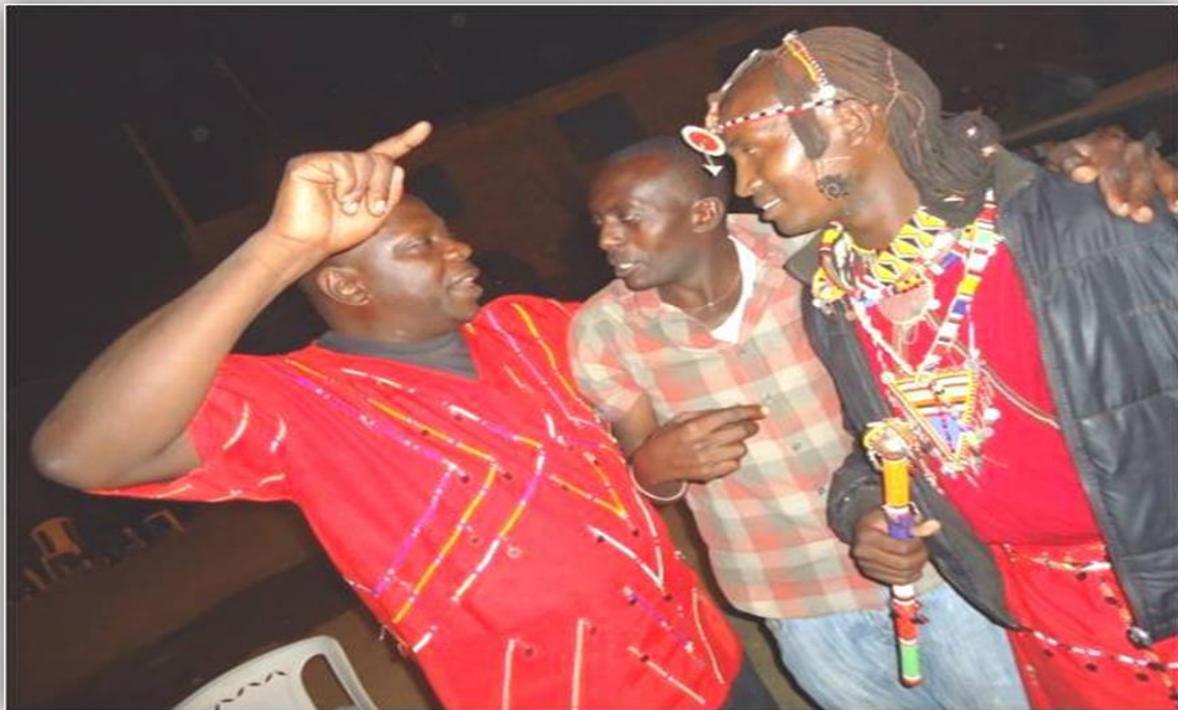




Milele Centre - Kitengela | 3rd Floor, Suit No. 1013/53- | Off Namanga Rd
P.O. Box 281-00515, Nairobi – Kenya | Telephone: +254-712-653-322
Email: coexist@coexistkenya.com | info@coexistkenya.com

The 2012 (Kajiado) FGM Community Assessment Study

FCS 2012



Wanjala Wafula (**Founder, CEO, Coexist Initiative**) poses for a picture with Maasai Elders during a celebration to mark an alternative FGM ritual

Published by:

The Coexist Initiative

© All Rights Reserved (2012) Designed by:

Coexist Initiative

Acknowledgement

The Coexist Initiative wishes to acknowledge the team that undertook the study headed by Dominique Kogo and Veronicah Maingi his Assistant. We appreciate the work of Stephen Probio for his vital insights and for editing this work. We acknowledge all who participated in this ground breaking work

We sincerely thank the Coexist staff and volunteers, particularly Edwin Webala, Moses Aseka, Evelyne Khisa, Beatrice Achulu, Derrick Bwonya, Becky Namarome, Abigail Ayuka Khanakwa and Ganash Sudi for their endless efforts to ensure the completion of this study and successful publication of this report.

We wish to deeply thank several friends of the Coexist Initiative for the financial support towards the carrying out of this study and for the implementation of the Emuratare project in general. We remain permanently indebted to you for bestowing upon us the opportunity to carry out this pioneering work. We thank elders Somoire Keriako, James Paita, Daniel Mpaai, Edwin Taani, Antony Parsaot and Jones Lemomo. Their courage and insights are the reasons behind this report.

