

Islamic Legal Perspectives on the Ethical Issues of Modern Biotechnology: A Case Study of Human Cloning and Genetic Engineering in Nigeria

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Abstract

Modern biotechnology, specifically human cloning and genetic engineering, presents a significant ethical dilemma in Nigeria, where Islamic law deeply influences social and legal conduct. This research addresses the tension between rapid scientific advancement and the preservation of Islamic moral values, focusing on the absence of a harmonized bioethical framework in Nigeria's pluralistic legal system. The primary objective is to evaluate the permissibility and ethical boundaries of these technologies using the *Maqasid al-Shari'ah* (Objectives of Sharia) framework. Employing a *Systematic Literature Review* (SLR) based on the PRISMA protocol, this study synthesizes 25 reputable sources (2021–2026) covering Sharia jurisprudence and Nigerian healthcare policy. The findings reveal a sharp legal distinction: reproductive cloning is strictly prohibited (*Haram*) due to its disruption of genealogical integrity (*Nasab*), whereas somatic gene therapy for restorative purposes—particularly for Nigeria's sickle cell crisis—is highly encouraged as a form of medical necessity (*Dharurah*). The study concludes that the "ethical conflict" in Nigeria is not a theological rejection of science but a governance issue. It proposes a "Bio-Sharia" regulatory model that integrates Islamic ethical filters with national health legislation. This approach ensures that Nigeria can adopt life-saving genomic innovations without compromising the religious and cultural sanctity of its Muslim populace, ultimately providing a blueprint for other Muslim-majority nations in the Global South.

Keywords

Islamic Bioethics, Human Cloning, Genetic Engineering, Maqasid al-Shari'ah, Nigeria, Sickle Cell Disease.

Introduction

The rapid advancement of modern biotechnology, specifically in human cloning and genetic engineering, has triggered profound ethical and legal debates globally, particularly within Muslim-majority societies like Nigeria. In the Nigerian context, where Islamic law deeply influences the personal and social conduct of a significant portion of the population, the emergence of life-altering technologies presents a complex intersection of scientific necessity and religious sanctity. The primary issue lies in the tension between the potential of biotechnology to cure hereditary diseases and the ethical concerns regarding the manipulation of Allah's creation (*Taghyir Khalq Allah*). According to [Malami \(2022\)](#), the discourse in Nigeria is further

complicated by a lack of robust national bioethical legislation that harmonizes constitutional law with Islamic jurisprudence. Consequently, there is an urgent need to examine how traditional Islamic legal frameworks can be adapted to address these "new-age" scientific breakthroughs without compromising fundamental religious tenets. This study aims to bridge the gap between biological innovation and Sharia compliance, providing a much-needed perspective for both the scientific community and religious scholars in Nigeria.

The debate surrounding human cloning and genetic engineering in Nigeria is often characterized by a dichotomy between absolute rejection based on moral preservation and cautious acceptance for therapeutic purposes. While reproductive cloning is universally condemned in Islamic law for disrupting genealogical integrity (*Nasab*), therapeutic cloning and genetic modification for disease prevention offer a "gray area" that requires rigorous *Ijtihad* (independent legal reasoning). Based on the analysis of [Usman \(2021\)](#), many Nigerian Muslim scholars view genetic engineering through the lens of *Maslahah* (public interest), arguing that if the technology can prevent sickle cell anemia—a prevalent condition in Nigeria—it may be deemed permissible. However, the fear of "playing God" and the potential for social inequality in accessing such technologies remain significant barriers. This research identifies that the current literature on the Nigerian biotechnology landscape lacks a comprehensive legal synthesis that considers the local cultural nuances and the specific Sharia interpretations prevalent in Northern Nigeria. Therefore, a systematic review of Islamic legal perspectives is vital to navigate the ethical labyrinth of modern biology within the country's unique legal plurality.

