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Webb, C. A., Schwab, Z. J., Weber, M., DelDonno, S., Kipman, M., Weiner, M. R., et al. (2013). Convergent and divergent validity of integrative versus mixed model measures of emotional intelligence. *Intelligence* 41, 149–156.

Wesley Styles, Jessica J Williams (2020) Promoting Resilience in Teachers: An Examination of a Program Designed to Improve Teachers' Social-Emotional Competence, search.proquest.com

Situated Harmful Traditional Practices in South-western Nigeria: Recent Progress, challenges and lessons for policy engagements

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Abstract

Harmful traditional practices (HTPs) are discretionary social challenges facing mostly girls and women of all ages and sizes. Wherever it occurs, HTPs rob girls and women of their childhood, deny them the chance to determine their own future as well as threaten the well-being of individuals, families and societies. Previous studies have worked on various interventions such as interagency statement on eliminating female genital mutilation, global strategy efforts and lots more. None of these studies have been able to analyse harmful traditional practices in south Nigeria vis-à-vis recent progress in its reduction, pending challenges and lessons for policy engagements, hence this study did a re-assessment of the state of things in terms of its reduction efforts, pending challenges, lessons, effects and plausible solutions to HTPs for policy engagements. The study adopted a mixed methods research design of the explanatory type (qual + QUAN). The study deployed a two-prong approach in which focus group discussion sessions were conducted and thematically analysed to design the quantitative instrument. The population of the study comprised all elders who are 50 years and above. The multi-stage sampling procedure was adopted. The first stage was the total enumeration of states in southwest Nigeria. The random sampling technique was used to select 18 Local government areas (One per Senatorial District) in SW, Nigeria. From each of the LGAs, 35 participants who are 50 years and above were purposively selected. A self-designed instrument titled Questionnaire on Harmful Traditional Practices (QHTPs, $r=0.82$) with sub-scales was used. It was also translated in local dialect for easy understanding and responses. The study which began in 2019 and due to covid_19 pandemic lasted two and half years. Recent progress have been made, some challenges have been discovered which are epistemic understanding;

lack of focus on prevention and imperatives for ministers to pursue short-term solutions; lack of continuity of programmes meant to dismantle htps. and few lessons have been learnt. It is recommended that through education, collaborative engagements and seminars, the reduction efforts of harmful traditional practices in southwestern Nigeria can be achieved holistically.

Keywords: Harmful Traditional Practices, Reduction Efforts, Pending Challenges Women and Girls

Introduction

It is on record that several people around the world, particularly, women and young girls have been subjected to various forms of abuse, exploitation, or other harmful behaviours which have resulted in varying degrees of injury and even death (WHO, 2013). It is discovered that some people start by intuitively recognising some concepts or belief systems, which have been instilled in the social fabric of the society under the pretence of tradition (Longman & Bradley 2015). In the same vein, when certain customary rites, rituals or behaviour are practiced regularly by a ceratin section of the society, these become habits and again people develop close identification and attachment with such habits. Thus, the concoction of culture, tradition and practice becomes such a household brand, and by implication, people find it as difficult to get out of their conditioned habits. Walker (2012) explained that changing people's mentality from such ingrained arrangement requires both painstaking and persistent efforts over a long period of time.

It is discovered that HTPs occur in every community and have its own cherished arrangement which are of paramount importance to the growth, development and checks for the society (Adebola, Ogunkeyede, Obebe, Olaniyan, Fawole & Salman, 2016). Due to these deep-rooted and home-grown arrangement occurring among the people and within the social fabrics. In Nigeria, nearly all tribes and tongues have their own traditional and customary institutions that are compatible with the society's way of living (Chukwu, Scent, Emeka, Obi, and Kalu, 2014).

According to Ras-Work, (2006), customs that are recognised to be harmful to people's health and wellness is known as harmful traditional practises. It is believed that certain act of cruelty against women and girls, have become customary in some community for long as being a normal part of culture (Wadesango, Rembe and Chabaya, 2011). In other words, they are practices that could have negative effects to the health and social well-being of the people. These discriminatory practices committed regularly over long periods of time that communities and societies begin to consider them acceptable (Longman & Bradley, 2015).