You are all APPRECIATED!



Wanjala Wafula
Founder/CEO
Coexist Initiative

Study Summary

A key justification of the study is that FGM is a deeply entrenched practice and efforts to end it must include educating and enlightening all members of society to understand FGM for the harmful and destructive practice it is. Female genital mutilation violates girls' and women's human rights, denying them their physical and mental integrity, their right to freedom from violence, discrimination and in the most extreme cases, their lives. The study goes at length to reflect the deep-rooted inequality between the sexes. FGM represents society's control over girls and women. FGM perpetuates normative gender roles that are unequal and harm girls and women. It violates the rights to health, security and physical integrity of the person, the right to be free from torture and cruelty, inhuman or degrading treatment, and the right to life when the procedure results in death.

FGM and other destructive traditional practices are part of a continuum of socially accepted and morally 'justified' communal actions whose outcomes only the victims know. Parents and community attitudes are mainly influenced by traditional beliefs regarding the ideal roles of women and girls in society and this is where FGM is used as a rational and a justification. Traditionally, the only roles available to women were those of wives and mothers and FGM is the bridge that separates childhood and maturity for Maasai girls.

The study ascertains that female genital mutilation is a social convention governed by rewards and punishments which are a powerful force for continuing the practice. In view of this conventional nature of female genital mutilation, it is difficult for families to abandon the practice without support from the wider community, specifically men and boys who remain largely ignored in FGM programming in Kenya.

While laws at the national level provide a legal platform for activities aimed at eliminating FGM and act as state-sanctioned rejections of the practice, they have not been able to change attitudes and perceptions among Maasai men and boys who were the key target of the study. The deeply-entrenched cultural practices and beliefs are still prevalent in the target community, primarily because of the difficulty of large-scale enforcement. Irrespective of the fact that the

practice has been outlawed in Kenya, it persists in secrecy with a majority of the respondents in the study affirming that they support the practice. We sadly note that, because the practice is so prevalent, laws criminalizing FGM in Kenya will not end the practice among the Maasai of Kajiado. Instead, the vice has been driven underground, encouraging families to discreetly force their daughters to undergo the practice.

It is evident from the study that the role of Men and Boys in the Eradication of FGM in Kajiado County has to be mainstreamed and prioritized. It's evident from the study that men and boys hold sway to leveraging social dynamics towards the abandonment of the practice among the Maasai community.

Purpose of the Study

- To ascertain and document attitudes and perceptions toward FGM among Maasai men and boys
- To determine the bearing of Maasai men and boys toward FGM eradication
- To establish the levels of understanding in regard to the effects of FGM to girls/women

Scope of the Study

The study was conducted between September 10th and November 12th 2012 in the following locations of Kajiado County.

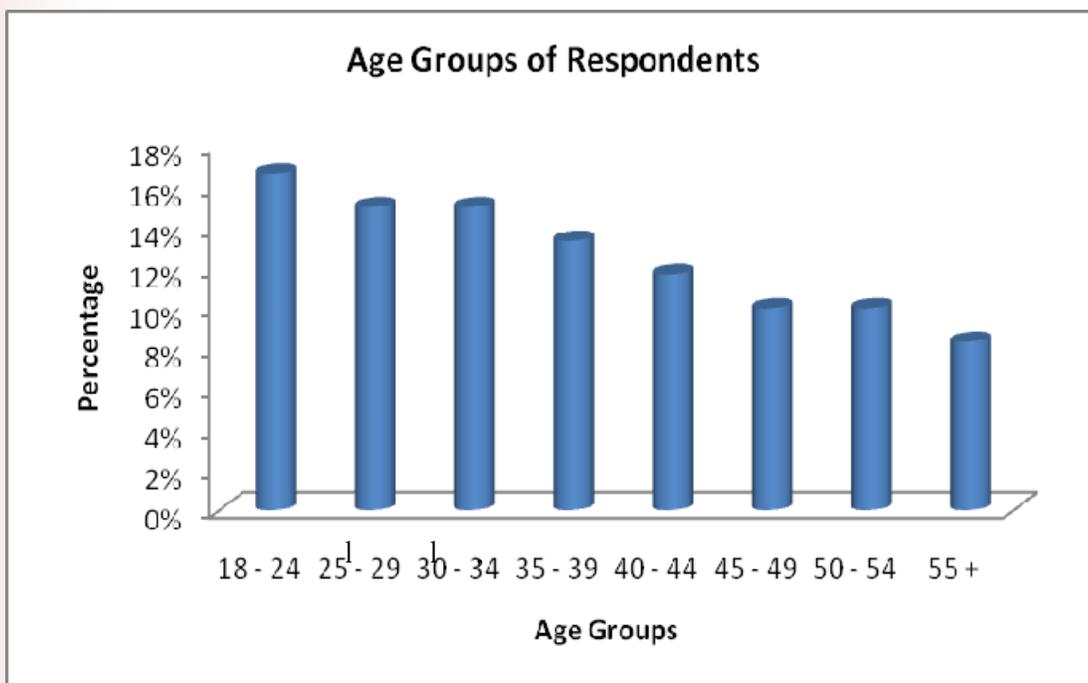
- Kajiado
- Namanga
- Ngong
- Narkut
- Kitengela
- Isinya
- ololua
- Kimalale
- Kisaju
- Mashuuru.