The primary objective of this research is to analyze the ethical and legal implications of human cloning and genetic engineering from an Islamic perspective, using Nigeria as a specific case study. This study seeks to evaluate how the principles of *Maqasid al-Shari'ah*—particularly the protection of life (*Hifz al-Nafs*) and the protection of progeny (*Hifz al-Nasl*)—can serve as a regulatory blueprint for biotechnological practices. As emphasized by [Bello \(2023\)](#), the goal is to determine the boundaries between permissible medical intervention (*Tadawi*) and prohibited interference with human nature. By investigating the current stances of the Nigerian Supreme Council for Islamic Affairs (NSCIA) and local academic scholars, this research aims to propose a framework for "Sharia-compliant biotechnology." Achieving this objective is expected to assist Nigerian legislators in drafting bioethical laws that are culturally sensitive and religiously acceptable to the Muslim populace. Ultimately, the research focuses on whether Islamic law can act as an enabler of scientific progress rather than a purely restrictive force in the Nigerian healthcare sector.

The urgency of this research is underscored by the global pressure for Nigeria to adopt advanced biotechnological standards to improve public health outcomes, contrasted with the deep-seated religious sensitivities of its citizens. Failure to provide a clear Islamic legal perspective on cloning and genetic engineering could lead to social resistance or the unregulated use of these technologies in a "legal vacuum." According to [Ibrahim \(2021\)](#), the ethical stakes are high, as modern biotechnology impacts the very definition of parenthood, inheritance, and human identity—areas that are strictly governed by Sharia in Nigeria. This study is crucial because it provides a scholarly response to the existential questions posed by synthetic biology, ensuring that scientific adoption does not lead to moral erosion. Furthermore, it highlights the importance of "bio-Sharia" literacy for Nigerian scientists and religious leaders to prevent misunderstandings that could hinder medical breakthroughs. In a time where genetic modification is moving from theory to clinical reality, this research serves as a timely intervention to ensure that Nigeria's path to scientific modernity remains ethically grounded and legally sound within the Islamic tradition.

Literature Review

The conceptual definition of modern biotechnology in Islamic legal discourse is framed as *al-Tiknūlūjiyā al-Hayawiyyah*, which involves the manipulation of biological systems and living organisms to create or modify products for specific uses. In the context of human cloning (*al-Istinsākh*) and genetic engineering (*al-Handasah al-Wirāthiyyah*), the Islamic legal perspective distinguishes between therapeutic applications aimed at healing and reproductive applications aimed at replicating human beings. According to [Bello \(2023\)](#), Sharia evaluates these technologies based on their intent (*Niyyah*) and the outcome (*Athar*) they produce for human dignity. While science views these as neutral tools for biological advancement, Islamic law treats them as subject to moral scrutiny under the principle that man is the vicegerent (*Khalifah*) of Allah on earth. Therefore, the definition of biotechnology in this study is not merely technical but inherently ethical, requiring a balance between human ingenuity and divine boundaries. This conceptual foundation is vital for Nigerian scholars as they seek to define the "permissible limits" of scientific intervention within the country's diverse healthcare landscape.

The categorization of genetic engineering within Sharia distinguishes between somatic cell gene therapy and germline gene therapy, each carrying different legal weights. Somatic cell therapy, which targets non-reproductive cells to treat diseases like sickle cell anemia, is widely manifested in Islamic literature as a form of permissible medical treatment (*Tadawi*). As noted by [Malami \(2022\)](#), this category aligns with the Sharia objective of preserving life (*Hifz al-Nafs*) and is seen as an extension of traditional medicine. In contrast, germline engineering, which alters the genetic makeup of future generations, is categorized as a high-risk area that could lead to *Taghyir Khalq Allah* (altering Allah's creation). In Nigeria, the manifestation of these categories is often debated in the context of "Designer Babies," where the intent shifts from therapeutic necessity to elective enhancement. This categorical distinction is essential for developing a legal framework in Nigeria that supports medical breakthroughs while prohibiting eugenics. Consequently, the legal status of genetic engineering is contingent upon its specific application and the degree of necessity (*Dharurah*) involved.

The manifestation of human cloning in Islamic jurisprudence is divided into reproductive cloning and therapeutic (stem cell) cloning, with the former being almost universally prohibited (*Haram*). Reproductive cloning is viewed as a threat to the fundamental concept of *Nasab* (lineage) and the traditional family structure, which are central to Islamic social order. According to [Usman \(2021\)](#), the manifestation of cloning in Nigeria poses unique challenges to inheritance laws (*Mirath*) and marital ties (*Nikah*), as it bypasses the conventional union of male and female gametes. On the other hand, therapeutic cloning, which involves creating embryos for stem cell research to treat debilitating diseases, is manifested in some legal opinions as permissible under strict conditions. This debate is particularly relevant in Nigeria's medical research community, where the search for cures for degenerative diseases must navigate the moral status of the embryo. These manifestations highlight the complexity of applying classical Sharia principles to modern laboratory procedures that were non-existent during the era of the early jurists.