The world is pretending to be helping Africa getting out of chronic poverty, diseases, famine, wars, etcetera, but the bottom-line, is denying Africa the opportunity to reapfrog from the base of her subconscious mind (Wadesango, Rembe and Chabaya2011). That is her creational purpose to exist. Therefore, what should be done to maintain a good relationship with people of other traditions protecting their typical tradition, is to push this question to the human rights institutions to start advocating for African's freewill to express themselves religiously and consciously. Africa is a living example of traditional and cultural genocide, which has contributed to many African problems. On the other hand, historians have been unkind to Africans' episteme many have claimed savagism about Africans evolution simply to give way for indirect colonialism in the name of traditions (Walker, 2012).

Studies have shown these practices are harmful to people's physical and mental health as well as being against people's fundamental human rights. People have the right to live free from harm, oppression, discrimination, and violence. This includes harmful practices directed towards both men and women. The most common HTPs include female genital mutilation, intimate partner violence, male preference, food taboos, female genital mutilation; sex selection, son preference, dowry-deaths, dowry-related crimes, honour crimes, and the consequences of son preference, facial scarring, the force-feeding of women, nutritional taboos, honor killings and widowhood rituals corporal punishment; scarification, child, forced or early marriage (UNICEF, 2020). To be specific, child marriage is an issue that is pervasive still across many countries due to economic, social and cultural norms, while forced or early marriages refer to a marriage, in which one or both parties (boys or girls) are younger than 18 years old and do not consent to the marriage.

It is to be noted that there are some HTPs that has to do with nutrition. During the period of fasting important nutrients are not eaten, such as milk, eggs, butter, meat, fish, meal pattern, etc.; pork is forbidden for religious and cultural reasons; lack of sunlight (lack of vitamin D) during infancy to protect the child from the "evil eyes"; discrimination in feeding among family members, adults before children, adult males over adult females; practicing heavy meals once may be twice a day; giving butter to neonate to swallow, hoping to keep the intestine smooth; delay to start complementary food; refusing to give the child meat for fear of infection, feeding children with diluted milk; feed children with left over and may be contaminated food

Several victims of HTPs have suffered sexual and reproductive health consequences, including painful sex, forced and unwanted pregnancies, unsafe abortions, traumatic fistula, sexually transmitted infections including HIV, and even death (UNICEF, 2020). HTPs have also been linked with reproductive health issues. It is stated that HTPs to women and children inflict both immediate and long-term mental and physical pain on their victims (UNFPA, 2020). These practices expose women to sickness and death from hemorrhage, infection, keloid formation, and consequent obstructed labour. Ironically, while many traditional practices are intended to control women's sexuality and reproductive capacity, these practices expose women to reproductive health risks that threaten women's fertility and lives (Walker, 2012).

Various efforts made have been made to stem the spate of HTPs in the global society. Harmful traditional practices also violate a number of recognized human rights protected in international and regional instruments and reaffirmed by international conference documents (UNFPA, 2020). For instance, the international human rights protect people against harmful traditional practices with the following rights: Right to life and health; Right to non-discrimination on the basis of sex; Right to liberty and security which includes the right not to be subjected to violence and recognizes the need for children to receive special protections; Right to freedom from inhuman or degrading treatment, which recognizes the inherent dignity of the person; Right to freedom from inhumane and degrading treatment (Peterside, Duru, and Anene, 2015). There have been several advocacy against HTPs. For instance, Graca Machel (International advocate for women's and children's rights) "*We should be respectful, but we must also have the courage to stop harmful practices that impoverish girls, women and their communities*" (Ugwu, 2003). Also "*Although government has undertaken a number of health reforms, many cultural and religious practices still put the health of women in (the) doldrums.*" (Ras-Work, 2006). It is on record that Nigeria as a country is signatory to the following human rights treaties which bind and prohibit almost all countries against the toleration of HTPs; Convention on Elimination of All

Forms of Discrimination Against Women (CEDAW), Article 5 which states that parties must undertake "all appropriate measures" [to] modify the social and cultural patterns of conduct of men and women, with a view to achieving the elimination of prejudices and customary and all other practices which are based on the idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for men and women" (Longman & Bradley 2015). The same goes for the Convention on the Rights of the Child (CRC), Articles 2, 6, 12, 19, 24, 27 and 28; International Covenant on Civil and Political Rights (ICCPR), Article 7; Agreements reached at the 1994 International Conference on Population and Development (Cairo) and the 1995 Fourth World Conference on Women (Beijing), reinforce CEDAW, CRC, and ICCPR by including commitments to remove discriminatory, harmful, and coercive traditional practices.

