getting a strong facilities to achieve the objectives and finally, the employees getting a continual feedback from the management. So, this is the most useful performance appraisal method which Somaliland NGOs use to evaluate the employee’s performance.

On analysis of question 29 (Using the above appraisal methods, how is your performance rated) the frequency table below was generated and following observations made.
Table 17 using the above appraisal methods how is your performance rated

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poor</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Fair</td>
<td>8</td>
<td>13.33</td>
</tr>
<tr>
<td>Good</td>
<td>18</td>
<td>30.00</td>
</tr>
<tr>
<td>Very good</td>
<td>19</td>
<td>31.66</td>
</tr>
<tr>
<td>Excellent</td>
<td>15</td>
<td>25.00</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

Figure: 17 how performance rated

Source: Researcher 2008

From the frequency table 15 above ensuring the rated performance appraisal of the employee, nineteen (31.66%) of the employee interviewed fall within the rate of very good, while eighteen (30%) fall within the range of good and the rest (25%) indicates that they are rated excellent. The inference is then that majority of the employees have
performed in way which is helping the organization to achieve its objectives as well as the employee to get higher promotion or training.

On analysis of question 30 (how effective does your organization considers the performance of employee) the frequency table below was generated and following observations made.

**Table 18: How effective does your organization consider the performance of employee?**

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly effective</td>
<td>8</td>
</tr>
<tr>
<td>Very effective</td>
<td>38</td>
</tr>
<tr>
<td>Effective</td>
<td>9</td>
</tr>
<tr>
<td>Not effective</td>
<td>5</td>
</tr>
<tr>
<td>Strongly not effective</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>60</strong></td>
</tr>
</tbody>
</table>

![Figure: 18 how effective does the organization consider employee's performance](image-url)

Source: Researcher 2008
From the frequency table 16 above considering how effective does the organization reflect on the employees’ performance hence thirty eight (63.33%) of the employee interviewed fall within the range of very effective, respectively, eight (13.33%) fall within the range of strongly effective while the rest (23.33%) indicated that they are effective or not effective. The supposition then is that majority of the organizations ranking the employees’ performance in a way which gratifying the employees.
4.1 QUALITATIVE ANALYSIS

This assisted to analyze information from the respondents in the open-ended questions in a systematic way. In order to come up with useful conclusions and recommendations about the problem being studied, and also establishing pattern trends and relationship between information gathered.

According to the findings, many of the respondents responded when they are on leave (maternity leave) they do not came back on time, which is indicating they stay more time at home, hence, majority of the respondents believed FGM is causing this problem. However, Somaliland is a place where FGM is common as the 46.71% of the respondents remarked. As table 9 showing, 68.33% of the respondents agreed physical and psychological problems include the problems arise from FGM, thus, physical and psychological problems affect the work performance of women, they are feeling incomplete, depression and morally not ok. However, the general objective of performance appraisal method is to know where the employee is now and where do we want to be; so it the responsibility of human resource manager and in generally the department of human resource management to be taken specific steps (like trainings) to improve the employee’s performance

On the other hand, refer to table 8, 68.33% of the respondents indicate that FGM is the most cultural practice significantly changing in Somaliland, and the factors behind are public campaign, TV programs and religious discussions that Somaliland government, Non governmental organizations, youth organizations, religious leaders among others had put considerable efforts to eliminate the harmful practice
It was evident that there is no relation between FGM and the religion beliefs as 54.5% of the respondents declared.

In conclusion, performance appraisals not only let employees know how well they are performing but also influence their future level of effort and task direction.
CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

5.0 INTRODUCTION

As declared in section 1.2 (p 5) of this paper, the purpose of this study was to investigate the extent to which women's background of FGM affected the work performance of women, particularly those working in Non Governmental Organizations (NGOs). This was with the view of determining how Female Genital Mutilation affects on the work performance of women. After data analysis, the findings of the study are outlined below.