The study sites were selected for the relatively higher practice of FGM compared to the Northern parts of Kajiado County.

Methodology

The survey was conducted as a descriptive and exploratory study with the aim of a rapid situational assessment on the practice of FGM in the chosen communities. We employed both quantitative and qualitative methods. In the qualitative phase a simple discussion guide was used to obtain salient issues of FGM, five in depth interviews were conducted amongst men and boys in the community. In the quantitative phase a structured questionnaire was used to collect data on a face to face interview procedure. A total of 1,000 men and boys were interviewed for this phase of the study. The study population was constituted by the boys, men, elders, community gatekeepers and religious leaders in the community

The sample split by age group of the targeted respondent was as below:



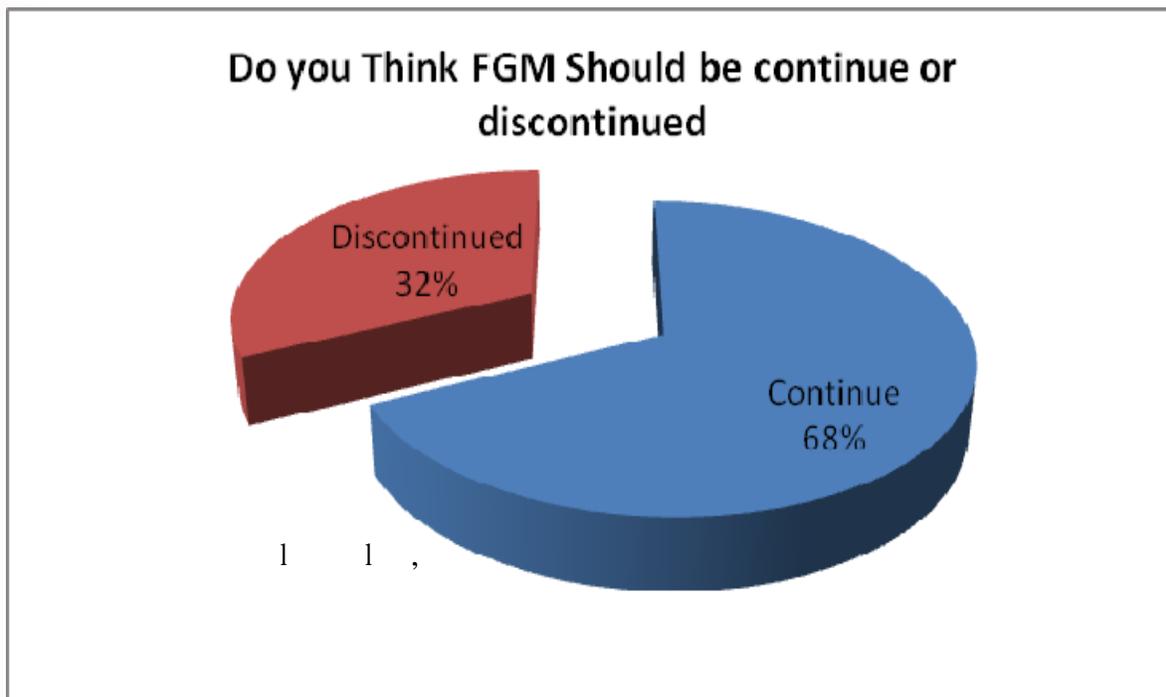
Data Management and Analysis

Data entry and analysis from the quantitative phase was done using the SPSS software. The training on the use of the software was conducted by Meadows Research for free. The software has helped us to accurately collect data and project the outcomes in terms of the extent of FGM practice among the Maasai of Kajiado County.