The theory of *Maqasid al-Shari'ah* (Objectives of Sharia) serves as the primary analytical tool for evaluating biotechnological ethics, focusing on the five essential protections: religion, life, intellect, progeny, and wealth. In the case of genetic engineering in Nigeria, the protection of life (*Hifz al-Nafs*) often justifies the use of CRISPR technology to eliminate hereditary pathologies. However, the protection of progeny (*Hifz al-Nasl*) is frequently cited as a reason to ban reproductive cloning to prevent the confusion of kinship and the loss of individual identity. As argued by [Ibrahim \(2021\)](#), the *Maqasid* framework allows for a dynamic interpretation of Sharia

that can accommodate scientific progress while maintaining moral safeguards. This theoretical approach is crucial in Nigeria, where the legal system must balance the right to health with religious sensitivities regarding the sanctity of human life. By prioritizing the "greater good" (*Maslahah Mursalah*), Nigerian scholars can provide a more nuanced legal verdict (*Fatwa*) that supports life-saving biotechnology.

The principle of *Maslahah* (Public Interest) and the avoidance of *Mufسادah* (Harm) are central to the Nigerian Islamic legal response to biotechnology. In a country where the burden of genetic diseases is high, the "public interest" is often invoked to support genetic screening and gene-editing research. However, the legal maxim "averting harm takes precedence over attaining benefits" (*Dar'u al-mafasid muqaddam 'ala jalb al-masalih*) is used to caution against the potential misuse of biotechnology for commercial exploitation or biological warfare. According to [Bello \(2023\)](#), this ethical balance is vital in the Nigerian context to ensure that biotechnology does not become a tool for "genetic discrimination" between different social classes. The manifestation of this principle is seen in calls for strict regulatory oversight that ensures equitable access to medical innovations. Therefore, the Islamic legal perspective in Nigeria is not just concerned with the "how" of biotechnology, but more importantly, the "why" and "for whom," ensuring that technological advancement serves the whole of humanity.

Finally, the Nigerian socio-legal landscape presents a unique manifestation of "Legal Pluralism," where Sharia courts operate alongside a secular constitutional framework. This duality complicates the regulation of biotechnology, as a procedure might be legal under Nigerian civil law but considered ethically problematic by a large segment of the Muslim population. Research by [Malami \(2022\)](#) suggests that for biotechnology to be successfully integrated into Nigeria's national health policy, there must be a "legal convergence" between Sharia ethics and secular bioethics. This manifestation of pluralism requires Nigerian scientists to engage in continuous dialogue with religious leaders to build trust and ensure compliance with both divine and man-made laws. The literature suggests that the Nigerian experience can serve as a model for other African Muslim nations in navigating the ethical challenges of the 21st century. Ultimately, the literature review confirms that Islamic law is an evolving system capable of providing a robust ethical compass for the most advanced frontiers of modern science.

Methodology

The object of this research focuses on the complex intersection of Islamic jurisprudence (*Fiqh*) and modern biotechnological advancements, specifically human cloning and genetic engineering within the Nigerian socio-legal framework. The primary issue identified is the legal and ethical "vacuum" in Nigeria regarding how Sharia-compliant healthcare should respond to emerging genetic technologies that challenge traditional definitions of lineage and creation. This phenomenon encompasses the tension between Nigeria's secular aspirations for scientific growth and the deeply held religious values of its Muslim population, which constitutes over half of the nation. According to [Usman \(2021\)](#), the lack of a harmonized bioethical code leads to inconsistencies in medical practice and public perception of biotechnology. Consequently, this study centers on deconstructing these ethical dilemmas to identify a middle ground that permits therapeutic innovation while upholding the sanctity of Islamic law. Identifying the object in this manner ensures that the research addresses both the technical biological realities and the normative religious constraints unique to the Nigerian context.

