2013/97056

AN ASSESSEMENT OF SOCIO – CULTURAL FACTORS THAT INFLUENCE FEMALE CIRCUMCISION AMONG ABAKURIA OF KURIA WEST DISTRICT, MIGORI COUNTY, KENYA

LUCIANA CHEPKOECH KOSKE



A Thesis submitted to the Graduate School in Partial Fulfillment for the Requirements for the Conferment Degree of Master of Arts in Sociology (Community Development and Project Management) of Egerton University



EGERTON UNIVERSITY

APRIL 2013



DECLARATION AND RECOMMENDATION

Declaration		
This thesis is my original work a	and has not been submitte	ed for examination to any institution
or University. Koske Luciana Chepkoech	Dahe	Date 12/4/2013
Reg. No. AM 17/1811/07		
Recommendation This Thesis has been submitted	with our recommendation	as University supervisors
Dr. Eric Kiprono Bor (PhD)	Burnes	12/4/2013
	Signature	Date
Department of Peace, Security a	nd Social Studies	
		1 1
Dr. Kibet Ngetich(PhD)	STATE	12/4/2013
	Signature	Date
Department of Peace, Security a	nd Social Studies	

COPYRIGHT

No part of this thesis shall be reproduced, transmitted or stored in any form or means such as electronic, mechanical or photocopying including recording or any information storage and retrieval system without the prior written permission of the author or Egerton University on behalf of the author.

© 2013

Luciana Chepkoech Koske

All rights reserved

DEDICATION

To my daughters and all girls who don't have to be subjected to this traditional practice of female circumcision, may the education they receive from the cultural and academic field give them an opportunity to grow in a safe environment, develop and find wings to fly in any community they are born and nurtured in. I hope that these research findings will go a long way in changing their lives and be one of the tools for change towards their empowerment

ACKNOWLEDGEMENT

I am indebted to all the individual girls and women I visited during my data collection among the Abakuria community, in particular Bukira West Location, they were quite welcoming, supportive, open and friendly. To the churches of Maranatha Assemblies, Pentecostal Evangelical Fellowship Assembly and the Catholic congregations that willingly discussed and created an enabling environment for my research

I acknowledge the support of my family for the patience and tolerance during this journey into the academic world. I am grateful to my daughters and sons for their encouragement, ideas and support in understanding challenges youth face in decision making.

Finally, I am obliged to my supervisors Dr Eric Kiprono Bor and Dr. Kibet Ngetich of Egerton University for their valued input and guidance.

ABSTRACT

The study attempted to assess the socio - cultural factors that influence girls to go for female circumcision despite the available alternative interventions among the Abakuria community The study sought to find out the alternative interventions that would support elimination of female circumcision that are relevant to the Abakuria community. The Social Learning Theory and the Rational Choice Theory were used to guide the study. Social Learning Theory was used to explain how socialization plays an important role, while the Rational Choice Theory highlighted the reasons that make girls and women seek female circumcision despite having alternative interventions as a choice. The study was conducted in Nyamataburo Sub Location, Bukira West Location in Kehancha Division, in Kuria West District Migori County in Kenya. The study design used qualitative exploratory approach to assess the reasons for persistence of FC. The unit of analysis was a woman who has gone through female circumcision and considered an adult. The sampling techniques were non probability that was purposive and simple random sampling, 100 women were sampled for the study. They were drawn from four churches and villages in the study area of Nyamataburo Sub Location. Questionnaire and Interview schedule were used to collect data. Methods used for data analysis were percentile scores, frequency distribution tables and graphs. These study findings would be useful for organizations advocating and lobbying for alternative intervention in place of female circumcision among the Abakuria community. This study found that culture is the main reason for persistence of female circumcision. Parents play a major role in socializing and influencing the girls to circumcise because they believe it is for the benefit of their girl and family. The girls become women once they are circumcised and therefore assume adult responsibilities and acceptance by their peers and community. This study found that alternative interventions have been introduced in place of female circumcision to preserve the positive elements of culture. The government, churches and schools are on the forefront to encourage the community to embrace alternative interventions. The recommendations of the study were that the government to continue sensitizing the community on alternative interventions, laws forbidding FC.. Secondly to support strategies that would encourage parents and their daughters to embrace alternative rites. Thirdly, the study recommends girls and women to be encouraged to attend school and access education to improve their social and economic participation in development. Finally, involvement of adults in advocating and lobbying for alternative rites of passage that safeguard the health of girls and women among communities practicing female circumcision would ensure development and health for all in the society.

TABLE OF CONTENTS

DECLARATION AND RECOMMENDATION	ii
COPYRIGHT	iii
DEDICATION	iv
ACKNOWLEDGEMENT	v
ABSTRACT	vi
TABLE OF CONTENTS	vii
LIST OF TABLES	x
LIST OF FIGURES	xi
LIST OF ABBREVIATIONS	xii
DEFINITION OF TERMS	xiii
CHAPTER ONE	1
INTRODUCTION	1
1.1 Background to the Study	1
1.2 Statement of the Problem	3
1.3 Objectives of the Study	4
1.3.1 Broad Objective	4
1.3.2 Specific Objectives	4
1.4 Research Questions	4
1.5 Justification of the Study	4
1.6 Scope and Limitation of the Study	5
CHAPTER TWO	6
LITERATURE REVIEW AND THEORETICAL FRAMEWORK	6
2.1 Introduction	6
2.2 Factors Influencing Female Circumcision.	6
2.3 Effects of Female Circumcision	10
2.4 Challenges and Consequences Facing Alternative Rite of Passage	12
2.5 Alternative Interventions for Female Circumcision	13
2.6 Laws and Policies Regarding Female Circumcision	17
2.7 Theoretical Framework	20
2.7.1 Introduction	20
2.7.2 Social Learning Theory	21

	2.7.3 Rational Choice Theory (RCT)	
	2.8 Conceptual Framework	23
	HAPTER THREE	
V	IETHODOLOGY	25
	3.1 Introduction	25
	3.2 Study Site Description	25
	3.3 Research Design	27
	3.4 Unit of Analysis	. 27
	3.5 Sample Size	. 28
	3.6 Sampling Procedure	. 28
	3.7. Methods of Data Collection	. 29
	3.8 Methods of Data Analysis	. 31
C	CHAPTER FOUR	. 32
R	RESULTS AND DISCUSSIONS	. 32
	4.1 Introduction	. 32
	4.2 General Information of the Respondents	. 32
	4.2.1 Age	. 32
	4.2.2 Education Level	. 33
	4.3 Factors influencing Participation in Female Circumcision	. 34
	4.3.1 Where Circumcision Takes Place	
	4.3.2 Types of Rite of Passage	. 34
	4.3.4Age for Female Circumcision.	. 35
	4.3.5 Who decides on Girls' Circumcision?	. 35
	4.3.6 Factors Encouraging Female Circumcision	. 36
	4.4 Challenges Faced on Choice of Rite of Passage	
	4.4.1 Consent to go for Female Circumcision	
	4.4.2 Current Decision on Rites of Passage	
	4.4.3 Reasons for Avoiding Female Circumcision	38
	4.4.4 Consequences for Choosing Alternative Rite	
	4.5 Laws against Female Circumcision	
	4.5.1 Knowledge of Laws Forbidding Female Circumcision	
	4.5.2 Source of Information on Laws against Female Circumcision	41
	4.5.3 Penalty for Practicing Female Circumcision	41

	4.6.2 Meaning of Alternative Rite of Passage	43
	4.6.3 Persons Advocating for Alternative Rite of Passage	44
	4.7 Government's Role in Eliminating Female Circumcision	44
9	4.8 DISCUSSION OF THE FINDINGS	45
	CHAPTER FIVE	50
	CONCLUSIONS AND RECOMMENDATIONS	50
	5.1 Introduction	50
	5.2 Summary of the Findings	50
	5.3 Conclusion	51
	5.4 Recommendations of the Study	55
	Recommendations for Further Research	55
	REFERENCES	56
	APPENDICES	59
	APPENDIX I	59
	APPENDIX II	63

LIST OF TABLES

Table 4.1 Respondents' Age	32
Table 4.2 Awareness of Types of Rituals	34
Table 4.3 Circumcision Age	35
Table 4.4 Factors Encouraging Female Circumcision	36
Table 4.5 Consent from Parents	37
Table 4.6 Reasons for Resisting Female Circumcision	38
Table 4.7 Consequences for Choosing Alternative rite of passage	39
Table 4.8 Sections of the law that forbids female circumcision	40
Table 4.9 Meaning of Alternative Rite of Passage to Women	43
Table 4.10 Persons Advocating for Alternative Rite at Community Level	44
Table 4.11 Government's Role in Eliminating Female Circumcision	44

LIST OF FIGURES

Figure 4.1 Education Level	33
Figure 4.2 Where Circumcision Takes Place	
Figure 4.3 Persons influencing Female Circumcision	36
Figure 4.4 Current Decisions on female Circumcision	
Figure 4.5 Laws that Forbid Female Circumcision	39
Figure 4.6 Source of Law against Female Circumcision	41
Figure 4.7 Percentage of Persons Punished For Circumcision Practice	42
Figure 4.8 Knowledge of ARP as Alternative Intervention to Adulthood	43

LIST OF ABBREVIATIONS

ADRA Adventist Development Relief Agency

ARP Alternative Rites of Passage

CEDAW Convention on the Elimination of all forms Discrimination Against Women

CBS Central Bureau of Statistics

CRC Convention on Rights of the Child

DHS Demographic and Health Survey

FC Female Circumcision

FGD Focused Group Discussion

FGM/C Female Genital Mutilation and Cut

GOK Government of Kenya

GTZ Deutsche Gesellschaft für Technische Zusammenarbeit (German Technical

Organization)

IAC Inter-African Committee on traditional practices

IRAP Initiation to Responsible Adulthood Program

KDHS Kenya Demographic and Health Survey

MOH Ministry Of Health

MYWO Maendeleo Ya Wanawake Organization

NGO Non-Governmental Organization

NPA National Plan of Action

PATH Program for Appropriate Technology in Health

PEFA Pentecostal Evangelical Fellowship Assemblies church

RCT Rational Choice Theory

SDA Seventh Day Adventist church

UN United Nations

UNICEF United Nations International Children's Education Fund

UNFPA United Nation Populations Fund

WHA World Health Assembly

WHO World Health Organization

DEFINITION OF TERMS

For the purpose of common understanding, definitions of the following terms used in this study are offered:

Alternative Rites of Passage – In this study refers to the new curriculum that girl and circumcisers follow in the rites of passage ceremony which avoids genital cutting but maintains the essential components of female circumcision such as education for the girls on family life and women's roles and responsibilities, exchange of gifts, celebration, and a public declaration for community recognition.

Circumcised - For purpose of this study 'circumcised' is occasionally used to refer to women and girls who have undergone female circumcision.

Clitoridectomy – This refers to the excision of the clitoris, usually performed as part of female initiation rites, mainly among certain African communities.

Child – According to the Children Act 2001 and in this study it refers to somebody under a legally specified age of eighteen years who is considered not to be legally responsible for his or her actions.

Early marriage - in this study it refers to marriage or cohabitation with a child or any arrangement made for such marriage or cohabitation with a child with or without their consent

Education – in this study it refers to the giving of intellectual, moral, spiritual instruction or other training to an individual seeking these services in this study the target was a child

Excision – This refers to the partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora. (Labia are "the lips" that surround the vagina).

Female Circumcision – In this study the term refers is almost exclusively used to describe traditional or religious procedures on a minor, which involves a variety of practices involving the female genitalia such as the 'cutting' or removal of the female genitalia as part of the ritual that one goes through to transit from childhood to adulthood.

Female Genital Mutilation—It refers to the expression "female genital mutilation" (FGM) or 'cutting' that comprise all procedures that involve partial or total removal of the external female genitalia for non-medical reasons.

Girl – In this study it refers to a person or child who is of age and is not yet circumcised among the Abakuria, also commonly known as 'msagane'

Rites of passage – In this study it refers to those rituals or ceremonies signifying an event in a person's life indicative of a transition from one stage to another in a person's such as birth, puberty, marriage, having children, and death.

Socialization -It is a process by which somebody especially a child, learns to behave in a way that is acceptable in their society. A process by which an individual develops into a more or less adequate member of a social group they are born into. It is learning to perform social roles according to norms and values of a certain society.

Socio-cultural factors – In this study these refer to social, cultural and communal explanations that make girls and women participate in female circumcision as a rite of passage among the Abakuria

Key informant- In this study it refers to the female adult respondents that were sampled by nature of their age and position in society to give the insight information on the background of the cultural issues in the community regarding female circumcision.

Woman – any female who is of age and has undergone female circumcision as per Abakuria cultural rite of passage as a way of transitioning from childhood to adulthood

CHAPTER ONE INTRODUCTION

1.1 Background to the Study

This study focused on an assessment of the socio-cultural factors that encourage Female Circumcision (FC) among the Abakuria community. It examined the consequences faced by girls who chose Alternative Rite of Passage (ARP) as a transition ritual from childhood to adulthood instead of female circumcision. The study also focused on alternative interventions that have been offered in place of female circumcision. This study targeted women and girls who have undergone female circumcision among the Abakuria community.

Female circumcision occurs throughout the world. WHO estimates that between 100 million and 140 million girls and women alive today have experienced some form of female circumcision (WHO Factsheet 2000). It is further estimated that up to 3 million girls in sub-Saharan Africa, Egypt and Sudan are at risk of genital mutilation annually (Yoder, 2004). Female circumcision has been reported to occur in all parts of the world. In Africa Female circumcision is primarily practiced in approximately 28 countries, where it is most prevalent in western, eastern and north-eastern regions of Africa, some countries in Asia and the Middle East and among certain immigrants in North America and Europe (GTZ, 2009)

An estimated 15% of the mutilations in Africa are infibulations. The procedure consists of 18 clitoridectory (where all the parts of the clitoris are removed) and excision (removal of all or parts of Labia Minora) and cutting of the labia majora to create new surface which are then stitched or held together in order to form a cover over the vagina when they heal. In this case a small hole is left to allow urine and menstrual blood to escape.

In Egypt female circumcision is almost universal among women of reproductive age. According to the DHS data (2003), among women aged 15–49 who are or have been married have the prevalence rate is 97 per cent. Estimates of female circumcision prevalence rates obtained from three DHS (1995, 2000 and 2003) shows that the rates are virtually constant, indicating the possibility of no change a decade. This can also be explained, however, by the fact that girls in Egypt generally undergo female circumcision between the ages of 7 and 11, and it would therefore take at least one generation for any decline to be reflected in the data. Almost all girls in Egypt undergo female circumcision, few differences in prevalence rates

can be observed at the regional or educational levels. For example, 95 percent of women living in urban areas have undergone genital mutilation/cutting, compared to 99 percent of women living in rural areas (UNICEF, 2005).