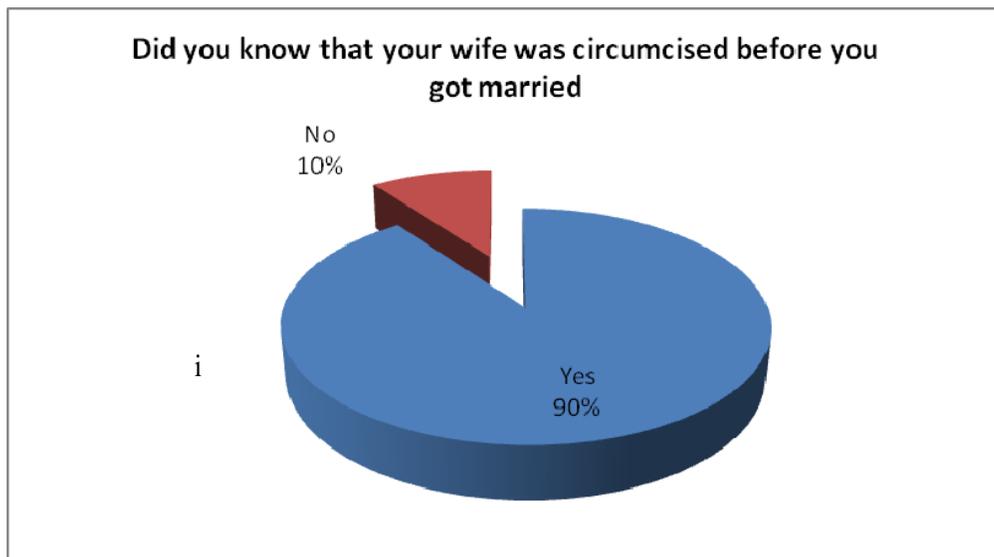
Findings of the Study:

Attitudestowards FGM

From the findings, a majority of the respondents (68%) want the continuation of the practice while 32% of those interviewed were against. This attitude is higher among the older married men. The young and unmarried in urban centers largely remain undecided although substantial numbers still support the practice. These can be attributed to the levels of exposure to information and knowledge about the effects of FGM. Most of those advocating for the continuation of the practice have little or no formal education and are not exposed to any conventional information channels.

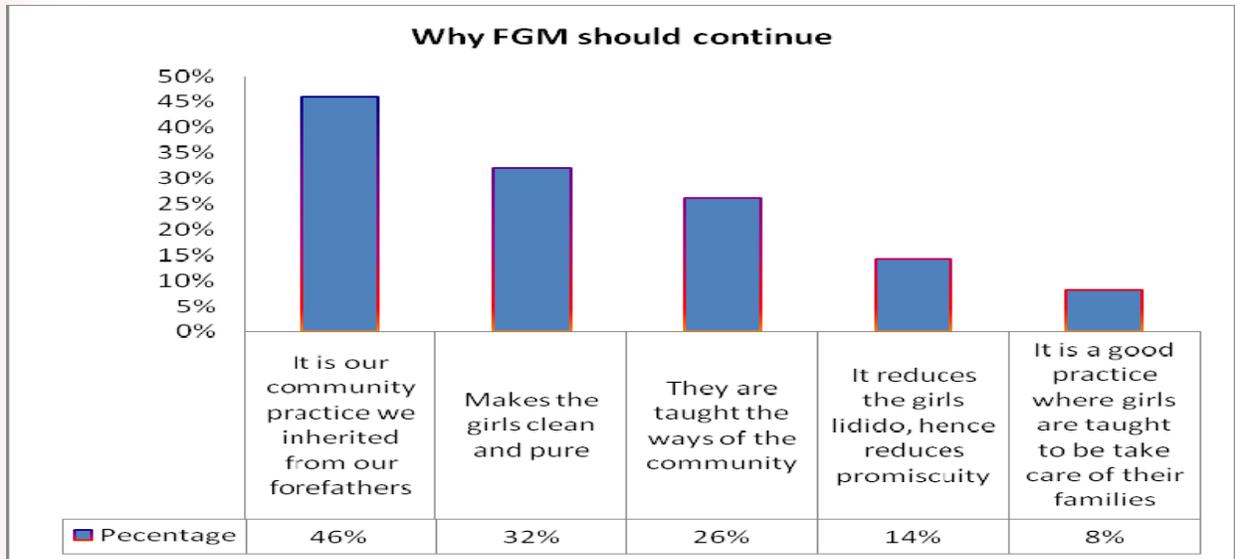


At the time of getting married most of the men, 90% were aware that their future spouse was circumcised. 90% of the respondents insisted on the importance given to virginity and an intact hymn. They said the reason for removing a girl's external genital organ is the minimization of sexual desire. This ties again with the preference levels as indicated above. The attitude might have been perpetuated by the community who despise girls who are not circumcised, hence the choice of circumcised girls as marriageable.