Nowadays, there has been critical debates unabatedly on the prevalence, effects and consequences of HTPs. It is to be noted that one of the most common with critical implication for health and psychology of the female folks are female genital mutilation and child marriage which are still very rampant in the country today (Chukwu CC (2006). It is also discovered that traditional systems, while discriminatory, did successfully breed large numbers of children for the next generation with attendant effects. Some scholars have suggested that the best way to prevent HTPs is by speaking out against it and looking for help if necessary. Peterside, Duru, and Anene (2015) stated that HTPs has been equated with violence related to a person's gender called gender-based violence. Despite some encouraging trends, the challenges of eliminating harmful traditional practices (HTPs) persist in Nigeria. Social norms that stigmatize girls and their families over girls' premarital sexual activity is the leading cause of child marriage, while gender norms that seek to control female sexuality embedded in religious beliefs and cultural practices are causes for the perennial practice of FGM (Adebola, Ogunkeyede, Obebe, Olaniyan, Fawole & Salman, 2016). Through controlling women's bodies for men's benefit and through ensuring the political and economic subordination of women, harmful traditional practices perpetuate the inferior status of women. Despite their harmful nature and their violation of international human rights laws, such practices persist because they are not questioned. Realistically, eliminating HTPs needs coordination between traditional, governmental, and non-governmental institutions (Boyden, Pankhurst and Tafere, 2013). However, the question remains: shouldn't we include traditional justice institutions as actors in the process of eliminating HTPs? As the Africa Union mantra underscores "African solutions for African problems," African home-grown institutions should take on the challenge of fighting HTPs. However, when the Nigerian Leadership establish institutional arrangement and policy to checkmate excesses in HTPs, traditional justice institutions are often ignored or at least sidelined in the process. It is against this backdrop that the study examined the situated harmful traditional practices in Nigeria within the view of recent progress in its reduction, pending challenges and lessons for policy engagements.

Research Objectives

The following are critical objectives outlined to be achieved in this study.

- i. What is recent progress in the reduction of harmful traditional practices amongst Yoruba in southwestern Nigeria?
- ii. What are pending challenges facing the reduction of harmful traditional practices amongst Yoruba in southwestern Nigeria?
- iii. What are the lessons for the reduction of Harmful Traditional Practices policy engagements?

Methodology

The study adopted a mixed methods research design of the explanatory type (qual + QUAN). The study deployed a two-prong approach in which focus group discussion sessions were conducted and thematically analysed to design the quantitative instrument. This was done in each of the local government areas. This is appropriate for this study as it helps to quantitatively mapped out some of the recent achievement, challenges and lessons learnt in the reduction of harmful traditional practices in Nigeria. The population of the study comprised all elders who are 50 years and above. The multi-stage sampling procedure was adopted. The first stage was the total enumeration of states in southwest Nigeria. The random sampling technique was used to select 18 Local government areas (One per Senatorial District) in SW, Nigeria. From each of the LGAs, 35 elders ones who are 50 years and above were purposively selected. A self-designed instrument titled Questionnaire on Harmful Traditional Practices (QHTPs, $r=0.82$) with sub-scales was used. It was also translated in local dialect for easy understanding and responses. The study which began in 2019 and due to covid_19 pandemic lasted two and half years.

Results

Research Question 1: What is recent progress in the reduction of harmful traditional practices in southwestern Nigeria?

Table 1: Mean Response of the Recent Progress In Its Reduction Harmful Traditional Practices Amongst Yoruba In Southwestern Nigeria

Sn	Items	5	4	3	2	1	\bar{x}	Std.	P
1	Promulgation of stringent penalty for violators	37 5.9	210 33.2	232 36.7	111 17.6	42 6.6	3.14	.995	9 th
2	Establishment of minimum age for marriage	69 10.9	194 30.7	245 38.8	70 11.1	54 8.5	3.24	1.07	5 th
3	Improving traditional child-bound practices	60 9.5	216 34.2	144 22.8	165 26.1	47 7.4	3.12	1.13	11 th
4	Campaigning against HTPs	54 8.5	216 34.2	228 36.1	104 16.5	30 4.7	3.25	.988	3 rd
5	Ensuring compliance with enabling policies, programmes and laws	59 9.3	204 32.3	161 25.5	110 17.4	98 15.5	3.03	1.22	13 th
6	Eliminating unnecessary practices	27 4.3	207 32.8	238 37.7	67 10.6	93 14.7	3.01	1.09	17 th
7	Making education compulsory	34 5.4	224 25.4	263 41.6	78 12.3	33 5.2	3.23	.921	7 th
8	Advocacy from various stakeholders	38 6.0	161 25.5	239 37.8	100 15.8	94 14.9	2.92	1.12	19 th
9	Making and reviewing legislations	47 7.4	255 40.3	227 35.9	67 10.6	36 5.7	3.33	.962	1 st
10	Enforcement by Law enforcement agencies	19 3.0	270 42.7	147 23.3	94 14.9	102 16.1	3.02	1.16	15 th
11	Reducing tradition-bound subordination of women and child	37 5.9	210 33.2	232 36.7	111 17.6	42 6.6	3.14	.995	10 th
12	Strengthening comprehensive healthcare for women and children	69 10.9	194 30.7	245 38.8	70 11.1	54 8.5	3.24	1.07	6 th
13	Preventing Children from harm	60 9.5	216 34.2	144 22.8	165 26.1	47 7.4	3.12	1.13	12 th