In Kenya, female circumcision is practised only among certain ethnic groups. According to the 2003 DHS, 32 per cent of women 15–49 years have undergone female circumcision; the 1998 DHS reported a similar figure, 38 per cent. Kenya reveals significant regional variations with female circumcision rates ranging from 4 per cent in the west to 99 per cent in the northeast. These regional variations reflect the presence of diverse ethnic communities. Female circumcision prevalence countrywide is nearly universal among women of the Somali (97 per cent), Kisii (96 per cent) Kuria (96 per cent) and Masai (93 per cent) groups, and significantly lowers among Kikuyu (34 per cent) and Kamba (27 per cent) women. Significant ethnic and regional variations can also be observed in the female circumcision status of daughters. While 21 per cent of all women in Kenya report having their eldest daughter circumcised, the rate reported for daughters of Somali women reaches 98 per cent. Among Luhya, Luo and Swahili women, however, less than 2 per cent report having their eldest daughter circumcised (US Department of State FGM/C Kenya, 2001).

The Law in Kenya against female circumcision was passed in parliament under the FGM Bill 2010. It is categorical that whoever breaks this law by taking their daughter or assisting in subjecting a girl to female circumcision can face a penalty of up to seven years imprisonment or a fine of Ksh 500,000 (Female Genital Mutilation Bill, 2010). Kenya in 2001 adopted a Children's Code stating that "no person shall subject a child to female circumcision." There are no significant laws making the practice illegal. The Penal Code does contain provisions pertaining to 'Offences against Person and Health', which could be applicable to instances involving female circumcision (US Department of State FGM/C Kenya, 2001).

The Kisii and Kuria communities living in Kisii and Migori Counties and close to the border with Tanzania have some of the highest levels of female circumcision rates in Kenya. The 2008/2009 KDHS established that 96% of women from the Kisii community have been circumcised. A study by Population Council in 2004 among the Kisii found that female circumcision is considered an important rite of passage for a girl to be a respected woman; a circumcised woman is considered mature, obedient and aware of her role in the family and in the society, characteristics that are highly valued in the community. The 2008/2009 KDHS

found that the majority of girls in the region were undergoing female circumcision between the ages of 10- 13 years, just at the onset of puberty. Over time, changes in practice have been observed among the Abakuria and Kisii. The Kisii tend to lean towards medicalization, using medical staff to perform female circumcision. The Population Council found that while 94% of circumcised mothers had been cut by a traditional circumciser, only 29% of circumcised girls aged 4 to 17 years had not been cut by a traditional circumciser, and that the majority had been cut by a nurse or doctor. Reports by GTZ in 2005 and 2007 noted that the type of female circumcision among the Abakuria appeared to be changing to lesser forms. There was also a decrease found in the age at which girls were undergoing female circumcision GTZ (2005).

The Abakuria community is strong adherent to female circumcision and believes it is a cultural practice. Female circumcision is highly ritualized and deeply entrenched in the communities practicing it. They believe it is their way of life. The practice among the Abakuria is about 90% prevalence thus rated as nearly universal as shown by Section 5 of the 2008 *United States Department of State* Country Report on Human Rights Practices for Kenya. The Abakuria are virtually practicing it as if it has never been outlawed. Female circumcision has been a key ritual event of initiation among the Abakuria. While changes occurred to the ritual as it was passed between generations, social and health concerns have quickly and radically reshaped it. With the introduction of alternative interventions, cultural practices that exclude harmful practices of female circumcision were done away while positive and useful were preserved (Nyachwani, 2010).

1.2 Statement of the Problem

Female circumcision is a cultural ritual associated with initiation that marks transition from childhood to adulthood among the Abakuria community. This study sought to assess the socio - cultural factors that make female circumcision persistent despite the introduction of alternative intervention and the existence of law in Kenya that has banned female circumcision. There is limited explanation as to why alternative interventions which serves the purpose of passing on the cultural aspects of the community is not being embraced by women and girls in the community, but instead would go for female circumcision. This study rests on the fact that there has been a remarkable effort to introduce alternative intervention. However, no comprehensive study has been done on the reasons as to why female

circumcision continues to be practiced among the Abakuria community, thus the need for this study.

1.3 Objectives of the Study

1.3.1 Broad Objective

The broad objective of this study was to assess the socio-cultural reasons as to why women and girls opted to undergo female circumcision despite the available alternative interventions among the Abakuria community.

1.3.2 Specific Objectives

The study sought to achieve the following objectives:

- i) To establish the factors that makes women, among the Abakuria, to seek circumcision.
- ii) To examine the challenges faced by women when they choose alternative rite of passage
- iii)To establish ways in which alternative interventions can be encouraged among the Abakuria.

1.4 Research Questions

The study answered the following Questions:

- a) What factors make women, among the Abakuria, to seek circumcision?
- b) What challenges do women face when they choose alternative rite of passage among the Abakuria?
- c) What alternative ways can be used to encourage ARP instead of female circumcision among the Abakuria?

1.5 Justification of the Study

Human Rights are universal entitlement for all without discrimination and girls too have these rights. Female circumcision, the non-therapeutic practice of removal of female external genitalia or organs, is a long-standing practice in many cultures, which however causes physical and psychological pain to the girls. Beyond the harm causing effects, circumcision is a form of violation of human rights that have been considered harmful to girls or individuals health. This study was therefore justified because the persistence of circumcision is a global concern in regard to maintaining and upholding human rights for all. This study intended to ascertain reasons for persistence of circumcision despite ARP, an intervention that safeguards the health of the girls.

The findings of this study can be used to raise awareness on the gaps of interventions in terms of legislative and policy reforms in relation to circumcision. This would enhance mobilization and advocacy activities that support policy makers and organizations spearheading interventions.

It can also be used by relevant authorities to formulate strategies that support the law, policies and effective alternative interventions targeting elimination of female circumcision practice. Focusing on alternative interventions and possible entry points would support further research to shade light on core issues that may need to be handled by different stakeholders, community and beneficiaries that are target of female circumcision among the Abakuria.

The study is significant and sociologically relevant as it provides insights to the reasons for persistence of circumcision. It will shade light on issues that can be addressed by stakeholders such as policy makers and implementers from the government and non-governmental organizations.

1.6 Scope and Limitation of the Study

The study was carried out and limited to Nyamataburo Sub Location in Bukira West location, Kuria West District. The area was chosen because of the prevalence of female circumcision that is practiced in this rural setup. The study was limited due to the non-availability of district based as well as other specific data particularly for female circumcision. Despite this, the study identified qualitative methodology to record outcomes that may not be easily quantifiable. The second limitation is that female circumcision is deeply embedded in cultural traditions that are handed down from one generation to another, and like all matters regarding sexuality and reproduction it is treated as a taboo and should not be discussed with strangers. Anyone known to be divulging cultural secrets is looked down upon. Thirdly, those who support female circumcision give biased information. Fourthly, with several laws and Child's Bill which criminalize it, female circumcision is practiced in secrecy. Those interviewed could not participate openly for fear of intimidation. The study was therefore limited to answers shared by respondents. There was need to hire study guides who were from the community and who could understand the limitations to utilize culture - appropriate language for communication used in the community to access information. This study was also limited to girls and women among the Abakuria.

CHAPTER TWO

LITERATURE REVIEW AND THEORETICAL FRAMEWORK

2.1 Introduction

This chapter reviewed literature that was related to sociological factors that lead girls to undergo female circumcision despite the availability of alternative rite of passage among the Abakuria community; factors for female circumcision, effects of female circumcision, challenges and consequences faced by women on choice of alternative rite of passage, alternative interventions against female circumcision and finally laws and policies regarding female circumcision in Kenya.

2.2 Factors Influencing Female Circumcision

Female circumcision is practiced more widely in Africa than in any other continent in the world. According to the Kenya Demographic and Health Survey (KDHS, 2003), an estimate of the total number of women who have been subjected to female circumcision in Africa ranges between 100 and 130 million. The practice is more common in the rural areas and among the uneducated women. Female circumcision is highly ritualized and deeply entrenched in practicing societies, and they are exposed to this range of procedures that are linked to community identity, cultural beliefs and social norms. Those perpetrating this practice and procedure often view it as a way of empowering young girls during their transition to womanhood, as well as preserving chastity and fulfilling religious obligations.

Ellen Gruenbaum (2001) shares that female circumcision is practiced by people of different ethnicities and various religious backgrounds including Muslims, Christians, Jews, and followers of traditional African religions. For some communities it is a cultural rite of passage, while others it is not. Communities have different and multiple reasons for practising female circumcision. As a social behaviour, female circumcision derives its existence from a complex set of belief systems that are practised by communities that hold them dear. In the majority of countries, the practice is supported among both women and men. The motivation for continuing the practice is often linked to the perception of specific benefits. The reasons for practising female circumcision, however, vary significantly within and between countries

The most common reason given for female circumcision is that it is a long standing traditional practice and culture of the community. A family that does not circumcise their girl

risks losing respect within the community and becoming an outcast. Families, relatives, both men and women would go to any length to be accepted as part of the community. Women favour circumcision predominantly because it is viewed to be a 'good custom or tradition' Women believe in that it has positive qualities and girls would be circumcised because the practice is their custom or tradition (Carr 1997). These are reasons why some communities circumcise their women, because they are deeply rooted in the traditional culture, driven by a complex combination of psychosexual and social reasons, specific to each context and passed down the generations (Muteshi and Sass 2005). The Abakuria community believes in social cohesion in matters related to culture and each member strives to be accepted in relation to adherence to norms, values and beliefs.

In some societies, the practice is embedded in coming-of-age rituals, sometimes for entry into women's secret societies, which are considered necessary for girls to become adult and responsible members of the society (Ahmadu, 2000; Hernlund, 2003; Behrendt, 2005; Johnson, 2007). Girls themselves may desire to undergo the procedure as a result of social pressure from peers and because of fear of stigmatization and rejection by their communities if they do not follow the tradition. Also, in other places, girls who undergo the procedure are given rewards such as celebrations, public recognition and gifts (Behrendt, 2005; UNICEF, 2005a). Thus, in cultures where it is widely practised, female circumcision has become an important part of the cultural identity of girls and women and may also impart a sense of a coming of age and a feeling of community membership.

Female circumcision is considered a necessary rite of passage into adulthood for young girl among the communities practicing it. When a girl goes for circumcision, they graduate to adulthood and as such a circumcised woman is considered mature, obedient and aware of her role in the family and society. Circumcising a girl is prepared her to take up responsibility in marriage. Girls who are not circumcised, is believed that they are immoral, make rude wives and daughters-in-law. In practicing communities, it is taught to the girl right from a tender age that no man will marry an uncircumcised girl. Once a girl is circumcised, their chances of getting married are high. They also are thought to be grown up, and they have no qualms having sexual relations with adult men. Despite their age, grown men also view them as mature women, ready for marriage and sexual relationships. Among the Meruand Masaai, girls are circumcised to prepare them for marriage, which follows almost immediately, and is a source of income (dowry) for their family. Female circumcision is perpetuated as a means

of reducing the sexual desire of girls and women, thereby curbing sexual activity before, and ensuring fidelity within marriage (Chege 2001)

As part of girls' and women's cultural gender identity, female circumcision rite gives them an opportunity to belong. The procedure imparts a sense of pride, of coming of age and a feeling of community membership. Cultural and ethnic identity holds the community together and gives them a sense of unity and oneness. Moreover, not conforming to the practice stigmatizes and isolates girls and their families, resulting in the loss of their social status. This deeply entrenched social convention is so powerful that parents are willing to have their daughters circumcised because they want the best for their children and because of social pressure within their community (Toubia, 1995). The social expectations surrounding FC represent a major obstacle to families who might otherwise wish to abandon the practice. This study sought to shade light on the extent of support ARP propagators would need to encourage the Abakuria community to participate and help in eliminating female circumcision.

In many communities an uncircumcised woman is a bad omen. A study undertaken by Khasakhala (UNICEF, 2005), states that the community is still hiding under history, traditions and culture that encourages female circumcision while citing reasons of rejections hence making girls stigmatized for not undergoing this rite. Despite efforts to curb the practice, its prevalence still remain high at 80% in Kuria districts. This study endeavored to find suitable interventions that would be acceptable and ways of encouraging alternative rite of passage among the Abakuria community in a bid to reduce the harmful practice of circumcision that affect girls.

Social convention is so powerful that girls themselves may desire to be cut, as a result of the social pressure from peers and because of fear – not without reason – of stigmatization and rejection by their own communities if they do not follow the tradition. Girls who undergo the procedure are provided with rewards, including celebrations, public recognition and gifts. Moreover, in communities where female circumcision is almost universally practiced, not conforming to the practice can result in stigmatization, social isolation and difficulty in finding a husband. If they remain uncircumcised and their families are therefore unable to arrange a marriage, they may be cast out without any means of subsistence and support. Those who resist may be cut by force. Due to lack of choices and the powerful influence of

tradition, many girls accept circumcision as a necessary, and even natural, part of life, and adopt the rationales given for its existence.

As Toubia (1995) expounds that it is a sacred ritual through which girls earn respect and are accepted as part of the society. This is coupled with the cultural demands and a need to belong to a group of people because it gives one an identity. Some communities see circumcision as a religious purification. A girl who has not been circumcised is viewed as unclean, unacceptable and cannot perform cultural rites and even offer sacrifices. The research study report by Feed the Minds and Population Council on FGM in Kisii and Kuria (2011) concurred and established that circumcision amongst the Kuria is observed as a rite of passage from childhood to adulthood. In the past, the Abakuria girls were circumcised at the age of 17-18years – when a girl was considered ready for marriage. Today, girls are circumcised when they are between the ages 8-15years. Participants reported that in some cases, the parents consider only the physical size of the girl to decide whether she is of age or not. The decision to cut is usually made by the parents, although in some cases girls can decide to go for the cut because of peer pressure:

The ridicule and insults from their peers can prove to be impossible to bear and most of the girls succumb to pressure and opt to go for the cut even at an early age" (participant, FGD, teachers).

During circumcision, the shedding of the blood was important because it had a spiritual implication that is believed to affect the possibility of a girl to conceive and procreate. Traditionally, the Maasai had a belief that an uncircumcised girl has unclean blood, which needs to be removed through the cutting of part of the genitalia. Among the Meru of Tharaka, the Kalenjin and the Maasai, a child born of or conceived by an uncircumcised girl was considered ritually unclean and she could not participate in some cultural events and activities. Among the Maasai, such a child was stigmatized throughout her life and treated as an outcast even in her family. The Meru of Tharaka believe that if a man takes bride price for a girl who is not circumcised, the ancestors would curse the family. Kalenjin female circumcision allowed the girl to perform socially prestigious tasks such as cooking for her father (MYWO & PATH 1996).