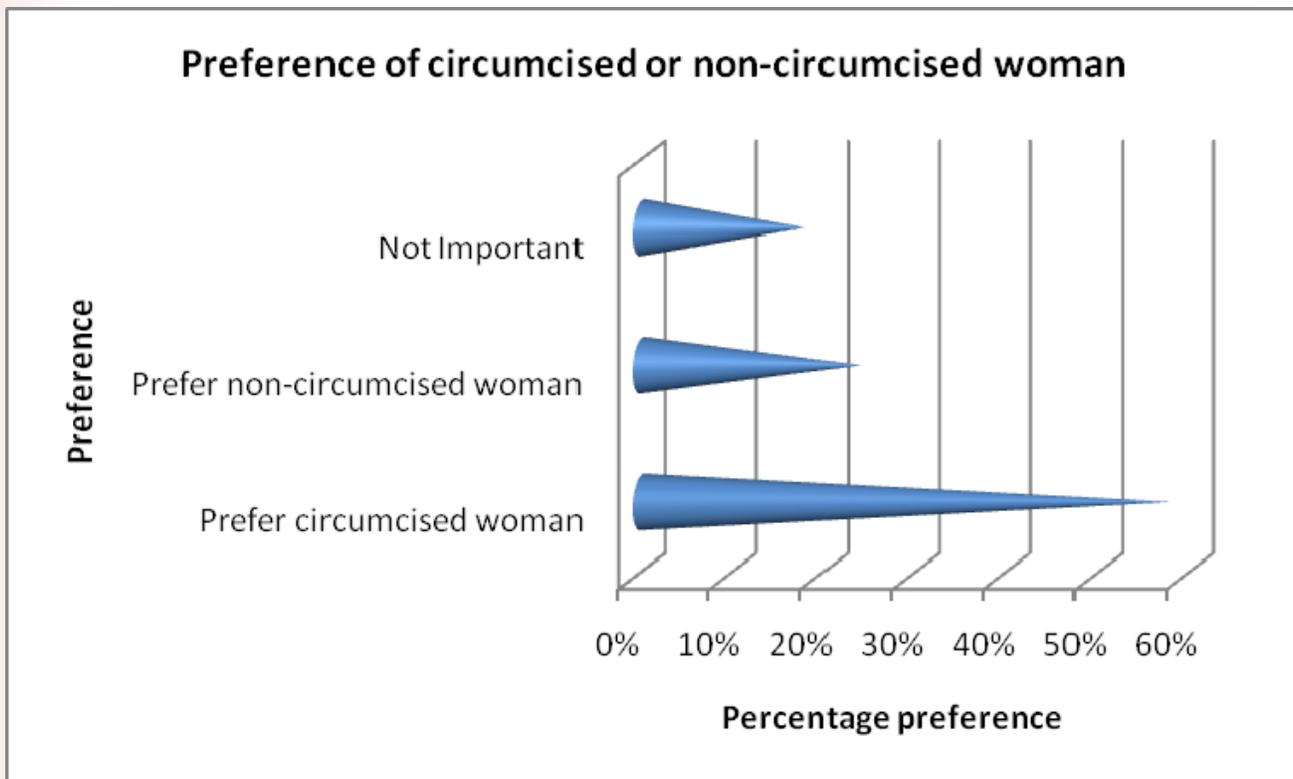


Why the practice should continue

The perception of a majority of the respondents, 46% of them insist that FGM a community practice which they feared could bring devastating consequences to them if they abandoned it. Generally, the practice of FGM is still controlled by myths and believes, which has made it hard to abandon. Some of them believe that as part of the FGM process, girls are taught the ways of the community and that, it reduces libido which they affirm leads to promiscuity. It emerged that most of the respondents believed that FGM changes the status of girls in their communities from being young girls to young women who are eligible to be married. The majority believed that uncircumcised girls are unable to cook, clean, and are unsure of how to act as women. Alternative rites of passage should therefore be encouraged to avoid the effects of FGM on the girls.