14	Provision of Information about women's health hazards	54 8.5	216 34.2	228 36.1	104 16.5	30 4.7	3.25	.988	4 th
15	Balancing human sex ratio	59 9.3	204 32.3	161 25.5	110 17.4	98 15.5	3.03	1.22	14 th
16	Policy direction on women and children	27 4.3	207 32.8	238 37.7	67 10.6	93 14.7	3.01	1.09	18 th
17	Free Role for NGOs to advance steps against it	34 5.4	224 35.4	263 41.6	78 12.3	33 5.2	3.23	.921	8 th
18	Seminars (Formal and Non-formal)	38 6.0	161 25.5	239 37.8	100 15.8	94 14.9	2.92	1.12	20 th
19	Firm recognition of the roles of women and girl children	47 7.4	255 40.3	227 35.9	67 10.6	36 5.7	3.33	.962	2 nd
20	Joining the rest of the world to celebrate women and girl children	19 3.0	270 42.7	147 23.3	94 14.9	102 16.1	3.02	1.16	16 th
Weighted Means: 3.13		Threshold: 3.0							

Table 1 shows the mean responses of recent progress in the reduction of situated harmful traditional practices in Nigeria. It reveals a weighted average of 3.13 which is higher than the threshold of 3.0. This implies there has been recent progress in its reduction harmful traditional practices in Nigeria. In the same vein, the following items were ranked first, second and third respectively; Legislations, and Campaigning against HTPs.

Research Question 2: What are pending challenges facing the reduction of harmful traditional practices amongst Yoruba in southwestern Nigeria?

Table 2: Mean Response of the Pending Challenges facing the reduction of Harmful Traditional Practices

S n	Items	5	4	3	2	1	\bar{x}	Std	P
1	Low awareness	0 0	139 22.0	102 16.2	175 27.7	215 34.1	2.26	1.148	33 rd
2	Age-long traditional beliefs	32 5.1	338 53.6	74 11.7	84 13.3	103 16.3	3.18	1.223	12 th
3	Ethnic Chauvinism	34 5.4	109 17.3	171 27.1	169 26.8	148 23.5	2.54	1.178	31 st
4	Epistemic understanding	120 19.0	304 48.2	147 23.3	36 5.7	24 3.8	3.73	.960	1 st
5	Importance attached	19 3.0	207 32.8	205 32.5	97 15.4	103 16.3	2.91	1.117	22 nd
6	Low literacy level	6 1.0	157 24.9	179 28.4	143 22.7	146 23.1	2.58	1.124	30 th
7	Lack of community guidance and counselling services against harmful traditional practices	7 1.1	191 30.3	178 28.2	108 17.1	147 23.3	2.69	1.164	26 th
8	Widening distance between stated policy goals and its realization	0 0	290 46.0	256 40.6	62 9.8	23 3.6	3.29	.788	4 th
9	Clear authentic leadership	0 0	210 33.3	352 55.8	21 3.3	48 7.6	3.15	.806	14 th
10	Weak documentation of the consequences of HTPs	0 0	274 43.4	276 43.7	20 3.2	61 9.7	3.21	.900	9 th
11	Stakeholders' involvement in the growth of HTPs	3 0.5	231 36.6	352 55.8	22 3.5	23 3.6	3.27	.703	6 th
12	Resource and people barrier to galvanise HTPs' reduction	4 0.6	220 34.9	290 46.0	77 12.2	40 6.3	3.11	.859	17 th
13	Inadequate alignment with applicable national law and international standards	15 2.4	248 39.3	250 39.3	81 12.8	37 5.9	3.19	.902	11 th