The Abakuria believe female circumcision is a pre-requisite for marriage and hence dowry. An uncircumcised girl fetches a lower bride price. In all the communities where the practice persists, bride price is deeply entrenched and a girl who refuses to be circumcised is a threat to the would-be wealth her father expects on her marriage. It is also expected that men will marry only women who have undergone the practice. The desire for a proper marriage, which is often essential for economic and social security as well as for fulfilling local ideals of womanhood and femininity, may account for the persistence of the practice. The justification for circumcision is linked to marriage ability that are consistent with characteristics considered necessary to become 'a proper' wife. When one is married, children will be expected. It is unthinkable for most to imagine that a woman would get married or have a child before circumcision. According to study conducted by Population Council (2011) in Kisii and Kuria, the two communities believe that if a woman got married before circumcision, she would bring a bad omen to the family. It was therefore the responsibility of her husband's family to arrange for her to be circumcised during labour and child birth.

2.3 Effects of Female Circumcision

The World Health Organization (1995) defines Female Genital Mutilation (FGM) as the partial or total removal of the female external genitalia. External genitals include the clitoris, labia, mons pubis (the fatty tissue over the pubic bone), and the urethral and vaginal openings. The practice of FGM is often called "female circumcision" (FC), implying that it is similar to male circumcision. However, the degree of cutting is much more extensive, often impairing a woman's sexual and reproductive functions (Toubia, 1995).

The female circumcision operation is generally performed by a traditional birth attendant or an *exciseuse*, an elder village woman. Excision, the most common practice in Africa, entails the cutting of the clitoris, sometimes its removal, and slicing of some or all parts of the labia minora and majora. An inexperienced hand or poor eyesight can lead to puncturing of the urethra, the bladder, the anal sphincter and/or the vaginal walls. Heavy keloid scarring can impair walking; the development of dermoid cysts is not uncommon. A ritual frequently justified as a guarantor of fertility can lead to sterility (DHS Egypt, 1997). This study sought to find out knowledge of dangers and effects of FC as a result of exposure to health risks.

The specific impact of female circumcision on the health of a girl or woman depends on a number of factors, including the extent and type of the cutting, the skill of the operator, the cleanliness of the tools and of the environment, and the physical condition of the girl or woman. Severe pain and bleeding are the most common and immediate consequences of all

forms of FC. As the great majority of procedures are carried out without anesthesia, the pain and trauma experienced can leave a girl in a state of medical shock. In some cases, bleeding can be protracted and girls may be left with long-term anemia. Infection is another common consequence, particularly when the procedure is carried out in unhygienic conditions or using unsterilized instruments. The type and degree of infections vary widely and include potentially fatal septicemia and tetanus. Sometimes the risk of infection is increased by traditional practices, such as binding of the legs after infibulations or applying traditional medicines to the wound. Urine retention is another frequent complication, especially when skin is stitched over the urethra. This may contribute to the wound failing to heal quickly, and other factors affecting a girl's general health (Koso-Thomas 1987).

Thomas further elaborates that female circumcision can result in long-term physical effects. Slow or incomplete healing which leaves abscesses, painful cysts and thick, raised scars called keloids, which can cause problems in later stages in pregnancy and childbirth. Deinfibulations - the procedure to re-open the orifice after it has been stitched or narrowed – a dreinfibulation - to re-stitch the vagina - may be performed at each birth. Both procedures seriously compromise the health of women. This study sought to find out if the women and girls are aware of the dangers they are exposed to when they undergo FC among the Abakuria community.

According to report on findings given by Maendeleo YaWanawake Organization (MYWO) and PATH (1999), even traditional circumcisers are aware of the fact that the practice can lead to adverse health effects although they would defend this by choosing a skilled 'cutter' as it would impact on their experience. A traditional circumciser gives her views as follows:

"During child birth, you may experience problems with the operated part of the genitals if the operation is not done well. This used to happen long ago when people had not been trained to circumcise. It used to cause the inside of the vagina to swell. During birth, the swelling was removed using a ring-like leather strap. Today, women experience no problems related to female circumcision" (Tharaka – active Traditional Circumciser).

A study report done by Population Council on FGM in Kisii and Kuria (2011), shows that the two communities were aware of the medical effects of female circumcision and easily cited problems such as excessive bleeding, trauma and shock, difficulty in delivery of babies and



development of hard scars. Some of them were equally aware of negative social effects of the practice - some participants felt that circumcision often led to promiscuity, as the circumcised girls tended to believe that they could do anything they liked, including having sex, however, there were also participants who were unaware of the negative effects of female circumcision refused to acknowledge them. For instance, in the FGD with the Council of Elders, some participants felt that female circumcision has only positive effects, including ensuring that the women do not become promiscuous.

The cut ensures that our women become complete (real women) and they do not end up as the Luo women" (participant, FDG, Council of Elders)



2.4 Challenges and Consequences Facing Alternative Rite of Passage

Interventions used to eradicate female circumcision practices have been stagnated by the inadequate consideration of the beliefs, norms and customs associated with the ritual. A critique of the MYWO practice of recruiting girls has faced resistance from the parents and has ignited forceful retaliation of the communities taking their children for circumcision forcefully. Parents attending the alternative rite of passage sessions support the idea of eradicating female circumcision practice and, indeed, have not and will not cut their girls, however, the methods used by MYWO to recruit the girls for the alternative rite should have involved the parents more fully to avoid resistance of ARP in these situations (MYWO /PATH, 1996). This study sought to find out if the parents of the girls were in agreement with their daughters going for cultural rituals, and to find out reasons why permission from parents to attend cultural rituals was key in their involvement. This could also be reason as to why some girls may have accepted to go through ARP just to please organizations supporting ARP, and later subject their daughters to circumcision.

The mental picture regarding female circumcision among communities incorporates myths, beliefs, values and codes of conduct. The persistence of this practice is the need to observe customs and traditions, attempt to improve the marriage prospects of women, the wish to curb women's sexual desire and the need to mark the passage from childhood to womanhood. To make sure that people conform to the practice, strong enforcement mechanisms have been put in place by communities; such as rejection of women who have not gone through circumcision as marriage partners, immediate divorce for uncircumcised women, derogatory songs, public exhibitions and witnessing of complete removal before marriage, forced excisions, and instillation of fear of the unknown through curses and evocation of ancestral wrath. Circumcision is about pain endurance and perseverance in preparation for future responsibilities. It is about public recognition, receiving of gifts and decorative materials, respect and the ability to participate in adult social functions that accompany songs and celebrations (Chebet, 2009). This study sought to highlight the consequences faced by girls who choose alternative rite of passage and not accepting the pressures of female circumcision among the Abakuria community.

A baseline study done by the Ministry of Health (MOH/GTZ) and Population Council (2004) in Kuria district, found that FC is a deeply rooted cultural practice. Among girls aged 12 to 18 years, 52% were circumcised, as were 90% of the older women. According to the Kenyan Demographic Health Survey (KDHS, 2003), 32% of all Kenyan women aged between 15 and 49 years are circumcised. Taking alternative rite of passage with no 'cut' would render one unacceptable among the Abakuria, hence isolation and a feeling of not belonging. To be accepted the girls would strive to be socially accepted, including going for FC despite the challenges it poses to an individual. This study endeavored to find out if the challenges hold for the few girls who do not go for female circumcision and want to be part of the community in following their culture.

At the community and at the family level, strong pressure is brought to bear on women and girls to ensure continuation of female circumcision practice. As initiates, girls are sworn into secrecy so that the pain and ordeals associated with the procedure of circumcision will not be discussed, especially with uncircumcised women. Songs and poems are used to deride and ridicule uncircumcised girls. The fear of the unknown through punishment by God, ancestral curses, and other supernatural powers is instilled in them, as shown in a study done by MOH/GTZ and Population Council (2004). This study aspired to highlight the psychosocial beliefs that affects the decisions by girls and women to follow practices that are less harmful, and the driving factors that would otherwise be counteracted by alternative interventions and still allow the girls to have a sense of belonging in the Abakuria community.

2.5 Alternative Interventions for Female Circumcision

Attempts to persuade communities to abandon female circumcision were first recorded by missionary and colonial authorities early in the twentieth century, and were largely seen as colonial imperialism. The efforts of Western feminists in the 1960s and 1970s were similarly regarded as being critical of indigenous culture and imposed by outsiders with their own

agenda. However, attitudes began to change in the mid-1990s when the International Conference on Population and Development (1994) and the Fourth World Conference on Women (1995) took place in Beijing, in which FC was portrayed as a health and human rights issue. It was acknowledged that efforts to encourage abandonment needed to include locally-led initiatives and the full engagement of communities, health professionals and policy makers. In 1997, a joint international statement against the practice of FC was issued by the World Health Organization (WHO), the United Nations Children's Fund (UNICEF) and the United Nations Population Fund (UNFPA).

The World Health Assembly resolution in 2008 (WHA61.16) called for an integrated approach to ending female circumcision within one generation through concerted action across health, education, finance, justice and women's affairs, focusing on advocacy, research and guidance for health services. UN released a statement that supported a stronger focus on the human rights, legal and policy dimensions. It stressed that regardless of the reasons for its practice, female circumcision is harmful and violates the rights and dignity of women and girls, the rights to health, security and physical integrity of the person, the right to be free from torture and degrading treatment, and the right to life when the procedure results in death(WHA 2008)

The Kenyan government has introduced a range of initiatives through the National Plan of Action to encourage the abandonment of female circumcision, for example, a government-led commission to coordinate activities for the elimination of the practice was been set up, bringing together partners involved in the fight against female circumcision on national and regional levels, to share expertise, raise resources and collaborate on initiatives (*National Plan of Action for Elimination of FGM 1999*). The commission has had mixed success in establishing networks at regional level, for example, Kuria has a thriving network which coordinates anti-FC action, whereas in Kisii attempts to establish a strong network have been largely unsuccessful to date (Feed the Minds and Population Council 2005).

The Alternative Rite of Passage (ARP) was first introduced in 1996 by Maendeleo Ya Wanawake (MYWO), a local women's development movement, in partnership with PATH, as an 'alternative ritual' among the Meru community. This ritual avoided genital cutting during the circumcision process but maintained the essential components of female circumcision, such as education for the girls on family life and women's roles and

responsibilities, exchange of gifts, celebration, and a public declaration for community recognition. At this time female circumcision was part of a large community celebration with the younger girls being secluded prior to cutting, to learn about their role in society, followed by a public event to celebrate their graduation. In churches the ritual dubbed as Initiation to Responsible Adulthood Program (IRAP) a youth-friendly initiation program where girls are taken through a process of 'symbolic' circumcision through counselling and education. The intention is to simulate the traditional ritual as closely as possible without actually circumcising the girls. The rationale behind alternative interventions was to persuade communities to maintain the education on cultural aspects and public celebration of the passage. It is an attempt to reduce the barrier of perceived social disapproval for those not yet confident to make the final step from decision to action, and also allows those who have already taken action to declare this step and reinforce public acceptance of their daughter's status as an uncircumcised woman.

The conventional nature of the practice requires a significant number of families within a community to make a collective, coordinated choice to abandon the practice so that no single girl or family is disadvantaged by the decision (UNICEF, 2005b). The decision to abandon must be collective and explicit so that each family will have the confidence that others are also abandoning the practice. The decision must be widespread within the practicing community in order to be sustained. In effect, it will bring into place a new social norm that ensures the marriage ability of daughters and the social status of families that do not cut their girls; a social norm that does not harm girls or violate their rights (WHO 2008).

This approach has major inter-related components which include community sensitization, dialogue, seclusion for initiation (training) and colorful graduation (coming out) ceremony which serve as public declaration that girls have crossed over from childhood to adulthood. The seclusion and training mimics the traditional practice whereby girls are put in seclusion immediately after being circumcised and are taught by an aunt or other relative or friend (who is slightly younger than the girl's mother) about women's roles, cultural values and sexuality, the girls going through the alternative ritual also undergo three to five days of 'seclusion' with teachings on family life skills, community values and reproductive health. They also hold informal discussions about the positive aspects of their culture from selected mothers (Chebet, 2009). This study sought to find if the women in the community consider

ARP as a ritual for their girls and challenges and consequences faced in deciding to take their daughters for the alternative rite of passage among the Abakuria.

Alternative interventions programs that include "empowering" education, discussion and debate, public pledges and organized diffusion have been shown to bring about the necessary consensus and coordination for the sustained abandonment of female circumcision at community level. The activities encourage communities to raise problems and define solutions themselves regarding a variety of concerns, including sensitive ones such as female circumcision, without feeling coerced or judged. Different methods can be used to create a space for open and reflective dialogue, including intercultural dialogue that investigates cultural variations within and between communities as well as aspects of cultural change. Such methods have shown to be particularly effective when they raise and stimulate discussion on human rights principles.

In alternative interventions, the focus is on empowering education that helps people to examine their own beliefs and values related to the practice in a dynamic and open way, which is not seen as threatening and alienating individuals from their culture. Educational sessions will be empowering if they serve not only to impart new knowledge but also to provide a forum for participants to exchange experiences, and help them reveal and share complex inner feelings and examine conflicting attitudes towards female genital mutilation in the community Empowering education can be undertaken through various forms of training, including literacy training, analytical skills and problem-solving as well as through the provision of information on human rights, religion, general health and sexual and reproductive health. Classes and workshops can include the use of traditional means of communication such as theatre, poetry, story-telling, music and dance, as well as more modern (WHO, 2008)

Alternative interventions have been used in Kenya to persuade communities to abandon female circumcision. A situation analysis conducted by Humphrey et al (2006) documented the different types of interventions that have been implemented in Kenya, including: Interventions using a health risk approach and addressing health complications of FC; approaches addressing circumcision as a harmful traditional practice; educating traditional circumcisers and offering alternative income generation; the alternative rite of passage approach; interventions addressing circumcision and religion; legal and human rights

approach, the intergenerational dialogue approach, promotion of girl's education and empowerment to oppose circumcision, and supporting girls escaping from early marriage and female circumcision. This study endeavoured to find out the perception about alternative intervention among the Abakuria community.

Interventions targeting parents and schools have found that educational and religious institutions can offer forums for learning and discussion about female circumcision by creating an environment of confidence, trust and openness. Artists and others who provide positive role models can be brought into schools and churches, and materials can be developed for teachers and integrated into school curricula and teacher training on subjects such as science, biology and hygiene as well as those in which religious, gender and other social issues are addressed (UNICEF, 2005b). It is however advisable to reach all groups of the community with the same basic information, all forms and spaces of learning, including intergenerational dialogue should be explored when designing initiatives to address female genital mutilation (WHO, 2008).