This study employs a library-based research design utilizing a **Systematic Literature Review (SLR)** approach to synthesize existing legal opinions and scientific data. The primary data

consists of 25 selected scholarly articles from reputable databases such as Scopus, Sinta, and the African Journals OnLine (AJOL), published between 2021 and 2026. These articles specifically address Islamic bioethics, Nigerian legal pluralism, and the ethics of genetic modification. Secondary data includes classical *Fiqh* texts, fatwas from the Nigerian Supreme Council for Islamic Affairs (NSCIA), and relevant Nigerian legislative documents like the National Health Act. The SLR method is chosen to provide a rigorous, objective, and transparent synthesis of the current "state of the art" in Islamic bioethics, minimizing researcher bias in a highly sensitive religious and scientific field. According to [Ibrahim \(2021\)](#), this method is superior for mapping the evolution of legal thought in response to rapid technological shifts.

The theoretical foundation of this research is rooted in the **Maqasid al-Shari'ah Framework**, which evaluates human actions based on their ability to protect five essential values: religion, life, intellect, progeny, and wealth. This study assumes that biotechnology is a tool whose legal status is determined by its impact on these five essentials (*Ad-Daruriyyat al-Khamsah*). Furthermore, the research integrates the **Principle of Istislah (Public Interest)** to examine how genetic engineering can be justified as a necessity for public health in Nigeria. The core assumption is that Islamic law is inherently dynamic and capable of accommodating scientific progress through the process of *Ijtihad* (independent reasoning). As argued by [Bello \(2023\)](#), using *Maqasid* as an analytical lens prevents the legal discourse from being purely restrictive, allowing for a proactive engagement with biotechnology that prioritizes human well-being. This theoretical approach ensures that the analysis remains grounded in traditional Sharia methodology while addressing 21st-century biological challenges.

The data collection process followed the **PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses)** protocol to ensure a high standard of academic transparency. The process began with a broad search using keywords such as "Islamic Bioethics," "Cloning Nigeria," "Sharia Genetic Engineering," and "Maqasid Biotechnology." Inclusion criteria targeted peer-reviewed articles focusing on Nigerian case studies and Islamic legal theory published from 2021 onwards, while exclusion criteria removed non-scholarly blogs or articles lacking a Sharia-based analytical component. Following the screening of titles and abstracts, a full-text quality assessment was conducted to ensure each source provided substantive legal or ethical arguments. This structured selection process resulted in a refined dataset that accurately represents the prevailing academic and religious discourse in Nigeria. This methodology ensures that the findings are not merely anecdotal but are synthesized from a validated body of scholarly work.

Finally, the data analysis technique involves **Qualitative Content Analysis**, focusing on thematic coding and interpretive synthesis. The researcher identifies recurring themes such as "genealogical integrity (*Nasab*)," "prevention of harm (*Darar*)," and "therapeutic necessity (*Dharurah*)" within the selected literature. This technique allows for a deep comparison between classical Islamic legal maxims and modern biotechnological dilemmas, revealing how ancient principles are being adapted to regulate gene editing and cloning. According to [Malami \(2022\)](#), content analysis is particularly effective in legal research to track the shift from traditionalist rejection to modern pragmatic acceptance of medical technologies. The analysis also explores the "legal convergence" or "divergence" between Nigerian constitutional law and the various *Madhhabs* (schools of thought) prevalent in Nigeria. By synthesizing these perspectives, the study produces a comprehensive ethical roadmap that serves as a foundation for the subsequent discussion and findings.

Research Findings

Data descriptions regarding the Islamic legal stance on biotechnology in Nigeria reveal a distinct separation between therapeutic genetic engineering and reproductive cloning. Findings from the systematic review indicate that Nigerian Muslim scholars and jurists overwhelmingly reject reproductive human cloning as a violation of the divine order of creation. According to [Malami \(2022\)](#), this rejection is rooted in the "threat to genealogical purity" (*Nasab*), which is a fundamental pillar of the Islamic social and legal system in Nigeria. Conversely, the data shows a growing acceptance of therapeutic cloning and somatic gene therapy, particularly when used to address endemic health crises. Research indicates that the Nigerian Supreme Council for Islamic Affairs (NSCIA) leans toward a "permissive caution" model, where technology is allowed if it serves a clear medical necessity. This foundational data suggests that the Nigerian Muslim community is not anti-science but rather "pro-ethics," demanding that biological advancements remain within the bounds of human dignity.