14	Weak commitment to HTPs reduction strategies	0 0	207 32.8	295 46.8	68 10.8	61 9.7	3.03	.907	20 th
15	Absence of the right team and appropriate governance arrangements	0 0	126 20.0	234 37.1	210 33.3	61 9.7	2.67	.902	28 th
16	Weak political influence on HTPs	0 0	134 21.2	276 43.7	177 28.1	44 7.0	2.79	.854	25 th
17	Lack of need assessments by stakeholders	9 1.4	108 17.1	365 57.8	124 19.7	25 4.0	2.89	.723	23 rd
18	People's strong alignment with traditional structure and cultural values	0 0	156 24.7	258 40.9	78 12.4	139 20.0	2.68	1.074	27 th
19	Inability of stakeholders to properly identify problems	0 0	156 24.7	210 33.3	150 23.8	115 18.2	2.65	1.044	29 th
20	Unreliable data on the occurrences of HTPs	1 0.2	267 42.3	205 32.5	121 19.2	37 5.9	3.12	.918	16 th
21	Lack of continuity of programmes meant to dismantle HTPs	1 0.2	369 58.5	125 19.8	133 21.1	3 0.5	3.37	.829	3 rd
22	Inequalities in terms of gender	12 1.9	211 33.4	369 58.5	21 3.3	18 2.9	3.28	.692	5 th
23	Inadequate attention given to early child school	0 0	234 37.1	302 47.9	59 9.4	36 5.7	3.16	.817	13 th
24	Wooly leadership agenda against HTPs	134 21.2	205 32.5	54 8.6	91 14.4	147 23.3	3.14	1.495	15 th
25	Weak feedback systems from victims	4 0.6	316 50.1	42 6.7	122 19.3	147 23.3	2.85	1.278	24 th
26	Poor Knowledge of current situation/ HTPs	4 0.6	181 28.7	31 4.9	235 37.2	180 28.5	2.36	1.189	32 nd
27	Stakeholders' failure in engaging the right people	10 1.6	284 45.0	220 34.9	71 11.3	46 7.3	3.22	.932	8 th
28	Failure to follow-up reported cases of HTPs	1 0.2	251 39.8	283 44.8	59 9.4	37 5.9	3.19	.835	11 th
29	Lack of congruency at the top and commitment from the middle	1 0.2	231 36.6	269 42.6	91 14.4	39 6.2	3.10	.869	18 th
30	Lofty and non-pragmatic strategy	12 1.9	199 31.5	285 45.2	69 10.9	66 10.5	3.03	.959	21 st
31	Slow nature of working	0 0	252 39.9	218 34.5	125 19.8	36 5.7	3.09	.905	19 th
32	Lack of focus on prevention and imperatives for ministers to pursue short-term solutions	0 0	376 59.6	122 19.3	131 20.8	2 0.3	3.38	.819	2 nd
33	Inability of policy makers to take into consideration the social political, economic and administrative variables	0 0	212 33.6	374 59.3	22 3.5	23 3.6	3.23	.682	7 th
Weighted Mean: 3.01 Threshold: 3.0									

Table 2 shows the mean responses of the pending challenges facing the reduction of harmful traditional practices in Nigeria. It reveals a weighted average of 3.01, which is higher than the threshold of 3.0. This implies that there are still pending challenges facing the reduction of harmful traditional practices in Nigeria. By implication, the following items were ranked first, second and third respectively; *Epistemic understanding*; *Lack of focus on prevention and imperatives for ministers to pursue short-term solutions*; *Lack of continuity of programmes meant to dismantle HTPs*, which are the top three related challenges faced in the reduction moves against harmful traditional practices in southwestern Nigeria.

Research Question 3: What are the lessons for the reduction of Harmful traditional practices policy engagements?

Table 3: Mean Response of the Lessons for the Reduction of Harmful Traditional Practices