2.6 Laws and Policies Regarding Female Circumcision

At the international level, the human rights implications of female circumcision have been broadly recognized over time. In Vienna in 1993, the UN World Conference on Human Rights called for the elimination of all forms of violence against women to be seen as a human rights obligation. "In particular, the World Conference stresses the importance of working towards the elimination of violence against women in public and private life...and the eradication of any conflicts which may arise between the rights of women and the harmful effects of certain traditional or customary practices."

Female circumcision is recognized internationally as a violation of the human rights of girls and women. It reflects deep-rooted inequality between the sexes, and constitutes an extreme form of discrimination against women. It is nearly always carried out on minors and is a violation of the rights of children. The practice also violates a person's rights to health, security and physical integrity, the right to be free from torture and cruel, inhuman or degrading treatment, and the right to life when the procedure results in death (UN Report of World Conference on Human Rights, 1993).

There are international treaties and conventions that call for an end to harmful traditional practices, including the Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination against Women, and the African Charter on the

Rights and Welfare of the Child. A specific focus on female circumcision is found in UN General Assembly Resolution 56/128 on Traditional or Customary Practices Affecting the Health of Women and Girls, and in the Protocol on the Rights of Women in Africa (Maputo Protocol), adopted by the African Union in 2003. Many of the countries where FC occurs have passed legislation prohibiting the practice, and some countries with large immigrant populations – Canada, France, Sweden, Switzerland, the United Kingdom and the United States – have also outlawed it. Some countries have legal clauses granting asylum to women who fear being mutilated if they return to their country of origin. At the UN General Assembly Special Session on Children in 2002, governments forged a commitment to end FGM/C by 2010. In February 2003, 30 African countries vowed to end FGM/C and called for the establishment of an International Day of Zero Tolerance. That pledge was reinforced in June of that year at the Afro-Arab Expert Consultation, who's Cairo Declaration, highlighted the provision of existing legal tools for the prevention of female circumcision.

The Maputo Protocol is important in highlighting the key issues to be followed by the Kenyan government on female circumcision. The Maputo Protocol covers a broad range of women's rights and is progressive in the detail into which it goes, in particular, Article 5 condemns and prohibits FC. Article 5 is comprehensive in its approach to the abandonment of female circumcision. However, elimination of FC requires an integrated approach, concerted and coordinated action in the political, legal and social areas. The importance of the fight against female circumcision is aimed at enhancing an open society where all women and children are free to exercise their human rights (Omondi, 2007). This study endeavored to shade light on the existence of laws and policies that advocate for alternative interventions.

Anti-FC legislation is one of the most controversial aspects of the female circumcision elimination movement. The African Charter on the Rights and Welfare of the Child, 1990 which was entered into force November 1999, with reference to Article 21 which shares that: States Parties to the present Charter take all appropriate measures to eliminate harmful social and cultural practices affecting the welfare, dignity, normal growth and development of the child and in particular (a) those customs and practices prejudicial to the health or life of the child; (b) those customs and practices discriminatory to the child on the grounds of sex or other status. Many persons working on elimination of female circumcision acknowledge the need for a strong governmental stand against circumcision. The Kenya tenth Parliament passed the Prohibition of Female Genital Mutilation Bill (2010).

The Bill provides for punitive penalties including a jail term of seven years or a fine of 500,000 Kenya Shillings for anyone convicted of female circumcision offence, moreover, anyone who causes death in the process of carrying out female circumcision is liable to life imprisonment. These punitive penalties are deterrent enough if effectively enforced. The passage of an anti-female circumcision law is a contributing factor to the success of anti-female circumcision programs. Anti-FC legislation provides an official legal platform for supportive activities that has offered legal protection for women, and ultimately discourages exercisers and families fearing prosecution. As cited by Nyachwani (2010), the Abakuria, the Abagusii and the Maasai relish the practice, and it might take more efforts in making it illegal and have the rural folk understand its full negative impact. The Abakuria are virtually practicing it as if it has never been outlawed This study would highlight efforts put in place by government and other stakeholders in eliminating the female circumcision practice among the Abakuria.

The Kenyan government has banned all forms of violation of Human Rights including female genital mutilation or circumcision as popularly known. Article 231 of the Kenya Penal Code Act Cap 63 (1970:86) states that "Any person who, with intend to maim. Disfigure or disable any person or to do grievous harm to any person is guilty of a felony and is liable to imprisonment for life, with or without corporal punishment" Despite this ban, communities continue unabated with female circumcision and coerce girls and women who avoid or escape cultural and core values such as female circumcision. The Children's Act (2001) enacted by parliament, outlaws female circumcision. Section 14 of this Act states that:

"No persons shall subject a child to female circumcision, early marriage or other cultural rites, customs or traditional practices that are likely to negatively affect the child's life, health, social welfare, dignity or physical or psychological development."

Alternative interventions have been offered in place of female circumcision. This has been as a result of campaigns by various stakeholders including the church, school and local administration. This was aimed at localization of the alternative rite of passage to give it a cultural and community specific to serve as an acceptable ritual for transition from childhood to adulthood complete with initiation (teaching) and public ceremony which stimulate the traditional practice except the cut (Chebet, 2009). This study sought to find out if the women

from Abakuria community are aware of the alternative interventions offered by the government in collaboration with other stakeholders.

Kenya Constitution part V provides for the Bill of Rights for Kenyan citizens. These range from the right to protection from discrimination, protection from torture, cruel and inhuman treatment, right to life and health among others. Broadly interpreted these constitutional provisions are violated by those practicing female circumcision. Girls and women, who are subjected to female circumcision, endure physical pain during the procedure which is very traumatizing, hence exposing them to torture, cruel and inhuman treatment by circumcisers and perpetrators of the practice (Toubia, 1993). These rights are what the constitution seeks to protect and the reasons for laws and policies that encourage the efforts to eliminate female circumcision in all communities. The Abakuria is among communities that have kept vigilant on female circumcision and it has been reinforced by the gate keepers of the community mainly men and women who under standard safeguard these rituals. The study sought to investigate awareness of laws against female circumcision and how the community would seek acceptable interventions that would end the practice.

The Ministry of Gender, Children and Social Development co-operate with other departments and civil society in matters affecting women and children, have supported initiatives that roll out plans to eliminate female circumcision and the Abakuria community is no exception. The objectives of the National Plan of Action (NPA) include reducing the proportion of women and girls who undergo circumcision in Kenya; increasing the proportion of communities that support the eradication of female circumcision; increasing the proportion of healthcare facilities that provide care, counselling and support to girls and woman affected by circumcision; and increasing the technical and advocacy capacity of institutions and communities to develop and manage female circumcision eradication programs. (A National Plan of Action for the Elimination of Female Genital Mutilation in Kenya, 1999)

2.7 Theoretical Framework

2.7.1 Introduction

The proposed study applied Social Learning Theory and Rational Choice Theory. These were used to assess the factors that lead to female circumcision and the challenges faced by women in deciding the right type of rite of passage for one to participate as a way to move from childhood to adulthood among the Abakuria community.

2.7.2 Social Learning Theory

The Social Learning Theory by Albert Bandura, posits that people learn from one another, via observation, imitation, and modeling. People learn through observing others behaviour, attitudes, and outcomes of those behaviors. From observing others, one forms an idea of how new behaviors are performed, and on later occasions this coded information serves as a guide for action (Bandura1977). This theory will be used to highlight on how society plays a key role in socialization of its members.

Socialization is the process by which humans or animals learn the values, norms, acquire social identity, and learn the culture of their society. This theory is derived from the work of Gabriel Tarde (1843-1904). Learning includes exposure and internalization of rules and expectations that are considered normative to the social order. This theory proposes in this study that children and even adults do most of their learning and acquisition of their knowledge through observation and modeling. Gender social learning suggests that a child is rewarded or punished for specific behaviors, depending on their appropriateness to the child's gender (Bandura, 1977).

The theory holds that the socializing agents, consciously or unconsciously, shape the generation of the children. The family is the primary socializing agent. The Abakuria community socializes their members through imparting cultural norms, values and rituals such female circumcision that support their children to move from childhood to adulthood. Social Learning Theory explains adequately why the social pressures girls and women face in adhering to the social demands. The community depends on the family unit and the immediate environment to socialize their children into the community way of life and to ensure that all rituals are adhered to as a way of ethnic identity and cohesion. The adult men and women such as elders, fathers, grandmothers, aunts and other relatives are bestowed the responsibility to safeguard this practice of circumcision by ensuring its continuity and acceptance.

2.7.3 Rational Choice Theory (RCT)

The pioneering figure in establishing Rational Choice Theory (RCT) in sociology was George Homans (1961). This theory attempts to explain all social phenomenon in terms of how individuals make choices under the influence of their preferences. A person tries to maximize their advantage or gain and to minimize their disadvantage or loss. The individual

person bases their behavior on rational calculation, they act with rationality when making choices and their choices are aimed at optimization of their pleasure or profit. For the girls and women among the Abakuria, the Rational Choice Theory explains the reasons how people calculate the likely costs and benefits of any action before deciding what to do (Homans, 1961). This could be the basis of choice the girls and women make in regard to the underlying circumstances that encourage female circumcision and avoidance of alternative rite of passage.

The fact that people act rationally has seen rational actions alongside other forms of action which involve both rational and non-rational elements. Such views of actions recognize traditional, emotional or effectual actions and other forms of value-oriented actions alongside the purely rational types of action. All social action, it is argued, can be seen as rationally motivated, as instrumental action, however much it may appear to be irrational or non-rational. In essence the individual acts within specifics, given constraints and on the basis of the information that they have about the conditions under which they are acting. This theory holds that individuals anticipate outcomes out of the choices made. Rational individuals choose the alternative that is likely to give them the greatest satisfaction (Heath 1976: 3; Coleman, 1973).

Homans (1961) held that *approval* is the most fundamental human goal. Approval is a 'generalized reinforcer' that can reinforce a wide variety of specialized activities. Homans saw approval as a fundamental issue in decisions. The girls and women among the Abakuria would seek approval consciously or unconsciously by following the choices they have. In this regard factors that make girls and women go for circumcision would be among the influencing choices made by individuals. They will rationalize the greater of the benefits than the disapproval one gets when they go for female circumcision. The social interaction involves the exchange of approval and certain other valued behaviors in the community especially for the girls and women. Rational Choice Theorists also recognize that the *threat* of punishment or reward itself. The threat of punishment, for example, may call for appropriate behavior from those who wish to avoid the punishment. In regard to punishment and rewards, the case of female circumcision for girls among the Abakuria could be attributed to the motivating role of threats such as abuse, mockery, isolation and inducements such as acceptance, marriage prospects hence the conditioning of human behavior.

Individual girls and women would calculate the personal and family benefit to be made from participating in the agreed rite of passage with support from the family as the significant persons in the life of the individual. In the case of the Abakuria community, customary rite of passage such as female circumcision and marriage are stressed upon the girl or woman and they are bound to expedite the same. Social norms and expectations are impressed upon an individual and one belonging to a community endeavors' to do that which is communally acceptable regardless of choices one has. Women would continue to accept and follow norms of behavior that lead them to act in altruistic ways or to feel a sense of obligation that overrides their self-interest (Coleman, 1990).

2.8 Conceptual Framework

The conceptual framework illustrates the relationship between the main concepts of the study. The relationship between the factors contributing to persistence of Female Circumcision despite the dangers that it poses to girls and women and the consequences faced as a result of not abiding to the community demands.

Conceptual framework

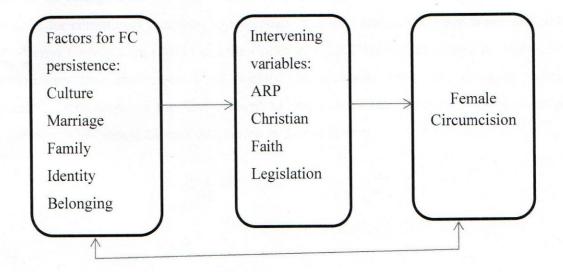


Figure 2.1 Conceptual Framework

Factors contributing to persistence on female circumcision among the Abakuria community include the need to adhere to their traditions and culture, the desire for girls to be married among their people, pressure from family, to have an ethnic identity and acceptance, having a sense of belonging. These pressures are from close family members and their immediate

close relatives in their environment. All these are as a result of traditions and customs handed down from one generation to another through the socialization process.

The government, organizations and institutions have introduced alternative interventions. Efforts have been made to mobilize and sensitize communities through churches, schools and other gatherings of availability of alternative rite of passage. The government has put legislations to highlight the laws and policies that encourage alternative interventions in place of female circumcision among the community. However, the reasons for participating in female circumcision still persist among the Abakuria. Efforts to advocate and lobby for change of attitude and enforce the law against female circumcision continue.

An assessment of the sociological factors that encourage the persistence of female circumcision instead of embracing alternative rites of passage is what this study intended to find out. The practice of female circumcision greatly depends on the factors that propel girls and women to go for the ritual. Individuals choose what best suits their family and immediate environment. The involvement of community members Council of Elders, the church, schools and local administration in mobilizing and sensitizing the community would encourage change from within as individual families set the pace for others to emulate. There is need for community members to understand the laws and policies which are embedded in the Kenya Constitution (2011) and the Children's Act 2001 that safeguard the rights of girls where they face challenges. Civil Society Organizations are in the forefront to support paralegal structures of the Government to implement *The National Plan for Action on Elimination of Female Genital Mutilation in Kenya* (1999)

CHAPTER THREE METHODOLOGY

3.1 Introduction

This chapter contains the plan that the study applied. This includes the methods that were used in data collection, measurement and analysis. This section is subdivided into six subsections that serve to provide information on how the study was conducted. They include: study site description, research design, unit of analysis, sample size, sampling procedure, methods of data collection and analysis.

3.2 Study Site Description

This study was conducted in Nyamataburo Sub Location, Bukira West Location, and Kehancha Division in Kuria West District. According to GOK (2008), the Census Report (1999) and District Development Plan Kuria West (2008-2012) the district has a population of 151,887 and covers an area of approximately 581 km². Kuria District has since then been split into two districts in December 2007; Kuria West District covers three divisions namely Kehancha, Mabera and Masaba Divisions while Kuria East spans Kegonga and Ntimaru divisions.

Kehancha Division has six locations among these is Bukira West. The study site Nyamataburo is a one of the three Sub Locations in Bukira West Location. The sub location borders with Tanzania in the southern part. Bukira West Location has a population of 17,129 persons while the site of study Nyamataburo Sub Location has total population of 1983 with 976 male and 1007female (CBS, 1999).