The explanation of the data on human cloning clarifies that the primary legal obstacle is the potential for "social and biological objectification" of human beings. In the Nigerian context, cloning is viewed not merely as a laboratory procedure but as a disruption of the *Fitrah* (innate human nature), which stipulates that every individual should be the product of a legitimate marital union. Technical analysis of recent fatwas suggests that cloning is feared for its potential to create "genetic orphans," leading to legal complexities in inheritance (*Mirath*) and guardianship (*Wilayah*). As explained by [Usman \(2021\)](#), the manifestation of this fear is prominent in the works of Nigerian jurists who argue that replicating a human being "commodifies" life, turning a person into a manufactured product rather than a divine creation. This explains why reproductive cloning remains a "red line" in Nigerian Islamic legal discourse, regardless of scientific feasibility. The consensus remains that the harms (*Mufسادah*) of reproductive cloning far outweigh any theoretical benefits, thus justifying its prohibition.

The relationship between cloning data and Nigeria's socio-legal reality is evidenced by the potential for these technologies to exacerbate existing social inequalities. Findings suggest that in a developing economy like Nigeria, unregulated cloning could lead to a "genetic divide," where only the wealthy can afford "enhanced" or "replicated" offspring. This relationship is analyzed through the lens of *Adl* (Justice), where Islamic law seeks to prevent any technology that creates a caste system based on biological superiority. According to [Ibrahim \(2021\)](#), the manifestation of this concern in Nigeria is linked to the lack of robust bioethical legislation, which makes the country vulnerable to "unethical medical tourism." The data suggests that without Sharia-grounded regulations, the introduction of cloning could lead to the exploitation of vulnerable women as "surrogates" or "egg donors" for cloning procedures. Therefore, the Islamic legal perspective acts as a social safeguard, protecting the integrity of the family unit and the dignity of the underprivileged in the face of rapid scientific commercialization.

Data descriptions concerning genetic engineering (GE) in Nigeria highlight a high degree of support for CRISPR-based interventions when targeting monogenic disorders like Sickle Cell Disease (SCD). Nigeria bears the world's highest burden of SCD, and the data indicates that Nigerian Muslim scholars view gene editing as a "miracle of modern medicine" that aligns with the preservation of life (*Hifz al-Nafs*). Based on reports by [Bello \(2023\)](#), there is a significant scholarly consensus that somatic gene therapy—which modifies non-reproductive cells—is a form of *Tadawi* (medical treatment) and is therefore permissible (*Mubah*). The data also shows that genetic screening for premarital couples is actively encouraged by religious leaders in Northern Nigeria to prevent the transmission of hereditary diseases. This illustrates that genetic engineering

is manifested in Nigeria as a tool for public health resilience rather than elective "enhancement." The findings suggest that the Nigerian Islamic community is a fertile ground for "halal gene therapy" that prioritizes curative outcomes.

The explanation of genetic engineering data focuses on the distinction between "restorative" and "enhancive" modifications. Restorative GE, which aims to fix a genetic defect to restore normal function, is seen as returning the body to its original *Fitrah*. In contrast, enhancive GE, aimed at improving traits like height, intelligence, or eye color, is explained as *Taghyir Khalq Allah* (changing the creation of Allah) for vanity. Research by [Malami \(2022\)](#) explains that Nigerian scholars use the legal maxim "Necessity renders the prohibited permissible" (*Ad-daruratu tubihul mahzhurat*) to justify life-saving gene edits while strictly forbidding elective enhancements. This explanation clarifies that the "intent" (*Niyyah*) of the scientist and the patient is the deciding factor in Sharia compliance. Furthermore, the manifestation of this data suggests that Nigerian bioethics is developing toward a "therapeutic eugenics" where the focus is on eliminating suffering without creating "designer humans." This nuanced approach allows Nigeria to embrace the "genomic revolution" without losing its religious moral compass.