Among the unmarried boys, quite a significant percentage 46% have a preference for uncircumcised girls or does not matter to them if the girl is circumcised or not. However, those who prefer circumcised girls, is still higher at 54%. This is the group that needs to be targeted to enable them change their attitudes towards FGM.

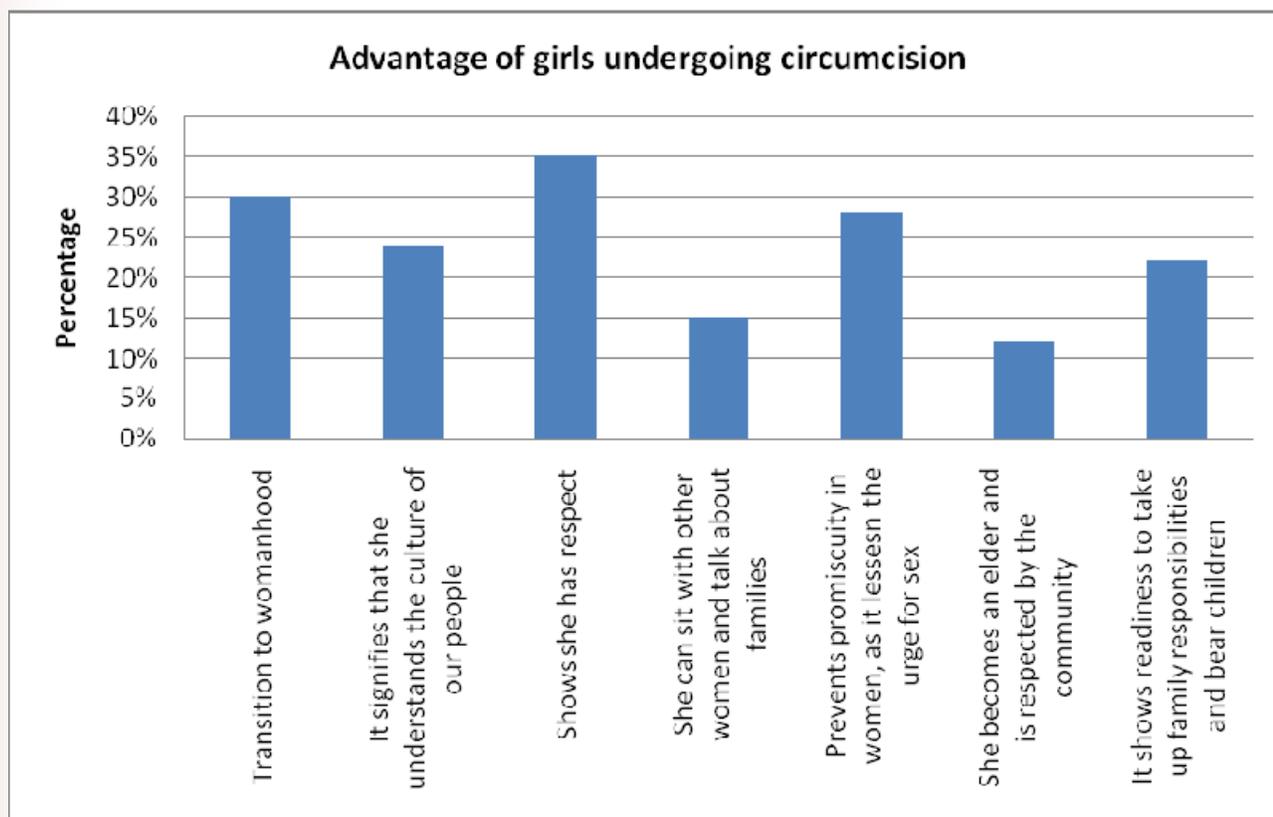


Base: Un-married = 380

Myths around the practice of FGM

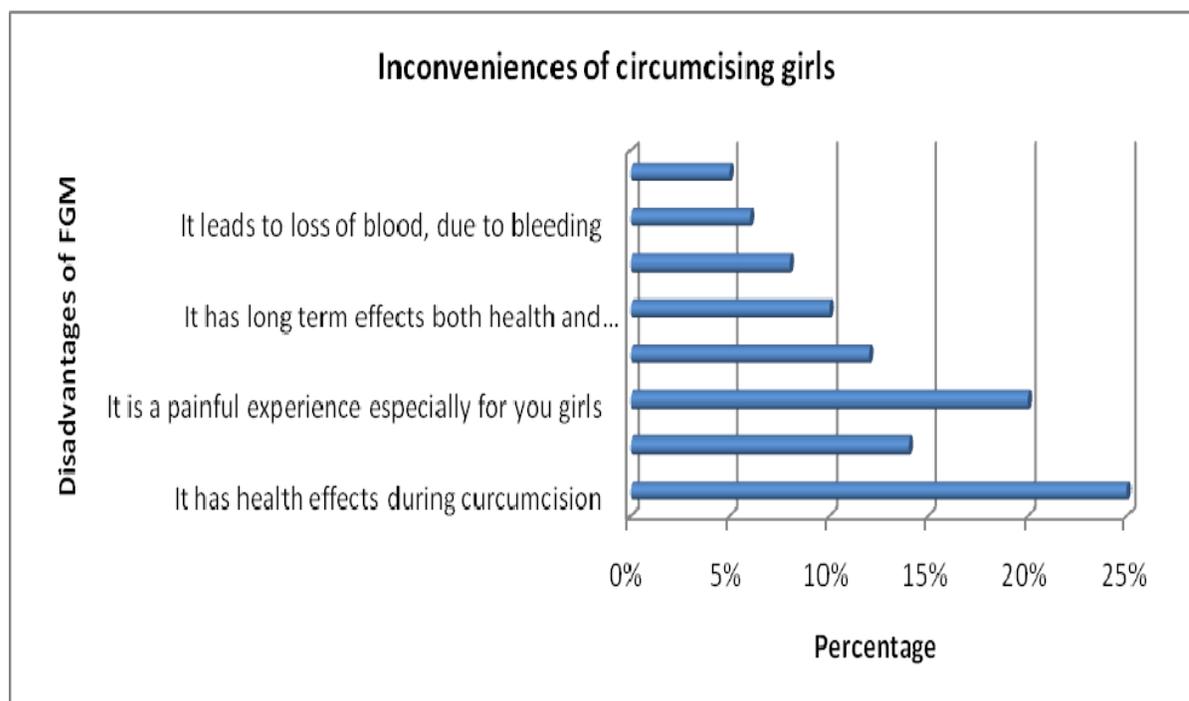
According to the respondents, various reasons were given as advantages to girls who had undergone FGM. One of the key reasons was that girls who have been circumcised have 'respect' for their husbands and elders in the community. This reasoning is supported by another mentioned by 24% of the respondents, that it signifies that the girl understands the cultural practices of the community and that she can sit among other women and discuss community issues, mentioned by 15% of the respondents. Here are a summary of the myths as they emerged

- Requirement from the ancestors
- Guards moral deeds of women in society
- Guarantees faithfulness
- Approval into adult society
- Manages women's sexuality
- Augments women's fertility
- Clitoris is a hazardous organ hence the cut
- Clitoris injures husband's organ
- Fosters tranquil for girls
- Hygiene
- Gratifies men
- Averts infants and maternal mortality
- Religious obligation



Base: All respondents who support the practice = 680

Those who do not support the continuation of FGM mentioned the fact that it is a harmful practice especially during the cutting as it leads to loss of blood. 32% said it is performed by unqualified personnel. 19% of the respondents mentioned that the practice is painful, and the fact that it has a long term effect on the health of the girls at 10%. Less than 10% of the respondents unveiled that it is a senseless practice which provides no direct benefit to girls on whom it is performed. They asserted that it inflicts undue harm on the little girls who are the primary victims and that it is performed without consent