The Kenya's 2008/2009 KDHS finding show that there are regional variations in prevalence of female circumcision. In Migori County where Kuria West District is situated, 34% of the women were circumcised. Female circumcision remains high among the Kuria (96%) and the Kisii (96%) in this region. The Kisii and Kuria communities practice female circumcision, unlike the Luo community which report 1% prevalence rate in the practice There are also differences in the prevalence rate of female circumcision between rural and urban areas, with an average of 31% of women in the rural areas reporting that they had been circumcised, compared to just 17% in urban areas (KDHS, 2008/2009).

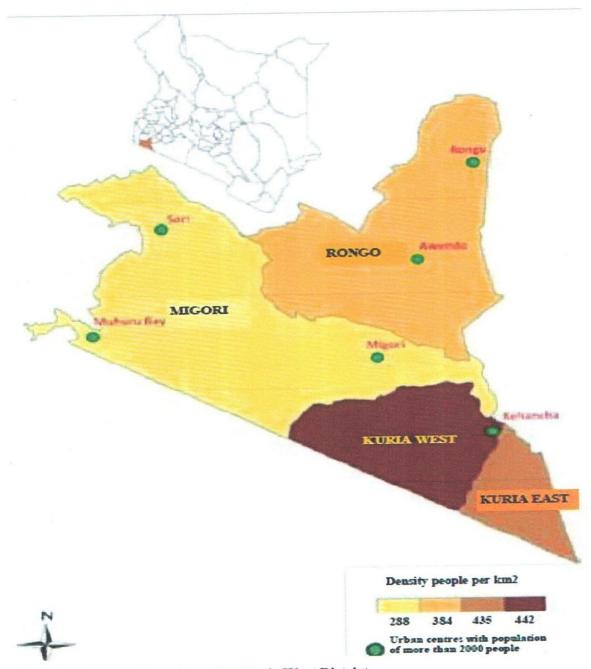


Figure 3.2 Map of Kenya Locating Kuria West District

3.3 Research Design

The study used an exploratory, qualitative approach using descriptive survey design to assess the reasons for persistence of female circumcision in the study. Descriptive survey designs are used in exploratory studies that allow researchers to gather information, summarize, present and interpret for the purpose of clarification. In this study descriptive survey would enable the researcher to meaningfully describe a distribution of scores or measurements using few indices or statistics (Mugenda and Mugenda, 1999). Qualitative data are concerned about the individual's social worlds where specific behaviour, such as belief systems among the Abakuria, is examined. Data are in the form of words, sentences, paragraphs and observations which are gathered in this research by means of unstructured questionnaires and in-depth interviews

The study aimed at collecting information from women who are target of female circumcision among the Abakuria community. The data collected were analysed to inform the study objectives on factors that make girls and women go for female circumcision among the Abakuria. The study focused on the area of study to probe into the actual situation in Kuria and diagnose the factors that lead to female circumcision in order to support recommendations for interventions to eliminate the practice.

3.4 Unit of Analysis

This study focused on the woman as a unit of analysis and is the target of circumcision among the Abakuria community. To the Abakuria, a woman is any female who is of age and has undergone the required cultural rite of passage, in this case female circumcision and hence has transitioned from childhood to adulthood. This study assessed sociological factors that lead to female circumcision; challenges faced by women who choose to go for alternative rite of passage among the Abakuria community. The respondent was a woman from the Abakuria community between ages 10 to 36 years who filled in the questionnaire. Female circumcision is considered secretive, sacred and touching on one's personal life; as such needing personal consent to respond to the questions in the study. Only women who were willing to give information were involved in the research study within the area. The questions focused on ones experiences or knowledge regarding circumcision and understanding of alternative interventions as rites of passage.

The interview schedule was conducted by the researcher and occasional use of study guides to support interpretation of questions in Kuria language. The older women above 18 years

were among the key informants, among those willing to participate in the study. The older women furnished the study with data pertaining to themselves and their peers as well as other adults in their surrounding environment. The older women were preferred because they influence decisions that girls make as they reach the period of initiation that makes the onset of cultural rituals and ceremonies. The older women and other adults in the community are expected to oversee the continuation of traditional customs and norms of the community.

3.5 Sample Size

This study applied the normal approximation to the binomial distribution of the target population in the area of study. The target population was a Kuria woman who has participated in ceremonies of transitioning from childhood to adulthood among the Abakuria. The accessible population was a woman considered to be of age and has fulfilled rituals among the Abakuria community. This study applied approximate calculations from the available statistics that are given in the GoK Population Census (1999). Nyamataburo is one of the sub locations in Bukira West Location with a population of 1983 where male are 976 and female are 1004. According to Mugenda and Mugenda (1999) a sample size of 10% of the accessible population is enough for a descriptive study and therefore this study sampled out 100 respondents. The study focused on a Kuria woman who is of age and between 10 and 36 years. This group has been initiated into the Abakuria cultural rite of passage through female circumcision. A sample size of 100 women was used in the study. Some respondents' who were willing to participate in the study were identified as key informants and were taken through an in-depth interviews to understand issues on cultural norms, values and rituals related to practice of female circumcision. The purposive random sampling was used as it is a non-probability method. Subjects targeted were from Maranatha Assemblies, Pentecostal Evangelical Fellowship Assemblies Church (PEFA) religious institutions which are the predominant faiths and the market center in the study area. This however may not represent a good cross section of the entire Kuria population.

3.6 Sampling Procedure

Samples were drawn using both probability (random) i.e. simple random sampling and non-probability (non-random) i.e. purposive sampling procedures to access the target population for the study. The study applied the random sampling technique where the subjects within the area had equal opportunity of being selected to respond. The study area has five main religious institutions namely: Maranatha Assemblies, PEFA, Catholic, Seventh Day Adventist(SDA) and the Anglican Church. The leaders of the two faiths: Maranatha

Assemblies and PEFA agreed to have their faithful participate in the study. They were receptive due to the fact that their churches have been used as rescue centers for the girls who escape from female circumcision from their homes. The respondents were sampled from four churches of Maranatha Assemblies, PEFA and market centre of Nyamataburo within the study area. A sample of data was selected at random to analyze in order to understand this concern on factors that make female circumcision persistent among the target population. It also used purposive sampling in the churches and market place where samples were purposefully selected to allow for a focused review to identify patterns or trends on the purpose of the study.

Due to the nature of the study topic that is surrounded by secrecy and sacredness, recruiting of respondents was done in consultation with the local administration and church leaders and thus purposive sampling was a better option. The key informants were among the respondents, and as a woman among the Abakuria community she is bestowed adult responsibility either in the family or society. In the society, the adult women are expected to understand core issues regarding social expectations and rituals; hence their role of socializing and imparting cultural values and norms to the young is bestowed upon them.

The researcher used the services of study guides who were drawn from the Abakuria community and reside in the study area of Bukira West Location. The locality is vast and the number of target respondents in target areas who may be willing to disclose rituals was unknown. With support from local churches and administration in the study area, the women willing to participate in the data collection were identified to fill the questionnaire. This was done in four churches and market centre from the surrounding environment in the study area. The churches and market center provided accessibility to the respondents who were talked to by the church leaders, local administration and researcher. They were asked for consent before the questionnaires were issued out. Among the targeted respondents of the in-depth interview were seven (7) Sunday school teachers, three (3) untrained teachers two (2) circumcisers, three (3) business women, three (3)farmers and housewives and two (2)volunteers to the rescue centers.

3.7. Methods of Data Collection

In this study, purposive sampling was used to reach women willing to divulge information on cultural rituals because it is considered taboo to share the same. The women interviewed were in churches, hence enabling the researcher and study guides to administer the tools conveniently. This was expected to increase the reliability of the data collection.

This study applied two methods to collect data. The instruments administered for collecting data from the field were questionnaires and key informant interviews. To ensure confidentiality, the respondents were informed of the purpose of the research and were prohibited from writing their names on the questionnaires. They were reassured that their names would not be included anywhere in the interview process.

It was expected that the questionnaire and interview schedule would be adequate to collect the intended data for the study. The key respondents were women of ages10 to 36 years who filled the questionnaires. The women who are above 18 years responded to question guide in the interview schedule to collect data that would supplement response from the other respondents. This would clarify aspects relating to cultural rites of passage among the Abakuria. Since approximately 70% of the population in the study area comprise of the Abakuria community GOK (2008). The researcher used English and where necessary Kiswahili language was used to collect data from respondents who were not quite conversant with expressing themselves in English. The common language of communication among the community living in this region is Kikuria and Kiswahili. This is shared across the border of the Republic of Tanzania and Kenya where both countries use it as a national language and a mode of communication.

The questionnaire was filled by women of ages 10 to 36 years and was used to collect data quickly; all respondents were given the opportunity to provide feedback. Feedback was generally anonymous to encourage openness and honesty. The reasons for the research made known to the respondents. Aspects of confidentiality were shared and those who gave their consent participated in the study. The researcher availed the questionnaire to willing women from the identified churches in the study area. The questionnaires enhanced the accuracy of the study (Mugenda and Mugenda 1999).

The interview schedule was guided by questions shared with women who are above 18 years. The questions focused on ones experiences and knowledge regarding female circumcision and alternative rites, and it allowed face-to-face interaction. Interview schedules were preferred because it was expected that some respondents may not be literate and it would help

to gather verbal and non-verbal communication regarding the rites of passage. This offered an opportunity to ascertain the validity of the data collected. It therefore gave the study a better insight on the factors that encourage female circumcision, challenges and consequences that women face in regard to rites of passage. It offered the researcher the opportunity to create rapport, explain the purpose of the study and meanings used which may not have been clear to the key informant(Mutai, 2000). The interview schedule enhanced the reliability of data collected and allowed a richer feedback that provided explanation to what happens and respondent's opinion, attitudes, feelings and perspective. The questionnaire method was applied alongside the interviews.

3.8 Methods of Data Analysis

The study used qualitative and quantitative methods of data analysis. The quantitative data collected from the questionnaire by the key respondents were coded and keyed in using SPSS (Statistical Package for Social Sciences). Qualitative data analysis was analysed using descriptive statistics and conventional data analysis based on generalization and interpretation. Consequently the results were aimed at in-depth insight of the accessed population, than generalizing to the population (Kay, 1997).

Frequency distribution tables and graphs were used to analyze the various factors, challenges and consequences that affect girls and women who preferred female circumcision as a rite of passage despite having alternative interventions as an option among the Abakuria. Finally percentage scores were applied to responses where necessary. Various statistics overlapped, as found necessary during the analysis were used to explain the outcomes of the study.

CHAPTER FOUR RESULTS AND DISCUSSIONS

4.1 Introduction

This chapter presents results of all the data gathered. The study identified, analyzed, presented and evaluated the sociological factors that lead girls to undertake female circumcision despite having alternative interventions as rites of passage among the Abakuria community. The findings from the data analysis done are presented in form of percentage scores, frequency tables and graphs. The research was conducted on a sample of 100 women. However, out of the issued questionnaires which were duly filled in making a response rate of 100%. This percentage is adequate for statistical reporting. Mugenda and Mugenda (1999) recommended a response rate of 50% and above as for data analysis.

4.2 General Information of the Respondents

The respondents furnished information regarding their age and education status. The social demography shades light on their personal background and aspects that affect this cohort. This data was important so as to infer factors that lead girls to go for female circumcision in place of alternative intervention offered as cultural rites of passage. The women's response is a reflection of their participation in rites of passage among the Abakuria community. The age and education level would determine their level of knowledge on aspects of rituals and ceremonies that women are subjected to among the Abakuria.

4.2.1 Age

The study sought to find out the age of the respondents. The findings are shown in the table 4.1 below

Table 4.1 Respondents' Age

Age of Respondent	Frequency	Percentage
10 -12 years	3	3.0%
13 -15 years	30	30.0%
16 -18 years	22	22.0%
19 -21 years	18	18.0%
22 – 24 years	10	10.0%
25 – 27 years	6	6.0%
28 - 30 years	5	5.0%
31 - 33 years	3	3.0%
34 - 36 years	3	3.0%
Total	100	100.0%

From the findings of the study, most of respondents (30%) indicated that they were in the age bracket of 13 to 15 years, 22% indicated 16-18 years as their age bracket while 18% and 10% indicated 19-21 years and 22-24 years as their age bracket respectively. This implies that majority of the respondents were in the age group of between 13-24 years and thus they had sufficient knowledge to participate in the study.

4.2.2 Education Level

The study sought to find out the level of education of the respondents. This is further illustrated in the figure 4.1 below.

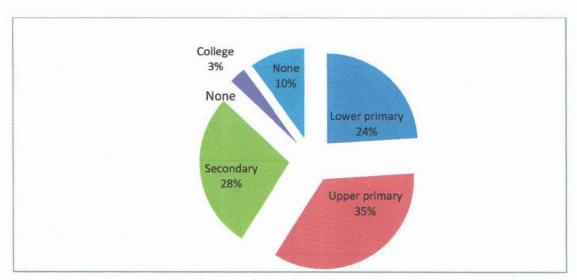


Figure 4.1 Education Level

From Figure 4.1 above, majority of the respondents (35%) had upper primary as their highest level of education, 28% had secondary education as their highest level of education while 24% had lower primary as their highest level of education. This implies that majority of the respondents had upper primary and secondary education and thus they had sufficient understanding of the reasons as to why women and girls opted to undergo female circumcision despite the available alternative interventions among the Abakuria community.

4.3 Factors influencing Participation in Female Circumcision

The study in this area sought to establish the Factors influencing Participation in Female Circumcision.

4.3.1 Where Circumcision Takes Place

The study sought to find out where circumcision takes place. The findings are illustrated in the figure 4.2 below

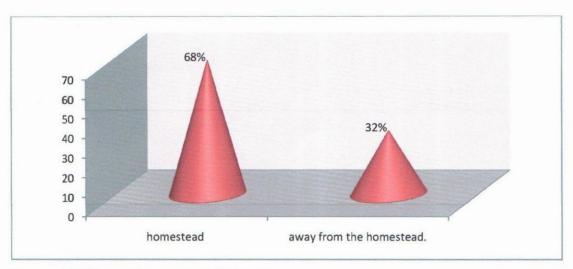


Figure 4.2 Where Circumcision Takes Place

From Figure 4.2above, majority of the respondents (68%) indicated that circumcision takes place at the homestead while 32% indicated that circumcision takes place away from the homestead. This implies that circumcision takes place at the homestead.