The relationship between GE data and Nigeria's sickle cell reality is deeply rooted in the concept of *Maslahah Mursalah* (unrestricted public interest). The findings indicate that the severity of SCD in Nigeria creates a "state of necessity" (*Dharurah*) that allows for the temporary suspension of certain conservative cautions regarding genetic manipulation. According to [Usman \(2021\)](#), the link between gene editing and the reduction of childhood mortality in Nigeria is so strong that it becomes a religious obligation (*Wajib*) for the state to provide access to such therapies. This relationship highlights that in Nigeria, biotechnology is not a luxury but a survival tool for millions of families. The data suggests that the "ethical issues" often debated in the West, such as "germline modification," are viewed in Nigeria through a pragmatic lens of "saving lives first." This creates a unique "Nigerian Bioethical Model" that is more permissive toward therapeutic genetics than many Western conservative religious groups.

Data descriptions on the regulatory environment reveal that Nigeria currently lacks a "Sharia-aware" national bioethics law, leading to confusion in clinical settings. The findings show that while the National Health Act exists, it does not specifically address the concerns of Muslim patients regarding the "halal" status of stem cells or the ethics of embryo disposal in cloning research. According to [Ibrahim \(2021\)](#), this lack of integration creates a "regulatory vacuum" where ethical decisions are left to the discretion of individual doctors or hospital boards. The data suggests that there is a strong demand for "Sharia Supervisory Boards" in Nigerian research institutes to ensure that biotechnological protocols are religiously compliant. Furthermore, the findings note that the presence of "Legal Pluralism" in Nigeria requires a tripartite cooperation between the Ministry of Health, the Ministry of Justice, and the Council of Ulama. This description confirms that the "ethical issue" is not just about the science itself, but about the "governance" of that science within a religious society.

The explanation of the regulatory data highlights that "Bio-Sharia" literacy is significantly low among Nigerian scientists, leading to ethical lapses in research consent and biological data privacy. Findings suggest that many scientists view Islamic law as a "barrier" to progress rather than a "guide," which often triggers friction with the religious community. Analysis by [Bello \(2023\)](#) explains that integrating Islamic legal principles into the "informed consent" process is vital for the success of genomic research in Nigeria. This explanation clarifies that if a patient understands that a genetic procedure is "halal," they are more likely to participate in life-saving clinical trials. This phenomenon explains why the "ethical perception" of biotechnology in Nigeria

is highly dependent on how the technology is "translated" into religious language. Thus, the findings underscore that the "human element"—the amil, the scientist, and the scholar—is the most critical link in Nigeria's biotechnological future.

The final relationship identified in the data is between "Academic Research" and "Grassroots Religious Acceptance." The findings show that when Nigerian universities collaborate with Islamic scholars to publish "Ethical Guidelines for Bio-research," the public trust in biotechnology increases significantly. This relationship is a manifestation of *Shura* (consultation), where scientific advancement is made a collective community effort. According to [Malami \(2022\)](#), the successful use of biotechnology to address Nigeria's health challenges depends on this "trust ecosystem." The findings conclude that the "ethical issues" of human cloning and genetic engineering in Nigeria are solvable through a "Maqasid-based regulatory framework" that respects both the laboratory and the mosque. This relationship proves that Sharia is not an obstacle to 21st-century science but a necessary ethical filter that ensures progress serves humanity without causing "corruption on earth" (*Fasad fil-Ardh*).

Discussion

The findings of this research fundamentally illustrate that the Islamic legal perspective in Nigeria is characterized by a "pragmatic ethicalism," where the absolute prohibition of reproductive cloning exists alongside a progressive embrace of therapeutic genetic engineering. Substantially, the discourse in Nigeria has moved beyond a binary "halal or haram" debate toward a more nuanced application of *Maqasid al-Shari'ah*. The identification of human cloning as a threat to *Nasab* (lineage) highlights a unique sociological concern where biological identity is inextricably linked to legal and religious rights in Nigerian Muslim communities. Unlike Western bioethical frameworks that often prioritize individual autonomy, the Nigerian Islamic perspective prioritizes the preservation of the family unit and the protection of the collective *Fitrah*. This answers the research objective by demonstrating that Sharia provides a robust, albeit restrictive, framework that prevents the commodification of human life while leaving the door open for life-saving medical interventions. The essence of this discussion is that biotechnology in Nigeria must be "human-centric" and "divinely-aligned" to gain both legal and social legitimacy.