5.1 CONCLUSIONS

The first research question sought how difficulty during childbirth affects on the work performance, specifically those who are working in non-governmental organizations (NGOs). After analyzing the collected data the conclusion was that FGM result in health problem, like difficulty during giving birth which has an influence on the work performance of women for the reason of admitting in the hospital and staying there more time and feeling more pain.

The second research question sought how frequently pain during the period affects the work performance of women. After analyzing the collected data, the conclusion was that (53.33%) of the employee interviewed indicated that frequent pain during the period affected their work performance while the rest (46.66%) indicated that pain during the period have no effect on their work performance.
The third research question sought how to determine the physical and psychological consequences of FGM will affect on the work performance of women. After analysis of the collected data the conclusion was (65%) indicated that physical and psychological consequences has a negative impact on the work performance of women, poor concentration, low academic performance and loss of interest have been associated with FGM. While the rest (35%) indicated that physical and psychological problems have no affect on the work performance of women.

The fourth question sought how women’s attitude towards FGM affects on their work performance. The data was analyzed using frequency table and charts it was evident that 48.7% of the total sample agreed to stop the negative practice while (11.3%) prefer the continuity of the practice called (Sunna) type. Regarding their attitude towards its health problems majority of the respondents agreed to eradicate the circumcision.

The overall conclusion of this study is that female genital mutilation (FGM) has health implications on the women. It will lead to uncontrollable hemorrhage, frequently pain and infection since it is not done with hygienic and sterilized instruments. All such health problems and some others variables like frequently pain during the period, difficulty during the childbirth, physical and psychological problems will contribute to the poor work performance of women.
5.2 RECOMMENDATIONS

After undertaking the research, analyzing data collected and interpreting the findings, it is important that, the researcher came up with some recommendations. However, the study aims at knowing how female genital mutilation affect on the work performance of women, a further aim is to provide scientific reference, which may be used in the educational, organizational settings and awareness programs to eradicate this harmful traditional practice. These measures are very important especially in the areas pointed above; recommendations include

1. There is a need to understand the common uses of performance appraisal it is not only to know the level employee performing but for making administrative decision relating to promotions, firings, layoffs and merit pay increase
2. There is a need to understand the important role that women playing in the society
3. Organizations need to ensure that performance appraisal information can provide the needed input for determining both individual and organizational training and development needs
4. There is need to understand the details of the practice, granted though that often it is difficult to understand the actual physical and mental impact of a practice
5. Human resource managers need to attract, encourage, and retain the number of women required with the right competent, because the success of every organization depends on having the right people in the right jobs at the right time
6. Women, as one category of the main victims, must be given the opportunity to participate in the process of modifying the “negative” practices. Their voice must be heard on how the practices must be modified.

7. The Ministry of Health should take a leading role in promoting healthy cultural practices by giving advice to all participants in cultural practices such as circumcision and discouraging the unhygienic practices.

8. There is need to respect a positive or “neutral” traditional practice. This helps to make the people realize that not all of their cultural practices are negative.

9. Education for women is very important to the realization of their work. Unless women’s’ education is promoted so that they realize their full potential, the status of women in Somaliland will remain low, and women’s ability to work are likely to continue to be violated.
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APPENDICES

APPENDIX I

QUESTIONNAIRE

PART A

PERSONAL DETAILS

This questionnaire will assist in gathering information about the effect of FGM on the performance of women working in non-governmental organizations, specifically the secretaries (A case study of Hargeisa region/Somaliland).

All the information obtained from this survey will be treated with highest confidentiality and it will be appreciated.

Please fill the given space with capital letter and tick (✓) where applicable.