4.3.2 Types of Rite of Passage

The study further sought to find out if the respondents were aware of different types of rites of passage that mark transition from childhood to adulthood. The results are shown in the table 4.2 below

Table 4.2 Awareness of Types of Rituals

Types of Ceremony	Frequency	Percentage
Female Circumcision	67	67%
Alternative Rites of Passage	33	33%
Total	100	100

From the findings of the study, majority of the respondents (67%) indicated Female Circumcision as the rites of passage they were aware of while 33% indicated that they were aware of other alternative Rites of Passage. The findings implies that Female Circumcision was the rites of passage they that majority of the respondents were aware of.

4.3.4Age for Female Circumcision

The study sought to know the age at which circumcision was carried out. The results are shown in the table 4.3 below

Table 4.3 Circumcision Age

Age in Years	Frequency	Percentage
10 years	05	5
12 years	28	28
13 years	50	50
14 years	10	10
15 years	05	5
16 years	02	2
Total	100	100

From the findings of the study, majority of the respondents (50%) indicated that girls were circumcised at the age of 13 years, 28% indicated that girls were circumcised at the age12 years 10% indicated that girls were circumcised at the age of while girls of age of 14 years. This implies that majority of the girls among the Abakuria are circumcised between the ages of 12 years and 14 years. The study also sought to found the reasons why girls go for circumcision at that age. The respondents indicated that girls go for circumcision at that age because they wanted to be called adults which in turn improve their status since they assume adult responsibilities such as marriage; they are endowed with other benefits which adults are entitled to such as acceptance and respect from the family and Parents ensured that their girls went for circumcision to fulfill the societal requirement.

4.3.5 Who decides on Girls' Circumcision?

The study in this area sought to identify those who influenced the girls to go for female circumcision. The findings are shown in the figure 4.3 below

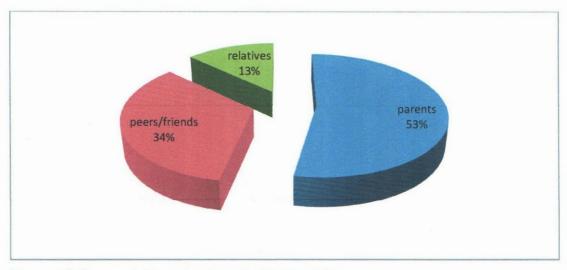


Figure 4.3 Persons influencing Female Circumcision

From the findings of the study, majority of the respondents (53%) indicated that parents influenced the girls to go for female circumcision, 34% indicated that girls were influenced to go for female circumcision by their peers/friends while 13% indicated that girls were influenced to go for female circumcision by their relatives. This implies that parents and peers/friends influenced the girls to go for female circumcision among the Abakuria.

4.3.6 Factors Encouraging Female Circumcision

The study sought to find out the factors that encouraged girls and women to go for female circumcision among the Abakuria. The results are in the table 4.4 below

Table 4.4 Factors Encouraging Female Circumcision

Factors for Female Circumcision	Frequency	Percentage
Reduce immorality	15	15
Required Cultural Rite to passage	27	27
To be an adult and get married in the community	58	58
Total	100	100

From the findings of the study, majority of the respondents (58%) indicated that girls and women went for female circumcision among the Abakuria so as to be an adult and get married in the community, 27% indicated that girls and women went for female circumcision among the Abakuria because it was a Cultural Rite of passage while 15% indicated that girls and women went for female circumcision among the Abakuria to reduce immorality. This

implies that that girls and women went for female circumcision among the Abakuria because it was a Cultural Rite of passage and to enable them get married in the community.

4.4 Challenges Faced on Choice of Rite of Passage

The study in this area sought to establish the challenges faced by those who went for an alternative rite of passage.

4.4.1 Consent to go for Female Circumcision

The study sought to find out whether the respondents consulted their parents on their decision to go for circumcision. The findings are shown in the table 4.5 below

Table 4.5 Consent from Parents

Response	Frequency	Percentage
Yes	67	67
No	33	33
Total	100	100

From the findings of the study, majority of the respondents (67%) indicated that girls consulted their parents when going for circumcision while 33% of the girls did not consult their parents. This implies that parents were consulted before girls goes for circumcision.

4.4.2 Current Decision on Rites of Passage

The study further sought to find out whether the respondents would still go through female circumcision as the rite of passage if given a chance. The results are indicated in figure 4.4 below

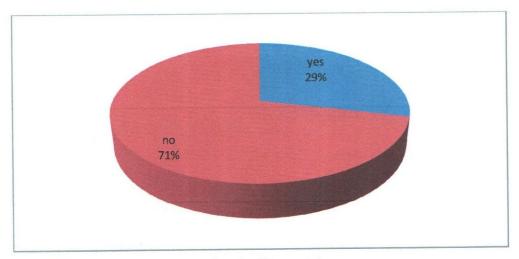


Figure 4.4 Current Decisions on female Circumcision

From the findings of the study, majority of the respondents (71%) indicated that they would not go through female circumcision as the rite of passage if given a chance. This implies that majority of the people among the Abakuria had known the dangers of female circumcision and thus they would not go through it as a rite of passage even if they were given another chance.

4.4.3 Reasons for Avoiding Female Circumcision

The study also sought to find out the reasons for avoiding and resisting female circumcision. The results are indicated in the table 4.6 below

Table 4.6 Reasons for Resisting Female Circumcision

	Frequency	Percentage
It is very painful and one can bleed to death	26	26
One can be punished for going for circumcision	03	3
Prohibited by church	17	17
Can cause diseases and other complication	42	42
Not mandatory	12	12
Total	100	100

From the findings of the study, most of the respondents (42%) indicated that they resist Female Circumcision because it causes diseases and other complication, 26% indicated that it is very painful and one can bleed to death while 17% indicated that they resist Female Circumcision because it is prohibited by church and 12% indicated that they resist Female

Circumcision because it is not mandatory. This implies that Female Circumcision is resisted because it causes diseases and other complication, it is prohibited by church and it's not mandatory.

4.4.4 Consequences for Choosing Alternative Rite

The study further sought to find out the consequences faced for choosing alternative rite of passage other than female circumcision. The results are shown in Table 4.7 below.

Table 4.7 Consequences for Choosing Alternative rite of passage

Consequences for choosing ARP	Frequency	Percentage
They are abused and mocked	49	49
They are forced to be circumcised by community members	09	9
Nobody will marry those who don't circumcise	29	29
No consequences for ARP, we are told not to go	13	13
Total	100	100

From the findings, most of the respondents (49%) indicated that those who choose alternative rite of passage other than female circumcision were abused and mocked, 29% indicated that nobody would marry them while 13% and 9% indicated that there were no consequences and they are forced to be circumcised by community member's respectively. This implies that those who choose alternative rite of passage other than female circumcision were abused and mocked and nobody would marry them.

4.5 Laws against Female Circumcision

The study in this area sought to establish the Laws against Female Circumcision

4.5.1 Knowledge of Laws Forbidding Female Circumcision

The study sought to find out whether the respondents knew any laws that forbid female circumcision. The results are shown in Figure 4.5 below

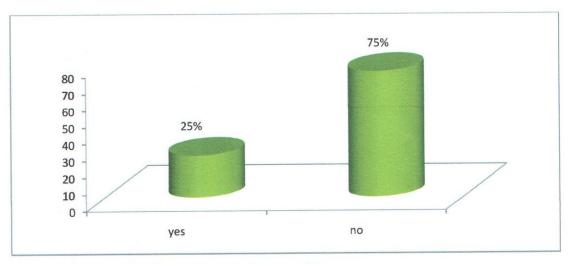


Figure 4. 5 Laws that Forbid Female Circumcision

From the findings, majority of the respondents (75%) indicated that they did not know any laws that forbid female circumcision with only 25% agreeing that they were aware of laws forbidding female circumcision. This implies that majority of the respondents among the Abakuria do not know any laws that forbid female circumcision. The study further sought to establish whether the respondents who indicated that they were aware of laws forbidding female circumcision knew the sections of those laws that forbid female circumcision. The findings are indicated in table 4.8 below

Table 4. 8 Sections of the law that forbids female circumcision

	Frequency	Percentage
Circumcision of girls is not allowed	40	40
That Girls should be educated instead	60	60
Total	100	100

From the findings, majority of the respondents (60%) indicated that Girls should be educated instead as the Sections of the law that forbids female circumcision while 40% indicated female circumcision of girls is not allowed as the Sections of the law that forbids female circumcision.

4.5.2 Source of Information on Laws against Female Circumcision

The study in this area sought to establish where the respondents got information about the law against female circumcision. The results are indicated in figure 4.6 below

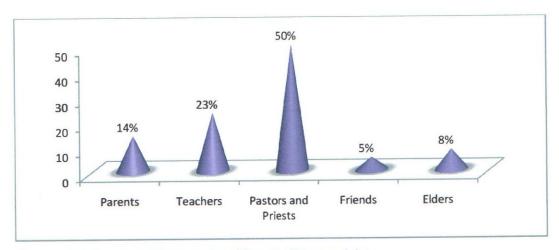


Figure 4. 6 Source of Law against Female Circumcision

From the findings, majority of the respondents (50%) indicated that got information about the law against female circumcision from pastors and priests, 23% from teachers. 14% got information about the law against female circumcision from parents while 8% and 5% from elders and friends respectively. This implies that pastors and priests were source of information about the law against female circumcision among the Abakuria.

4.5.3 Penalty for Practicing Female Circumcision

The study sought to find out if there were any persons in the community who had been punished for taking their daughters for female circumcision. The results are shown below in Figure 4.7 below

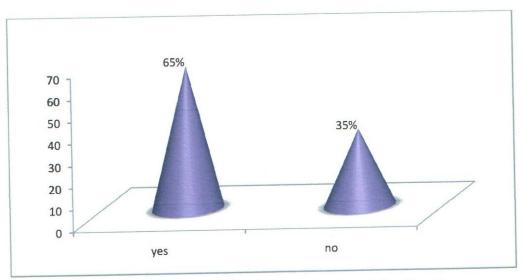


Figure 4.7 Percentage of Persons Punished For Circumcision Practice

From the Figure above, majority of respondents (65%) indicated that there were persons in the community who had been punished for taking their daughters for female circumcision while 35% indicated that there were no persons in the community who had been punished for taking their daughters for female circumcision. This implies that Abakuria community punishes people for taking their daughters for female circumcision.

4.6 Alternative Interventions for Female Circumcision

The study in this area sought to establish the Alternative Interventions for Female Circumcision

4.6.1 Alternative Interventions for Rites of Passage

The study also sought to establish whether there were alternative rites of passage as interventions through which one could participate in to when moving from childhood to adulthood. The results are shown below in Figure 4.8

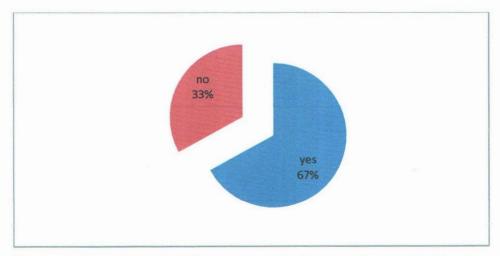


Figure 4.8 Knowledge of ARP as Alternative Intervention to Adulthood

From Figure 4.7 above majority of the respondents (67%) indicated that there were alternative rites of passage as interventions through which one could participate in to when moving from childhood to adulthood. This implies that Abakuria communities were aware of alternative rites of passage as interventions through which one could participate in when moving from childhood to adulthood.

4.6.2 Meaning of Alternative Rite of Passage

The study in this area sought to find out whether the respondent understood the meaning of alternative rites of passage. The results are indicated in table 4.9 below

Table 4.9 Meaning of Alternative Rite of Passage to Women

	Frequency	Percentage
None response	16	16
Where one goes to church or place and taught to be a woman	16	16
One goes to a relative taught custom without getting cut	58	58
one goes to a relative taught eastern without getting ear	26	26
Total	100	100

From the Table above, majority of the respondents (58%) understood alternative rites of passage as where one goes to church or other places and taught to be a woman, 26% understood alternative rites of passage as where one goes to a relative and she is taught custom without getting cut while 16% did not understand what alternative rites of passage was.

4.6.3 Persons Advocating for Alternative Rite of Passage

The study also sought to find out whether there were persons propagating for alternative rite of passage as transition method from childhood to adulthood for girls among the Abakuria community. The results are shown in the table 4.10 below

Table 4.10 Persons Advocating for Alternative Rite at Community Level

	Frequency	Percentage
Parents	14	14
Teachers	30	30
Pastors and Priests	47	47
Elders	09	9
Total	100	100

From the findings, most of the respondents (47%) indicated that Pastors and Priests were persons propagating for alternative rite of passage as transition method from childhood to adulthood for girls among the Abakuria community, 30% indicated teachers while 14% and 9% indicated that Parents and Elders as the persons propagating for alternative rite of passage as transition method from childhood to adulthood for girls among the Abakuria community. This implies that Pastors and Priests were persons propagating for alternative rite of passage as transition method from childhood to adulthood for girls among the Abakuria community.

4.7 Government's Role in Eliminating Female Circumcision

The study further sought to find the role of the government in eliminating FC in Abakuria community. The findings are shown in table 4.11 below

Table 4.11 Government's Role in Eliminating Female Circumcision

and the second of the second o	Frequency	Percentage
Educate people to know the dangers of circumcision	68	68
Punish heavily those who force their daughters to be cut	32	32
Total	100	100

From the findings of the study, majority of the respondents (68%) indicated that the government role in eliminating FC in Abakuria communitywas to educate people to know the dangers of circumcision while 32% indicated that the government role was to punish heavily

those who forced their daughters to be circumcised. This implies that the government role in eliminating FC in Abakuria communitywas to educate people to know the dangers of circumcision and to punish heavily those who forced their daughters to be circumcised.

4.8 DISCUSSION OF THE FINDINGS

The study found out that majority of the respondents were in the age group of between 13-24 years and thus they had sufficient knowledge to participate in the study. The study further found out that majority of the respondents had upper primary and secondary education and thus they had sufficient understanding of the reasons as to why women and girls opted to undergo female circumcision despite the available alternative interventions among the Abakuria community.

The study also established that circumcision takes place at the homestead. The findings therefore agrees with (MOH /GTZ 2000:2) who observed that Home is the first socializing institution in one's life and this is where one learns to be a member of a family by accepting what is taught and emulating the norms and values imparted on them. The place where cultural rituals take place influences an individual's decision. The study also found out that Female Circumcision was the rites of passage they that majority of the respondents were aware of. This agrees with MYWO & PATH (1996), who cited that the community views female circumcision as a forum for initiates to be taught culture and traditional way of life. Whatever they are subjected to is internalized unquestionably and cannot be easily change. This explains the high numbers of girls and women being encouraged to go for female circumcision. From the study therefore it is important to note that socialization plays a key role in decisions made regarding the form of rite of passage. The cultural belief system is entrenched to the extent that families cannot exempt any family member ad especially the growing girl child from undergoing circumcision. In the process of socialization, the naïve girl child interacts with her siblings, parents and entire family members, through this they acquire values, moral and norms associated with their family. The Abakuria community is a closely-knit and self-perpetuating entity that surpasses the individual members who compose it, hence the importance of its cultural identity to its members.