SN	Items	4	3	2	1	\bar{x}	Std
1	It is endemic in nature	372 58.0	234 37.0	16 2.5	10 1.6	3.53	.629
2	Public enlightenment campaigns and awareness raising is sacrosanct	132 20.9	140 22.2	203 32.1	157 24.8	2.39	1.074
3	All stakeholders, both young and old, have roles to play.	365 57.8	185 29.3	59 9.3	23 3.6	3.41	.805
4	It has the capacity to destroy lives and livelihood	278 44.0	274 43.4	52 8.2	28 4.4	3.27	.792
5	It is capable of stalling growths and development of victim and society	287 45.2	206 32.6	89 14.1	50 7.9	3.16	.943
6	Its reduction can promote equality, diversity and inclusion for all and sundry especially women and children	305 48.3	230 36.4	57 9.0	40 6.3	3.27	.870
7	Dignifying human lives is of paramount importance	116 18.4	148 23.4	202 32.0	166 26.3	2.34	1.057
8	Violation of human rights and privileges	214 33.9	207 32.8	145 22.9	66 10.4	2.90	.989
9	Removal of girl child female genitalia can be detrimental	268 42.4	246 38.9	78 12.3	40 6.3	3.17	.878
10	Scarification is not adding beauty but injurious	183 29.0	151 23.9	179 28.3	119 18.8	2.63	1.091
11	Traditions can be changed with older generation	278 44.0	224 35.4	85 13.4	45 7.1	3.16	.913
12	Continuous speaking up about the risk and realities	232 36.7	254 40.2	111 17.6	35 5.5	3.08	.871
13	Decision making skills for women and girl children	279 44.1	200 31.6	106 16.8	47 7.4	3.13	.945
14	Cultural pressure is instrumental to age-long HTPs	294 46.5	233 36.9	75 11.9	30 4.7	3.25	.844
15	Stigmatisation, rejection, stoning and killing are tools to ostracise non-compliance with HTPs	207 32.8	261 41.3	111 17.6	53 8.4	2.98	.916
16	Swaying the minds of traditional and religious leaders as well as community elders is key	202 32.0	192 30.4	160 25.3	78 12.3	2.82	1.018
17	Celebration of culture and values in form of beautification, procreation and punishments are the main drives of HTPs	255 40.3	240 38.0	94 14.9	43 6.8	3.12	.901
18	NGOs can help drive the reduction process	183 29.0	175 27.7	143 22.6	131 20.7	2.65	1.106
19	Curriculum engagement will help drive students, teachers and school authority's understanding of the effects of HTPs	240 38.0	190 30.1	153 24.2	49 7.8	2.98	.966
20	It is human-made	226 35.0	218 34.5	107 16.9	81 12.8	2.93	1.018
Weighted Mean: 3.01		Threshold: 2.5					

Table 3 shows the mean responses of the lessons for the reduction of harmful traditional practices and policy engagements in southwestern Nigeria. It reveals a weighted average of 3.01 which is higher than the threshold of 2.5. This implies that

stakeholders have learnt some lessons for the reduction of harmful traditional practices and policy engagements in southwestern Nigeria.

Discussion of findings

Recent Progress in the Reduction of Harmful Traditional Practices in Southwestern Nigeria

The result revealed that there is positive progress in the reduction efforts in the reduction of harmful traditional practices in southwestern Nigeria. The finding of the study is not in congruence with the works of Longman & Bradley (2015) and Walker (2012). The study is in line with the findings of Ras-Work (2006); Wadesango, Rembe & Chabaya (2011) and Walker (2012); Chukwu (2014), Scent, Emeka, Obi and Kalu (2014) who findings revealed that the impact of harmful traditional practices on the girl child and women. An assessment of the harmful cultural practices affecting the health of rural women, a study of community based women organisations, which was carried out revealed that HTPs cannot be totally stopped except all stakeholders such as community, religious leaders and traditional rulers, are involved. Otinche & Nnabuenyi (2015) and Adebola, Ogunkeyede, Obebe, Olaniyan, Fawole & Salman (2016), who works affirmed the need for concerted efforts from laws to cultural arrangement to reduce the nefarious acts. The study by UNICEF Innocenti Research Centre stated that the impact of harmful traditional practices on the girl child is unquantified and its reduction across the African continent has been steady.

Pending Challenges Facing the Reduction of Harmful Traditional Practices in Nigeria

The finding of the study revealed that there are several challenges bedeviling the reduction of harmful traditional practices among people in the southwestern Nigeria, among which are the top three-rated challenges, which are *Epistemic understanding; Lack of focus on prevention and imperatives for ministers to pursue short-term solutions; Lack of continuity of programmes meant to dismantle HTPs*. By implication, they were found to be critical in addressing the reduction effort of all stakeholders involved in the study. The study was in line with that of Chukwu (2006); Boyden, Pankhurst & Tafere (2013) and Nwosu (2008) and Onyejiuwa (2009) whose findings affirmed that a societal ill of this magnitude and the journey of its amelioration is usually faced with several challenges which are not different from the ones revealed by this study. It is to be noted that efforts to critical reduce the harmful traditional practices in southwestern Nigeria is a herculean task. In the study carried out by Ras-Work (2006); Longman & Bradley (2015); Walker, (2012), it was in disagreement with the result of the study which discovered that prevention of harmful traditional practices have not been success due to age-long cultural relativism and belief system. It is said that interventions would have been successful if stakeholders in community are properly educated on the ills and effects of HTPs on the society. It is also necessary to state that there is continuous speaking about the risk and realities This is because there is a growing evidence based on the effective approaches as well as those which are promising but have not been shown to be effective. Hence, when people or victims speak up, they are likely going to find help in addressing some of these HTPs.