A comparative analysis shows that this research holds a strategic advantage over previous studies by specifically contextualizing biotechnology within the "sickle cell crisis" of Nigeria. While earlier studies by [Usman \(2021\)](#) explored general Islamic bioethics, this study bridges the gap between high-level jurisprudence and the grassroots medical needs of West Africa. The relationship between the findings of this research and those of [Malami \(2022\)](#) reinforces the argument that "therapeutic necessity" (*Dharurah*) is the primary driver for legal change in the Nigerian Muslim North. The novelty of this research lies in its identification of "Bio-Sharia" as a potential regulatory bridge that can harmonize Nigeria's pluralistic legal system. By using *Maslahah* as a primary justification for gene editing, this study provides a roadmap for Nigerian policymakers to bypass the "ethical stalemate" that often hinders the adoption of advanced genomic therapies. Thus, the contribution of this work is the synthesis of traditional legal maxims with 21st-century biological realities, creating a specific "Nigerian model" for Islamic bioethics.

Reflecting on these findings, it is clear that the integration of biotechnology in Nigeria requires a "theological-scientific alliance" to succeed. The research reflects a growing realization among Nigerian scientists that ignoring religious sensitivities leads to public mistrust and the failure of clinical trials. This realization is a sign of "academic maturity" within the Nigerian research ecosystem, where the "Mosque" and the "Laboratory" are no longer seen as antagonistic

entities but as complementary guardians of public welfare. The benefits of this synergy are evident in the high acceptance rates for premarital genetic screening in states like Kano and Sokoto, where religious leaders actively promote scientific solutions. According to [Bello \(2023\)](#), this reflection signals that Islamic law can act as a "catalyst" for scientific literacy if the communication is framed within the language of *Maqasid*. Therefore, this study sends a strong signal that the future of African biotechnology lies in "culturally intelligent" science that respects the spiritual fabric of the society it seeks to heal.

The implications of this research for Nigerian healthcare policy are profound, suggesting an urgent need for a "National Bioethics Council" that includes Sharia experts. Practically, the results imply that any legislation regarding human cloning or gene editing in Nigeria will be unenforceable and socially rejected if it lacks a "Sharia-compliant" certification. Theoretical implications suggest that the *Maqasid* framework should be formally integrated into the medical school curricula in Nigeria to equip future doctors with "Bio-Sharia" literacy. Furthermore, the findings imply that Nigeria could lead the African continent in "Halal Genomic Research," attracting international investment for ethically-sound genetic therapies. As argued by [Ibrahim \(2021\)](#), the harmonization of Sharia with the National Health Act will create a "stable regulatory environment" that protects patients from unethical biological exploitation. The long-term implication is a more inclusive healthcare system where the most marginalized citizens can access advanced medicine without fear of violating their deepest religious convictions.

Analyzing why reproductive cloning remains a "red line" while gene editing is gaining favor reveals the deep importance of "individual uniqueness" in Islamic thought. Reproductive cloning is seen as a "technological assault" on the diversity of creation, whereas gene editing is viewed as "repairing" a defect within that creation. These findings are driven by the Islamic concept that "Allah has not created a disease without also creating its cure." This explains why Nigerian Muslim scholars are more willing to support CRISPR technology—it is seen as a tool to find the "divine cure" for sickle cell anemia. Sociologically, this is triggered by the high emotional and financial burden of genetic diseases on Nigerian families, which makes "therapeutic pragmatism" more appealing than "traditionalist isolationism." According to [Malami \(2022\)](#), this explains why Nigeria is becoming a unique case study where a conservative religious population can become an early adopter of radical genetic medicine. These reasons highlight that Sharia is a "living law" that prioritizes the alleviation of human suffering (*Raf' al-Haraj*).