1. Name of the organization: ____________________________

2. Position in the organization: ____________________________

3. Age: ____________

4. Marital Status

   a) Single ☐

   b) Married ☐

   c) Widowed ☐

   d) Divorced ☐
5. Level of Education:

a) Secondary

b) College

c) University

d) Other, specify: __________

ORGANIZATIONAL INFORMATION

PART B

6. For how long have you been working in the organization? _________________

7. How many days do you work per week?

a) Saturday-Thursday

b) Saturday-Wednesday

8. How many hours are you supposed to work per day and per week?

a) 2-4hrs

b) 4-6hrs

c) 6-8hrs

d) More
9. How many hours they will allow you to miss work?

a) 2-hrs

b) 4-hrs

c) 6-hrs

d) More

10. What are the major cultural practices performed in your traditions?

a) Female Genital Mutilation

b) Early Marriage

c) Others, specify

11. In what ways are these influenced by religious beliefs in this area?

a) Strongly influenced

b) Influenced

c) Not influenced

d) Strongly not influenced

12. Which cultural practices prevalent in this area are changing significantly?

a) Female Genital Mutilation

b) Early Marriage

c) Others, specify
13. What factors are influencing the change in these cultural practices?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

14. Do you think the problems from the FGM like, difficult giving birth, frequent pain during the period among others can affect your work performance

a) Yes  

b) No

15. Do you think the consequences of FGM can include physical and psychological problems?

a) Yes  

b) No

16. If yes, how physical and psychological problems affect your work performance

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

17. Do people in this area openly discuss FGM?

a) Yes  

b) No
18. If no Why?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

19. How common is FGM in this area?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

20. When you are in the period do you feel pain?

   a) Yes ☐
   b) No ☐

21. Does this pain affect your work performance?

   a) Yes ☐
   b) No ☐

22. If yes, how does it affect?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________
23. Which age do the girls undergone FGM?

a) 4-6 years
b) 6-8
c) 8-10
d) 10-12

24. When you are on leave (maternity leave) do you come back on time or you stay longer at home?

25. Please give explanation on your attitude towards FGM?

26. Do you think your attitude negative/positive towards FGM will affect your work performance?

a) Yes
b) No
27. If yes explain how

28. Which performance appraisal method is used by your organization?

a) Management by Objectives (MBO) □

b) Work standards Approach □

c) Essay Appraisal □

d) Multi-Rater Assessment or 360- Degree Feedback □

e) Others, specify________________________

29. Using the above appraisal methods, how is your performance rated?

1. Poor □

2. Fair □

3. Good □

4. Very good □

5. Excellent □
30. How effective does your organization consider the performance of employee?

a) Very effective  
b) Not very effective  
c) Effective  
d) Below average

31. Any other comments

__________________________________________________________

__________________________________________________________

__________________________________________________________

End of Questionnaire

Thank you for your cooperation
APPENDIX II

REPUBLIC OF SOMALILAND

Somaliland situated on the eastern horn of Africa and lies between the 08°00' - 11°30' parallel north of the equator and between 42°30' - 49°00' meridian east of the Greenwich it shares borders with republic of Djibouti to the west, federal republic of Ethiopia to the south and Somalia to the east. Somaliland has the coastal line to the north of the country which extends 460 miles along the red sea.

AREA

Somaliland is about the size of England and Wales with an area of 137600 KM² (68000 sq. miles)

POPULATION

The population of Somaliland is estimated at around 3.5 million. The average population growth rate is 3.1%. Population density is estimated at approximately 25 persons per sq. km. 55% percent of the population is either nomadic or semi-nomadic, while 45% percent live in urban centers or rural towns. The average life expectancy for the male is 50 and for females its 55.

LANGUAGES

Somalia is the official language. Arabic and English are the other official languages

RELIGION

Islam-Suni
CAPITAL CITY AND MAIN TOWNS

Hargeisa is the capital of Somaliland with an estimated population of 0.45 million. The other main towns are Burao, Borama, Berbera, Erigavo and Las-anod.

EDUCATION

There are 163 primary schools with student population of 33000 as per the number of teachers in primary education is 954. Several private schools catering for primary, secondary and vocational trainings exist. 7 universities and some other colleges have been opened in Somaliland during the last few years.

Source from Somaliland Ministry of National Planning and Coordination (2007)