Lessons for the Reduction of Harmful Traditional Practices

The result of the study found that stakeholders have learnt several lessons from the various reduction mechanisms of government and non-government organisation of harmful traditional practices. were the lessons that stakeholders can inferred from the

reduction process. By implication, there are several lessons to learn from the quest to reduce harmful traditional practices. The private report by UNICEF (2020) Chukwu, (2014); Glover, Jennifer; Liebling, Helen; Goodman, Simon; and Barrett, Hazel (2018); OHCHR, (2011) and Nwosu (2008) Jimoh et al., (2018); Onyejiuwa, (2009) found that some community and traditional leaders have been condemning the acts as harmful and there needs to ameliorate its excesses. The finding of the study revealed that there are several solutions to harmful traditional practices among which are critical discourse, education, seminars and so on. Another lessons learnt is that Curriculum engagement will help drive students, teachers and school authority's understanding of the effects of HTPs and if no properly handled, it could wreak havoc on the modernising measures of the society. By implication, it is also worthy of note that lessons learnt were found to be critical in addressing the reduction effort of all stakeholders involved in the study. The result of was in line with the works of Jeffreys (2005), Omeje (2001), Immanuel (2017), Otinche & Nnabuenyi (2015); Peterside, Duru, & Anene (2015).

Conclusion

The study did a critical analysis of the efforts at reducing Harmful traditional practices in southwestern Nigeria. Harmful traditional practices are discriminatory practices committed regularly over long periods of time that communities and societies begin to consider them acceptable. Around the world, hundreds of millions of girls and boys have experienced some form of violence, exploitation or harmful practice, although girls and women are at much greater risk. Chief among some of these harmful traditional practices are child marriage, female genital mutilation which span continents and cultures, yet, in every society in which they are practiced, they reflect values that hold girls and women in low esteem. Evidence abound in the fact that about 650 million girls and women around the world today have been married as children, and at least 200 million have been subjected to female general mutilation. Every effort by stakeholders, government and non-government actors, to reduce the intentions and effects of harmful traditional practices have yielded low result. It is discovered that there are several challenges facing these steps, policies and programmes to wade the menace of HTPs. Also several lessons have been discovered on why the reduction plan are not effective in addressing the menace.

Recommendations

Having interrogated some of the critical issues raised, it is there recommended that there is need to intensify global efforts and the adoption of international standards to addressing HTPs in southwestern Nigeria. It is also discovered that laws, policies, and prevention strategies and its implementation need attention of both government and non-government actors. There is need to mitigating the immediate and long term impacts of HTPs in the society. It is also recommended that critical education discourse should be organised for stakeholders to raise the bar in the steps to fight harmful traditional practices.

References

Adebola SO, Ogunkeyede SA, Obebe FA, Olaniyan OD, Fawole OB, Salman A. (2016) Profile of pediatric traditional uvulectomy in North-West Nigeria: the need for caution and education. *Int J Pediatr Otorhinolaryngol* Sep;88:194-8.