The study also found out that majority of the girls among the Abakuria are circumcised between the ages of 12 years and 14 years. This study concurs with what Chebet (2009) who cited that the practice is performed mainly on children who are below the age of consent and

often have no say in the matter. She observed that more often than not, the victim has no right in deciding whether or not to be cut or circumcised. It is usually the parents and other adults who decide on what to expose the child to.

The study found out that girls personally choose to be circumcised; peers and parents influenced girls to get circumcised while others girls choose it because it's their culture which they had to adhere to. The community also views female circumcision as a forum for initiates to be taught culture and traditional way of life, the cultural belief system is entrenched to the extent that families cannot exempt any family member ad especially the growing girl child from undergoing circumcision, in the process of socialization, the naïve girl child interacts with her siblings, parents and entire family members and through this the girls who get circumcised acquire values, moral and norms associated with their family. This concurs with of MYWO and PATH, 1996 who observed that in aspects of decision-making regarding circumcision. Among the Abagusii and the Maasai, it is clearly a decision made by the parents. Conversely, among the Meru, and to a lesser extent the Kalenjin, the majority of girls and women who had already been cut indicated that they were the ones who made the decision. For girls who are above 12 years and are participating in circumcision, decisions may be made by the individual child or other adults within their environment.

The study found out that girls and women went for female circumcision among the Abakuria because it was a Cultural Rite of passage and to enable them get married in the community. These findings concur with what Toubia, (1995) who explains female circumcision as a rite of passage or a transition from childhood to adulthood and an important mile stone for a member of a community. It is a sacred ritual through which women after being circumcised earn respect and are accepted as part of the society. This is coupled with the cultural demands and a need to belong to a group of people because it gives one an identity. Other justifications given in favor of continuation of the practice, is mainly tradition is by far the most commonly mentioned reason.

The study further found out that parents were consulted before girls goes for circumcision. The study findings agree with Coleman (1990) who said that there are women and girls who would obey norms that lead them to act in non-self-interested ways. This explains why girls make decisions and consult because they have a lot of consideration for the 'significant others' who are parents and relatives as well as peers in the community. The further found out that majority of the people among the Abakuria had known the dangers of female

circumcision and thus they would not go through it as a rite of passage even if they were given another chance.

The study also found out that Female Circumcision is resisted because it causes diseases and other complication, it is prohibited by church and it's not mandatory. The findings concur with Koso-Thomas, (1995) who explains that female circumcision can result in long-term physical effects. Slow or incomplete healing leaves abscesses, painful cysts and thick, raised scars called keloids. These in turn can cause problems in later stages, including in pregnancy and childbirth. This is also echoed by Shell-Duncan (2000) who argues that there are more physical damage resulting from female circumcision, together with the psychological trauma and pain associated with it that can compromise an adult woman's normal sexual life. The respondents may not know of these because those who go through circumcision are sworn into secrecy and may not share the actual effects of the process.

The study also established that those who choose alternative rite of passage other than female circumcision were abused and mocked and nobody would marry them. The above findings concur with Chebet (2009) who found out that mental pressure is enforced in such ways as rejections, derogatory songs, instillation of fear and unknown curses and evocation of ancestral wrath for those who do not conform to circumcision. However, those who are encouraged to avoid circumcision are supported by adults and the church. The alternative intervention gives the initiates knowledge and skills accompanied by rituals considered appropriate for rite of passage and befitting customary requirement that would be valued as way of life for the Abakuria people.

The study also established that majority of the respondents among the Abakuria do not know any laws that forbid female circumcision. This agrees with Omondi (2007), who said that it is not just enough to have these laws; it requires an integrated approach that would be in line with the political, legal and social acceptance. The study shows that despite the law being part and parcel of one's constitutional right, people do not understand the implication of these laws. The response from the women focused on education as a way to eliminate female circumcision. Being educated means going to school, hence less time to participate in cultural rites of passage that opens ways for other social responsibilities as marriage and therefore loss of opportunity to pursue education and its benefits. To the women, education helps them to make decisions regarding rituals and deters them from being coerced into circumcision and

subsequently early marriage. This study further suggests that, if the target women have higher levels of education, they may be in a position to make personal decisions regarding rites of passage.

The study also established that pastors and priests were source of information about the law against female circumcision among the Abakuria. They have taken responsibility to sensitize the community about alternative interventions and the need to eliminate circumcision. Mobilization and sensitization done by the churches in collaboration with other agencies, the government Departments of Gender and children and Social Development on the need to eliminate female circumcision practice. This agrees with Chebet (2009) who said that the efforts by the Government and organizations offering alternative interventions have not been in vain, as more girls seek refuge in churches to escape circumcision. It is an indication that alternative interventions are being embraced by the community, as crucial aspects of culture; core values, norms and education that completes the initiation (teaching) and public ceremony which stimulate the traditional practice except the cut (Chebet, 2009). This means that the women don't feel disadvantaged from their peers who insist on going for circumcision and sometimes they pressurize their friends until one feels obligated to be circumcised.

The study also established that Abakuria community punishes people for taking their daughters for female circumcision. These findings concur with what Nyachwani (2010) says about the Abakuria community, that they practices female circumcision as if it was never outlawed. It is apparent that there are still families who take their daughters for the 'cut' even when it is a punishable crime. This implies that efforts need to focus on more adult in order to harness for more support in elimination of female circumcision. As initiates, women are sworn into secrecy so that the pain and ordeals associated with the procedure of circumcision will not be discussed, especially with uncircumcised women. The beliefs behind cultural practices are deeply entrenched that it is compounded with fears; the fear of the unknown through punishment by God, ancestral curses, and other supernatural powers is instilled in them, as shown in a study done by MOH/GTZ and Population Council (2004).

The study also found out that the Abakuria community was aware of alternative rites of passage as interventions through which one could participate in when moving from childhood to adulthood and that Pastors and Priests were persons propagating for alternative rite of

passage as transition method from childhood to adulthood for girls among the Abakuria community. These findings concur with (Chebet, 2009)who said that Alternative ritual is a process which avoids genital cutting but maintains the essential components of female circumcision, such as education for the girls on family life and women's roles and responsibilities, exchange of gifts, celebration, and a public declaration for community recognition. The findings from the respondents that one goes to church or to a relative mimics the traditional practice whereby girls are put in seclusion immediately after being circumcised and are taught by an aunt or other relative or friend (who is slightly younger than the girl's mother) about women's roles, cultural values and sexuality, the girls going through the alternative ritual also undergo three to five days of 'seclusion' with teachings on family life skills, community values and reproductive health.

Lastly, the study found out that the government role in eliminating FC in Abakuria communitywas to educate people to know the dangers of circumcision and to punish heavily those who forced their daughters to be circumcised. These findings reinforce the opportunity that the government has in elimination of harmful practices among communities in Kenya. The efforts to implement penalties on those who break the law by taking their daughters for circumcision is on course. Education is seen as an important factor in the abandonment of female circumcision in Kuria, with schools providing a valuable forum in which to address concerns of circumcision. The findings indicate that elimination of female circumcision is a government's key role in collaboration with all stakeholders working through schools and churches by enhancing the capacity of teachers and church leaders to help them overcome social inhibitions by discussing female circumcision with girls at all levels. The Child's Right (2001) encourages all communities to protect all children from harmful practices that include female circumcision.

CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This chapter presents the summary of the findings, conclusions and recommendations of this study

5.2 Summary of the Findings

The study found out that majority of the respondents were in the age group of between 13-24 years and thus they had sufficient knowledge to participate in the study. The study further found out that majority of the respondents had upper primary and secondary education and thus they had sufficient understanding of the reasons as to why women and girls opted to undergo female circumcision despite the available alternative interventions among the Abakuria community.

The study also established that circumcision takes place at the homestead and that majority of the girls among the Abakuria are circumcised between the ages of 12 years and 14 years. The study found out that girls personally choose to be circumcised; peers and parents influenced girls to get circumcised while others girls choose it because it's their culture which they had to adhere to.

The study further found out that parents were consulted before girls goes for circumcision and that Female Circumcision is resisted because it causes diseases and other complication, it is prohibited by church and it's not mandatory. The study also established that those who choose alternative rite of passage other than female circumcision were abused and mocked and nobody would marry them. The study further established that majority of the respondents among the Abakuria do not know any laws that forbid female circumcision.

The study also established that pastors and priests were source of information about the law against female circumcision among the Abakuria. They have taken responsibility to sensitize the community about alternative interventions and the need to eliminate circumcision. Mobilization and sensitization done by the churches in collaboration with other agencies, the government Departments of Gender and children and Social Development on the need to eliminate female circumcision practice.

The study also established that Abakuria community punishes people for taking their daughters for female circumcision and that the Abakuria community was aware of alternative

rites of passage as interventions through which one could participate in when moving from childhood to adulthood and that Pastors and Priests were persons propagating for alternative rite of passage as transition method from childhood to adulthood for girls among the Abakuria community.

The study also found out that the government role in eliminating FC in Abakuria communitywas to educate people to know the dangers of circumcision and to punish heavily those who forced their daughters to be circumcised.

5.3 Conclusion

This study concludes that female circumcision is viewed by the Abakuria community as part and parcel of their culture and it is held dearly by women in the community. Culture therefore plays a crucial role in the persistence of female circumcision practice among the community. The community still has a negative attitude towards the uncircumcised girl being referred to as 'msagane'. This was established to be the reason why girls tried as much as possible to belong and therefore even ran away from home and financed their own circumcision to avoid being stigmatized and isolated both in school and in the society. It was also established that this was further aggravated by the fact that uncircumcised girls were not likely to get husbands within the community.

In this study it is true to say that most of the women were circumcised between the ages of 12 years and 14 years, by the time they turned 16 years they are already circumcised. The reasons for circumcision at the age are because they wanted to be called adults and thus improve one's status as they assume adult responsibilities. One is endowed with status and other benefits adults are entitled to such as marriage ability, acceptance and respect for the individual and family involved. Peers and friends influence on decisions regarding circumcision and as a result the girls would want to be accepted and have a sense of belonging.

Parents play an important role in the lives of the children and for this reason girls often consult them on matters relating to growth, development, culture and tradition. Parents are significant and trusted by their children. The girls seek to feel part and parcel of the family and therefore sharing information about one's life, confirmation that they are on track as members of the community, seeking to affirm and understand cultural norms and values is what draws them to seek consent from their parents. If parents understood the benefits of

alternative interventions, they would come out in support of their girls, majority of who state that they would choose to go for alternative rite if they were to be asked now. Girls are openly declaring their stand for alternative rite instead of female circumcision among the Abakuria community

The women and girls among the Abakuria believed that circumcision forms an important part of girls' and women's cultural gender identity. It is found to be deeply rooted in their culture and even those who had good education or embraced Christianity still held the practice of female circumcision dear. Culture therefore played a crucial role in the persistence of female circumcision practice among the Abakuria community. Apart from culture, the community's attitude also played a role in the perpetuation of female circumcision. This was evident in the fact that the community still holds a negative attitude towards uncircumcised girls and is constantly referred to as 'msagane' (uncircumcised child). The circumcision procedure imparts a sense of pride, of coming of age and a feeling of community membership. This study therefore concludes that empowerment of girls and women through campaigns and increased access to education and resources would accelerate social change that would hasten the elimination of female circumcision.

This study found out the views of girls who have at least some formal education, this means the girls are most likely to make decisions regarding rituals and ceremonies with support from parents and peers, however the adults who may not have gone to school would still influence the girls decisions in regard to participating in the rite of passage. The exposure of education has a great effect on the individual and can affect how one decides on issues affecting them. The level of education for mothers and other female adults would greatly affect the response of girls in issues regarding female circumcision. The adults in the community, both male and female will benefit from sensitization and empowerment regarding female circumcision.

The study concludes that targeting the adults who educate the girls in the seclusion places can influence the girls' decision on the place where the ritual of female circumcision is performed if the parents refuse and support either way, the girl can be influenced and would most likely follow the decision of their parents, who are significant in their lives. The perception towards alternative intervention is changing and women prefer alternative rite to female circumcision. For this to happen and hasten the process of acceptance, women who choose to abandon circumcision need support from the family and immediate environment in the community.

The role of parents in a child's life is significant and decisions they make in a bid to socialize their children is great.

This study also concludes that the girls are aware that female circumcision is not a mandatory exercise, and further to this there are dangers and harm to those who are exposed to this practice. Therefore if the girls are empowered, the rates of girls who go for female circumcision would be lower.

Despite the study findings that people are aware of the existence of alternative rite of passage, they still take their daughters for female circumcision and have not fully embraced alternative interventions. It was noted that for the community to embrace alternative rite of passage they need to educated about this alternative interventions. The persistence of circumcision practice is as a result of lack of knowledge. The conclusion is that the church plays an important role in educating and sensitizing the community on the laws and its corresponding penalties. It is therefore in order to conclude that churches and schools are the places to begin the mobilization and sensitization of the community on anti- female circumcision campaigns that would support the elimination of female circumcision.

Female circumcision is encouraged by the community because they believe it is the right thing to do for their children. Further to this no action has been taken against those who circumcise their daughters. It is right to conclude that with inadequate data on region specifics, meaningful interventions can be challenging. There is need for effective mobilization and sensitization to all parents, local administration and the community at large to understand the laws against female circumcision and their role in eliminating the practice. It would be effective to target more gatekeepers and circumcisers with information on the government's expectations in line with elimination of female circumcision among the Abakuria community.

In this study, the community equates education to understanding of laws that forbid female circumcision. To this community, when girls are taken to school for education, circumcision will be eliminated because the girls will not graduate and therefore will not be married off and they will not go back to school. The adults believe that if the advocacy and lobbying is done in the community, they will embrace alternative intervention. Families whose children are not attending school are less likely to be involved in activities to learn about female circumcision and the rights of young girls and women. The Abakuria community needs to know about the laws and consequences and penalties for those breaking the law by taking

their daughters for circumcision. In conclusion, more efforts from the government and stakeholders to advocate and campaign can be instrumental in influencing behavior change and awareness. This calls for more civic education on laws and policies regarding elimination of female circumcision.