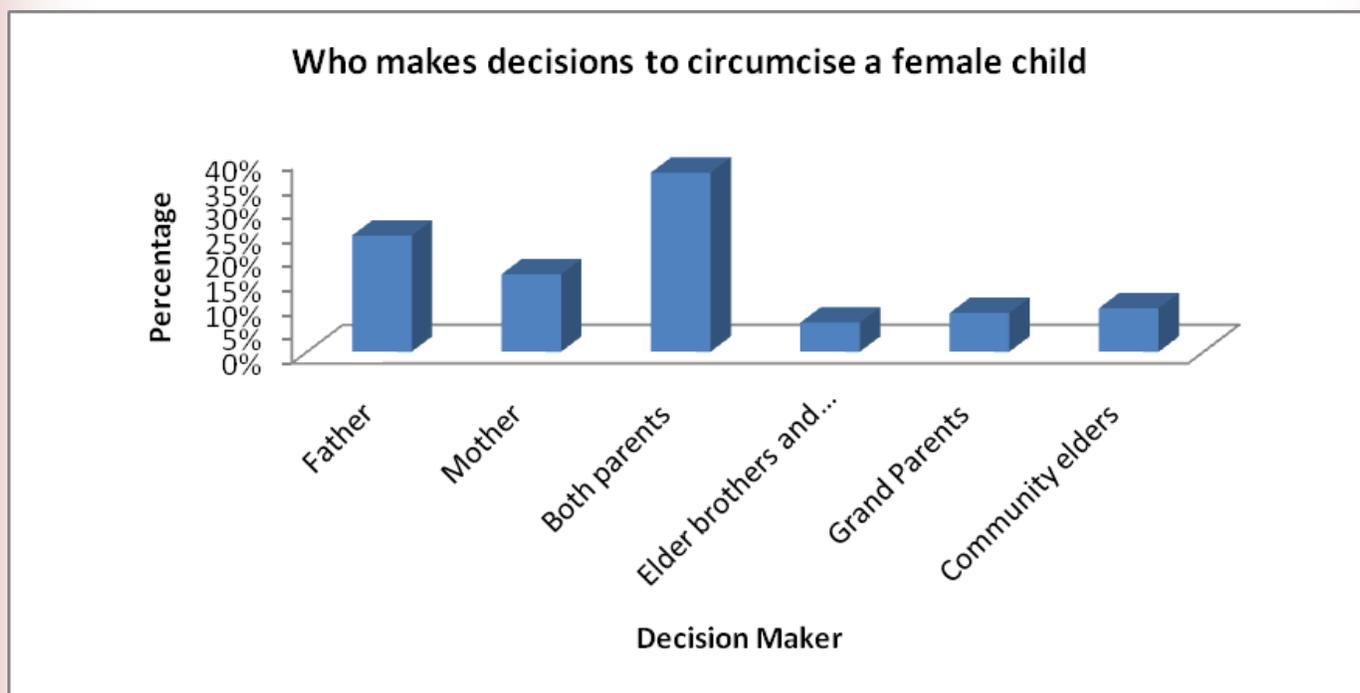


Base: All respondents who do not support the practice = 320

Both parents and the community at large were found to be the key decision makers in FGM. However, mothers remain the visible decision makers even though on the overall, fathers are still the key decision makers on the matters at 30%, followed by mothers at 20%. The community is also a key driver on FGM decision making.

N/B

It emerged during the five in-depth interviews with leading Maasai point persons that men are always behind every FGM act and they celebrate it wildly though privately. The Maasai community is a patriarchal society and it is the men that still make decisions on whether or not to marry a circumcised woman. It is the elderly men who insist that the act holds back the woman from promiscuity from an early age. Its men that have to be targeted



Base: All respondents = 1,000

Key study challenges

- Challenge in estimating the accurate prevalence of FGM in the target location
- The over emphasis on the physical harm with very minimal reference to other related attributes including integrating FGM into health, hygiene, literacy and other awareness programs hence the need for a staged approach to deriving and improving estimates of the prevalence of FGM and the involvement of key stakeholders
- The secrecy surrounding FGM among the Maasai and the protection of those who carry it out make studies about the practice intricate and costly

Recommendations

1. There is need to carry out more community assessments focused on men and boys so as to inform future programming.
2. There is urgent need to mainstream men and boys engagement in FGM eradication processes.
3. Negative traditions and customs supported by myths and stereotypes are a major force behind the sustained practice of FGM
4. Synergize efforts through community networks as well as other community groupings so as to minimize re-invention of the wheel among stakeholders.
5. FGM inclined behavior change takes time to happen, hence continuous programs geared towards behavior change need to be devised.

Proposed Study Dissemination

We propose that the dissemination of these study findings be part of a comprehensive anti-FGM project where the study becomes a training component to last one year. The trainings should avail information, skills and tools aimed at building the capacities of men hence allowing them to understand the harmful effects of FGM and the extent of the practice as well as share their attitudes and feelings on the issue. The capacity building attribute of the trainings will help men and boys to understand the broader social, physical, ethical and human rights contexts of FGM. There is also need to host forums where the study findings are discussed and approaches and strategies towards FGM elimination explored. By the end of the trainings and community forums, men will be able to acquire skills to make them effective advocates and agents of change within the community.