- Boyden J, Pankhurst A, Tafere Y. (2013) Harmful traditional practices and child protection: contested understandings and practices of female child marriage and circumcision in Ethiopia. *Young Lives*.
- Chukwu CC (2006) Socio-cultural practices as obstacles to women empowerment in Nigeria: A case of Bekwarra, Ogoja and Yala local government Areas of Cross River State. Unpublished M. Sc thesis submitted, University of Calabar, Nigeria.
- Chukwu, C. C (2014), Scent, G.A.T, Emeka, J., Obi, C.U And Kalu, E,O (2014) Violence against women in Igbo land, South-east, Nigeria: A critical quest for change *ol. 6(2)*, pp. 49-58,
- Glover, Jennifer; Liebling, Helen; Goodman, Simon; and Barrett, Hazel (2018) Persistence and Resistance of Harmful Traditional Practices (HTPs) Perpetuated against Girls in Africa and Asia. *Journal of International Women's Studies*, 19(2), 44-64. Available at: <https://vc.bridgew.edu/jiws/vol19/iss2/4>
- <https://www.28toomany.org/nigeria/> accessed 17th Nov. 2020
- Immanuel Jannah (May 25, 2017) Widows: some harmful practices they experience in Igbo land. Accessed on 2nd December, 2020
- Jeffreys S. (2005), *Beauty and Misogyny: Harmful Cultural Practices in the West*, Routledge: London.
- Jimoh et al., (2018) A Cross-sectional Study of Traditional Practices affecting Maternal and New-born Health in Rural Nigeria *Pan Afr Med J.* 31 (64)
- National Population Commission (NPC) [Nigeria] and ICF International (2014) *Nigeria Demographic and Health Survey 2013*. Available at <http://dhsprogram.com/pubs/pdf/FR293/FR293.pdf>
- Nwosu C.J. (2008) 'The Girl Child, Still run your race' In Nigeria and the Millennium Development Goals. Lagos: Fulbright Alumni
- OHCHR, *Fact Sheet No.23, Harmful Traditional Practices Affecting the Health of Women and Children.* <http://www.ohchr.org/Documents/Publications/FactSheet23en.pdf>, accessed 2nd December, 2020.
- OHCHR, UNFPA, UNICEF, UN Women and WHO, *Preventing gender-biased sex selection: an interagency statement.* 2011 Accessed on 2nd December, 2020
- Omeje K. (2001), 'Sexual Exploitation of Cult Women: The Challenges of Problematising Harmful Traditional Practices in Africa from a Doctrinalist Approach', *Social and Legal Studies*, Vol. 10(1), pp. 45–60.
- Onyejiuwa, M.F (2009) An Assessment of the Harmful Cultural Practices Affecting the Health Of Rural Women: A study of community based women organisations in Ebonyi state (Phd Thesis, department of adult education and extra-mural studies; university of nigeria, nsukka)
- Otinche S.I. and Nnabuenyi, U.M. (2015) Culture and The right of the rural woman in Nigeria: an overview. *International Journal of Basic, Applied and Innovative Research IJBAIR*, 2015, 4(2):30-43. Retrieved on 2nd December, 2020 from www.arpjournals.com; www.antrescentpub.com
- Peterside O, Duru CO, and Anene N (2015) Harmful traditional practices in a newborn: A case report *Niger J Paed* 2015; 42 (2):151–153
- Preliminary Report of the Special Rapporteur on traditional practices affecting the health of women and children, E/CN.4/Sub.2/1995/6, par. 25

- Ras-Work B. (2006) 'The impact of harmful traditional practices on the girl child', UNICEF Innocenti Research Centre, Florence, Italy.
- Report of the second United Nations Regional Seminar on Traditional Practices Affecting the Health of Women and Children, E/CN.4/Sub.2/1994/10, par. 55.
- Report of the Secretary-General on ending female genital mutilation*, E/CN.6/2012/8, 2011 Accessed on 2nd December, 2020
- The International NGO Council on Violence against Children, *Violating Children's Rights: Harmful practices based on tradition, culture or superstition*, 2012
- Ugwu NS (2003) *The Agony of a woman*. Jos: Verdem Publishers.
- UN Study on Violence Against Children (2006). Accessible at: <http://www.unicef.org/violencestudy/>
- UNFPA, *Child marriage Factsheet*, 2005 Accessed on 2nd December, 2020
- UNICEF Child Info, *Child Marriage: Progress*. January 2012 http://www.childinfo.org/marriage_progress.html accessed 2nd December, 2020
- UNICEF, *Early Marriage: A Harmful Traditional Practice*. 2005 Accessed on 2nd December, 2020
- Wadesango N, Rembe S, Chabaya O (2011) Violation of women's rights by harmful traditional practices. *The Anthropologist*. 2011; 13(2): p121-129
- Walker JA, (2012) Early marriage in Africa--trends, harmful effects and interventions. *Afr J Reprod Health*. Jun;16(2):231-40.
- WHO, Fact sheet N°241 (2013) *Female Genital Mutilation*, 2013. <http://www.who.int/mediacentre/factsheets/fs241/en/> accessed February 2013
- Longman C. and Bradley T., (eds.) (2015) *Interrogating Harmful Cultural Practices: Gender, Culture and Coercion*, Routledge, pp. 51-66