Education is seen as an important factor in the abandonment of female circumcision because they provide a valuable forum to address concerns of circumcision. A viable way to eliminate female circumcision to have all stakeholders with the government taking lead to work closely with schools and churches, building the capacity of teachers to help them overcome social inhibitions and discuss female circumcision with girls at school level. More efforts can be channelled through the church to reach parents and their children and involve them in activities to learn about female circumcision, rights of young girls and women, laws and penalties regarding female circumcision and their role in eliminating the practice without losing out on their traditions and cultures on norms and values. This study concludes that elimination of female circumcision is most effective when it takes place in structured environment like the school and church. It also requires empowerment and involvement of community ceremonies that gives access the information of alternative interventions. It is with hope that the findings from this study will enable the government's efforts to undertake effective interventions to encourage elimination of female circumcision.

Government's effort in eliminating female circumcision has helped in deterring the practice. Alternative rite of passage is known by the community. This is a clear indication that alternative interventions have gained support and acceptance by communities practicing female circumcision. Despite this acceptance however, the Abakuria community may not fully understand what alternative rite is and may need a lot of mobilization and sensitization of the community through churches, chief's barazas and school meetings. More efforts need to be done to integrate the practice in the community. This findings support the concept that for a more accepted strategy, all stakeholders should be involved in the campaign for alternative rite of passage among the Abakuria community. It is important that those who influence girls to go for circumcision should be the target of campaigns for alternative rites in order for them to embrace the new approach to transition from childhood to adulthood. The study concludes that the community is not quite familiar with strategies and interventions that safeguard their culture. They are fearful of disregarding traditions that give them an identity

and a sense of belonging. There is need for more sensitization of the community; families and gatekeepers on the need to participate in elimination of female circumcision.

5.4 Recommendations of the Study

For alternative interventions to work, programs and strategies targeting community mobilization and sensitization will benefit if they are worked and shared alongside the laws against female circumcision to enlighten the community on the same. Sensitizing the circumcisers on the effect of circumcision on the girl –child and encouraging their involvement in educating the girls on the cultural norms and values would support elimination of female circumcision among the Abakuria.

The study also recommends that more adult female and male in the community to be targeted to lobby for alternative rite of passage, to encourage their young men to accept and marry girls who go for alternative interventions as a way of eliminating female circumcision. The study also recommends that more trainings to target parents and families on through church programs and meetings at school level to enlighten on their participation in alternative interventions and understand their role in enabling the girls to play an active role as healthy women in society

Ensuring that the girl-child is taken to school for education will encourage delay of the age for female circumcision and hence build the resilience and skills of the girls to make effective and informed decisions on circumcision. For interventions to work, the government and other stakeholders will need to work towards targeting change of attitudes regarding the alternative rite of passage as a ritual and ceremony. The government to reinforce the education campaigns on the dangers girls faces by undergoing the female circumcision and measures that have been put in place to encourage alternative interventions.

Recommendations for Further Research

The study recommends that research should be done on the best practice and lessons learned that can encourage alternative interventions that have enabled other communities practicing female circumcision to eliminate the practice among their communities. The study also recommends research to be carried out among the Abakuria community to find out and determine the effect of female circumcision on education and development in order to inform on plausible strategies that can be engaged to eliminate female circumcision. The study recommends research be done on extend of female circumcision medicalization and what government policy is in regard to the same.

REFERENCES

- Agimba, G. (2009). Effects of FGM in Kuria www.clarionkenya.org Accessed on 01/25/2010
- Bandura, A (1977). Social Learning Theory New York: General Learning Press.
 - Bandura, A. (1986). Social Foundations of Thought and Action Englewood Cliffs, NJ: Prentice-Hall.
- Carr, Dara (1997). Female Genital Cutting: Findings from the Demographic and Health Surveys Program, Macro International, Maryland (USA),
- Chebet S. (2009) Dynamics of Traditional Practices: The Case of Tumndo Ne Leel: A Coming of Age concept among the Kalenjin Community of Kenya . Nairobi, Kenya
 - Coleman, J. S(1990) Foundations of Social Theory Cambridge: Belknap
 - Dag-Hammarskjöld-Weg 1-5 65760 Eschborn/Germany
 - Demographic and Health Survey Egypt (1995) Calverton, MD: Macro International Inc
 - Government of the Republic of Kenya (1999) A National Plan of Action for the Elimination of Female Genital Mutilation. Nairobi, Kenya
 - Government of the Republic of Kenya (2001) Children's Act Nairobi: Government Press.
 - Grant, P.J. (1992). The State of the World's Children Oxford: Oxford University Press
- *GTZ (2005) Female Genital Mutilation in Kuria District: Findings of a Baseline Survey.

 GTZ / Kenya Ministry of Health
- GTZ, (2009), Sectoral and supra regional project Ending Female Genital Mutilation
 - Heath, A (1976). *Rational Choice and Social Exchange* Cambridge: Cambridge University Press.
 - Homans, G(1961). Social Behaviour: Its Elementary Forms. London: Routledge and Kegan Paul.
 - Humphreys E, Sheikh M, Njue C, and Askew I (2007) Contributing towards efforts to abandon Female Genital Mutilation/Cutting in Kenya- a Situation Analysis.

 Population Council and UNFPA
 - International Center for Research on Women and The Centre for Development and
 - Izett, S. & N. Toubia (1999), Learning about Social Change: A Research and Evaluation Guidebook using Female Circumcision as a Case Study, Rainb, New York, USA
 - Kay, G.F (1979). The Family in Transition London: David & Charles Publishers Ltd
 - Kay, P. J (1997) Sampling: David & Charles Publishers Ltd, LondonKenya National Bureau of Statistics (1999) Population and Housing Census Nairobi:Central Bureau of Statistics.

- Kenya National Bureau of Statistics (2003) Kenya: Demographic and Health Survey.
 Nairobi: Central Bureau of Statistics
- Kenya National Bureau of Statistics (2006) Kenya Integrated Household Budget Survey. Nairobi: Central Bureau of Statistics.
- Kiragu, K. (1995). "Female Genital Mutilation: A Reproductive Health Concern". Population Reports Supplement. Baltimore, MD: John Hopkins Population Information Program
- KokonyaD. A (2004)Female Genital Cutting/Mutilation (FGM/C) Baseline Survey Report for Garissa District, Kenya, UNICEF, (Unpublished Report)
- Koso-Thomas, O. (1987). The Circumcision of Women: A Strategy for Eradication. London: Dotesios Ltd.
 - Mackie J (2000). Female 'Circumcision' in Africa: Culture, Controversy and Change. Lynne Rienner Publishers London
- Maendeleo Ya Wanawake Organization and PATH (1996)"Qualitative Research Report on Female Circumcision in Four Districts in Kenya" Nairobi: Maendeleo Ya Wanawake Organization
- Mugenda, O. & Mugenda A (1999) Research Methods: Quantitative and Qualitative Approaches. Nairobi: African Centre for Technology Studies
- Mutai, B.K. (2000). How to Write a Quality Research Proposal Edinburgh: Thelley Publications
- Muteshi J and Sass J (2005) Female Genital Mutilation in Africa: An analysis of current abandonment approaches. Program for Appropriate Technology in Health (PATH)
- Newell-Jones et al (2011), Female Genital Mutilation practices in Kenya: The Role of Alternative Rites of Passage: A case study of Kisii and Kuria districts- Research by Feed the Minds and Population Council
 - Njeru, E. &PATH, (1996) "Female Circumcision in Nyeri, Embu and Machakos Districts of Kenya: Report on Key Informant Interviews". Nairobi: Program for Appropriate Technology in Health
 - Norwegian Ministries (2008) *Action Plan for Combating Female Genital Mutilation*: Action Plan 2008-2011, publisher Ministry of Children and Equality
- Nyachwani .S. (2010) *Outlawed but Unbowed:* Publication on East Africa In Focus Accessed in January 30

- Omondi, S.A (2007). Protecting Children from Abuse: Challenges Associated with the Implementation of the Children's Act: CAP 586 of the Laws of Kenya. Nairobi: University of Nairobi-Thesis
- Population Activities (1999) Rites of Passage: Responses to Female Genital Cutting in the Gambia. Accessed on 9/10/2009
- ShandallA.A (1967)"Circumcision and Infibulation of Females,"Sudan Medical Journal, 5:178-212
- Shell-Duncan, Bettina and YlvaHernlundeds, (2000), Female "Circumcision" in Africa: Culture, Controversy and Change, Lynne Rienner Publisher, London
- Toubia, Nahid. (1995.) Female Genital Mutilation: A Call for Global Action. Research
 Action and Information Network for Bodily Integrity of Women (RAINBO) New
 York
 - Trochim,M. K. (2006) *Unit of Analysis*. Social Research Methods www.socialresearchmethods.netAccessed on 24/12/2009
 - U.N. General Assembly (1990) United Nations Convention on the Rights of the Child New York: UN Publishers
 - U.S. Department of State, (June 2001) FGM/C Kenya Country Report, 1
- WNICEF (2005) Changing a Harmful Social Convention: Female Genital Mutilation.
 Innocenti Digest, ABC Tipografia Printers, Sesto Florentino, Italy
- World Health Organization (1995) "Female Genital Mutilation: Report of a WHO Technical Working Group". Geneva: World Health Organization
 - World Health Organization (1997) Female Genital Mutilation, A joint WHO/UNICEF/UNFPA statement, World Health Organization, Geneva, Switzerland
 - World Health Organization (2008), WHO Press, Avenue Appia, Geneva, Switzerland
 - World Health Organization, (June 2000). 'Female Genital Mutilation' Fact Sheet No. 241.

 Accessed on the Web at http://www.who.int/mediacentre/factsheets/fs241/en/ (21 Oct. 2011)
 - World Organization Against Torture (2008) Violence against Women and Children in Kenyawww.omct.org/.../2008/alt_report_on_violence_against_women_children_keny a(Accessed 6 October 2009)
 - Yoder, P. Stanley, Noureddine Abderrahim, and Arlinda Zhuzhuni (2004), DHS Comparative Reports No. 7: Female Genital Cutting in the Demographic and Health Surveys: A Critical and Comparative Analysis, ORC Macro, Calverton, Maryland (USA)

APPENDICES

APPENDIX I QUESTIONNAIRE

001 QUESTIONNAIRE IDENTIFICATION NUMBER
002 QUESTIONNAIRE CHECKED BY PRINCIPAL RESEARCHER
DateSignature
INTRODUCTION: My name is Luciana Chepkoech. I am a Master of Arts student in Sociology undertaking
Community Development and Project Management at Egerton University. We are
interviewing girls here in Nyamataburo Sub Location in Kuria West District in order to find
out about factors that compel girls to go for female circumcision, challenges and
consequences of those who choose alternative rite, and the interventions that can be used to
eliminate female circumcision.
CONFIDENTIALITY AND CONSENT: I am going to ask you some very personal
questions that some people may find difficult to answer. Your answers are completely
confidential. Your name will not be written on this form, and will never be used in
connection with any of the information you tell me. You do not have to answer any question
that you do not want to answer. You may end this interview at any time you want to.
However, your honest answers to the questions will help us better understand the factors that
make girls choose female circumcision, the challenges and consequences girls face when they
go for Alternative Rites of Passage and the role of the government in eliminating female
circumcision. We would greatly appreciate your response to this survey. Would you be
willing to participate?
Yes No
SECTION 1: BACKGROUND CHARACTERISTICS
Q.1. State your age
10-12 years
13-15 years 25-27 years
16-18 years 28-30 years
19-21 years 31-33 years
22- 24 years 34-36 years

Q.2. State the highest level of educati	on you have reached:
Lower primary (Nursery to class 4)	[1]
Upper primary (class 5 to 8)	[2]
Secondary	[3]
College	[4]
SECTION 2: FACTORS FOR FE	MALE CIRCUMCISION
Q.3. State the cultural rite of passage	you know about?
i) Female Circumcision	[1]
ii) Alternative Rites of Passag	ge [2]
Q.4 Explain why you chose the abov	e?
(i)	
Q.5. State the age girls get circumcis	ed in your community?
Q.6 Explain the reasons why girls go	for circumcision at that age?
(i) (ii)	
Q.7. If you were to choose now, wha	at rite of passage would you go for?
Q.8. State where circumcision is don	ne?
At home here in the village	[1]
Away from home	[2]
Q. 9. Explain your response above?	

Q.10. Who decides that one s Parents	should go for female	e circumcision?			
Peers/Friends	[2]				
Relatives	[3]				
Other (specify)					
SECTION 3: CHALLENG	ES				
Q.11Explain the challenges	one faces if they ref	used to be circur	ncised?		
(i)					•
(ii)					
Q.12Explain the harm one go					
(i) (ii)					
(11)					
Q.13 Have you heard of any	laws or rules that for	orbid female circ	cumcision?		
Yes	No				
Q.14. State whom you learned	ed or heard about th	nese laws or rules	s?		
Parents	[1]				
Teachers	[2]				
Pastor/Priest	[3]				
Friends	[4]				
Others (Specify)	[5]				
Q.15. Have you heard of any		mmunity who h		ished for	
taking their daughter for circ	cumcision? Yes		No		
O16 Familia the tame of my	uniahmant aiyan?				
Q16. Explain the type of pu	100 No.				

SECTION 4: ALTERNATIVE INTERVENTIONS

Q.17. State the persons or org	anizations that advocate for Alternative Rites of passage?					
Parents	[1]					
Teachers	[2]					
Priest/Pastor	[3]					
Other (Specify)	[4]					
Q.18. Explain the role of the Government in eliminating Female Circumcision?						
Thank you for your time						

APPENDIX II

INTERVIEW GUIDE FOR KEY INFORMANTS

My name is Luciana Chepkoech, a student at Egerton University. As part of the requirement of the course, I am required to take a research in my area of study. This data is meant to enable research establish the perspective of girls in Nyamataburo Sub Location who go for female circumcision despite alternative rites of passage that is offered in the community. This information will be treated with confidentiality. This research intends to generate data on your view towards Female Circumcision and Alternative Rites of Passage.

Section A -Background of the Key Informant.

1.	Age	
2.	Education level	

Section B:

- 1. State the cultural rite of passage you know?
- 2. State the age at which girls get circumcised?
- 3. Who influences girl's decision to go for female circumcision?
- 4. Explain the factors that make girls go for female circumcision among the Abakuria?
- 5. State the challenges faced by those who go for alternative rite of passage?
- 6. Have you ever heard that female circumcision is prohibited by the government?
- 7. Do you know of anybody punished for taking their daughter for Female Circumcision?
- 8. Are you aware about the alternative rite of passage?
- 9. State the advocates of alternative rite of passage among the Abakuria?
- 10. What would be the role of the government in eliminating FC in this community?

Thank you for your time