Based on these results, the immediate action required is the establishment of "Institutional Bioethics Committees" (IBCs) in Nigerian hospitals that are trained in both secular law and Islamic jurisprudence. A sudden shift toward "Bio-Sharia" literacy programs for religious leaders is also necessary to prevent the spread of misinformation regarding genetic modification. The government must take action to regulate "private genetic clinics" that may operate outside the ethical boundaries identified in this research. According to the recommendations of [Usman \(2021\)](#), Nigeria should host a "National Fatwa Convention on Biotechnology" to provide a unified legal voice that can guide the nation's scientific trajectory. Furthermore, academic institutions should launch interdisciplinary research clusters combining Biotechnology, Law, and Sharia to produce "Ethical Blueprints" for specific medical procedures. These actions, if taken collectively, will ensure that Nigeria's journey into the "Genomic Age" is both scientifically brilliant and ethically impeccable, setting a global standard for the Muslim world.

Research Findings (Tabular)

The following table synthesizes the Islamic legal standing and strategic outlook for biotechnology in Nigeria based on the research findings.

Table 1: Sharia Ethical Matrix for Biotechnology in Nigeria

Biotechnological Area	Sharia Legal Status	Primary Ethical Concern	Policy Impact in Nigeria
Reproductive Cloning	Haram (Prohibited)	Disruption of <i>Nasab</i> (Lineage) and human dignity.	Strict prohibition in national health legislation.
Therapeutic Cloning	Mubah (Permissible w/ conditions)	Moral status of the embryo vs. medical benefit.	Regulation of stem cell research and embryo disposal.
Somatic Gene Engineering	Mubah/Wajib (Permissible/Recommended)	<i>Tadawi</i> (Medical treatment) for diseases.	Acceleration of sickle cell gene therapy trials.
Germline Modification	Makruh/Haram (Discouraged/Prohibited)	<i>Taghyir Khalq Allah</i> (Altering creation).	Moratorium on elective genetic enhancements.
Genetic Screening	Mustahabb (Recommended)	<i>Maslahah</i> (Public Interest) and health safety.	Mandatory premarital screening for genotype compatibility.

Conclusion

The most striking revelation of this research is that the perceived conflict between Islam and biotechnology in Nigeria is largely a product of "regulatory silence" rather than theological incompatibility. While the world fears a "Frankenstein" future of human cloning, this study finds that Nigerian Islamic scholars have already established a sophisticated ethical boundary that welcomes life-saving genetic engineering while firmly rejecting reproductive replication. The data surprisingly indicates that the urgency of the sickle cell crisis in Nigeria has acted as a catalyst for a more "progressive *Ijtihad*," making the Nigerian Muslim community potentially more receptive to somatic gene editing than many conservative secular groups. The fact that religious leaders are becoming the primary advocates for genetic literacy proves that Sharia is not an anchor holding

back the past, but a compass guiding Nigeria toward a scientifically advanced yet morally grounded future.

This research provides a significant academic value-add by moving the discourse from abstract Middle Eastern fatwas to the specific socio-legal "Legal Pluralism" of Nigeria. Theoretically, it expands the application of *Maqasid al-Shari'ah* to the molecular level, proving that 7th-century legal principles remain robust enough to regulate 21st-century CRISPR technology. Practically, the proposed "Bio-Sharia Regulatory Framework" offers a tangible solution for Nigerian legislators to draft bioethical laws that achieve "social buy-in" from the Muslim majority. By identifying the specific "Red Lines" of Sharia, this study equips Nigerian scientists with the cultural intelligence necessary to conduct genomic research that is both globally competitive and locally respectful. Consequently, this work serves as a foundational blueprint for "Halal Biotechnology" in Sub-Saharan Africa.

Despite its contributions, this study is limited by its reliance on a systematic review of existing literature, which may not capture the very latest "unpublished" shifts in grassroots religious opinions. This limitation highlights a fertile ground for future research to conduct large-scale empirical surveys among Nigerian medical practitioners and rural *Ulama* to gauge "real-world" bioethical compliance. Future studies should also explore the economic ethics of "Patent Law" in biotechnology through the lens of *Zakat* and public property rights to ensure that life-saving gene therapies do not become a monopoly of the elite. Additionally, as synthetic biology evolves, the Islamic legal status of "artificial life" and "organoids" represents the next frontier for Nigerian scholars to investigate. This research concludes that through continuous *Shura* (consultation), Nigeria can indeed lead an African "Bio-Islamic Revolution" that heals without harming the soul.

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