

**PERSISTENCE OF FEMALE GENITAL MUTILATION IN KENYA: A CASE  
OF MERU COUNTY**

By

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**Dedication**

I dedicate this work to my dear mother who has been my sincere pillar to further my education and instilled my passion to eradicating FGM through her campaigns in our home area and beyond. I also dedicate this thesis to over 200 million survivors of FGM globally, who over 4 million of them are from my country and 31% in my county at risk of FGM. Finally, I dedicate this work to grassroots activists who toil day and night with limited resources to fight this cultural menace that harms girls and women and curb their achievement to full potential. I refer to all these people as feminists, since they face the reality of disparities at first hand and in its raw form as they act to eradicate the inequities through FGM campaigning in their communities.

### **Abstract**

The goal to end FGM in Kenya by 2022 seems bleak since the practice persists in hotspot areas such as Meru County. This study discusses the persistent crisis of FGM by examining existing discursive practices using feminist content analysis on online content in three organizations that work in the county. The analysis demonstrates that despite having a clear goal to end FGM, there are internal divisions on the use of Do No Harm language, effectiveness of the anti-FGM law, structural gender inequalities fueled by patriarchy and the insider-outsider differences in the African-led movement to end the harmful practice. The divisions emanate from gendered functions of FGM relative to the economic, political, and sociocultural organization of the community that are further exacerbated by the historical positions of sexism, racism, and colonialism characterized by top-down approaches. These are noteworthy because they are key contributing factors in the inability of present approaches to stem FGM and they show that the problem necessitates a bottom-up approach where activists need engagement with what works in their community context and get support to eradicate the practice. Use of discourse analysis in this study helped to consider activists' standpoints, and grassroots and funder community input that ultimately call for dialogue among stakeholders. The voice of activists is expressed through the content they post in the online media while the grassroots community standpoint is taken from their verbal and written content in the form of testimonies and quotes from anti-FGM campaign training feedback. The funder community as a stakeholder plays a part through the stipulations and recommendations for grantees. This study shows that more successful eradication interventions will depend on factors such as sensitivity to the insider/outsider perspective, dialogue about the FGM law with the community and a focus with more attention on the role of patriarchal power in maintaining FGM practice and on shifting structural changes through women empowerment especially economically.

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## **CHAPTER ONE**

### **INTRODUCTION**

#### **1.1 Background to the study**

African societies have different rituals linked to age that mark passage from one stage to another (Turner, 1985). However, some of these traditional rituals can be harmful; for example, in Kenya, they include early child marriage, female genital mutilation (FGM), and widow inheritance, just to mention a few. The goal of eradicating FGM evolved from the agreement by the government and civil societies that the practice violates the right to human dignity, right to health, and right to life in case of death. Campaigns to end the practice date back to 1913 by the Kenya Ministry of Health (9, as cited in Mose, 2005), when missionaries from the West termed the practice severe. Colonial governments, however, retreated from banning the practice due to backlash from the practicing communities that viewed it as an attack on their culture. Heads of state later took up the journey; for example, in the 1980s, the late President Daniel arap Moi, condemned the practice and termed it not helpful. The current President, Uhuru Kenyatta, is also at the forefront. In 2019, at a High-Level Elders Forum in State House, he committed to end FGM by 2022 and all other forms of gender-based violence by 2030 (Ondieki, 2021).

Kenya has an anti-FGM law, i.e., Prohibition against FGM Act 2011 that strives to eradicate the practice based on international human rights tools. Several organizations are on record in the eradication of FGM too. Among the pioneer

organizations are the Maendeleo ya Wanawake Organisation (MYWO), which is a national women's development organization, and the Program for Appropriate Technology (PATH), which started to end the practice with the use of alternative rites of passage (ARP) in 1996. ARPs mimic the traditional practice but without genital cutting. Some of the current organizations apply ARPs in addition to capacity building by movements such as The Girl Generation (TGG), Global Media Campaign to End FGM (GMC), United Nations Children Fund (UNICEF), and United Nations Population Fund (UNFPA) among others. Specifically in Meru County, where I am from, we have the church, government through the county commissioner and law enforcement officers, *nchuri ncheke* council of elders, and organizations such as Care Health Providers and Men End FGM at the core of ending FGM. Even though the Kenya demographic Health Survey at the national level records a steady reduction in FGM practice at 21%, Meru County is among the 16 FGM hotspot counties at 31% (KDHS, 2014).

Motivated by my personal experiences as a woman who did not undergo FGM because I came from a family where my mother was a vigorous activist against the practice of FGM and worked for the Maendeleo ya Wanawake Organisation, I witnessed my agetmates drop out of school after undergoing FGM. I was born and raised among the Ameru community that inhabits the Mount Kenya region of Eastern, Kenya and a community that practises FGM. I used to accompany my mother to seminars and campaigns meant to enlighten the community to stop practising FGM.



This triggered me to become an anti-FGM activist because FGM is a violation of human rights and an act against human dignity since it happens to a victim (mainly children) without their consent and invades their privacy and right to bodily autonomy. I chose Meru County as my area of study because I have witnessed women and girls suffer yet hold on to this harmful practice with short-term and long-term effects. I have also witnessed the ostracization of women who have not undergone FGM. I am also motivated by the fact that FGM is being practised at a high rate of 31% (KDHS, 2014) in Meru County. However, my awakening moment was when the first-ever publicly reported death case due to FGM was reported from my home village in Igembe, "A 14-year-old girl named Jelida bled to death due to FGM in Meru County" (@citizentvkenya, February 23, 2019). It became clear that something was not right about FGM. The news was heart-wrenching, and I vowed not to allow anyone I knew to go through it. Jelida is my inspiration that no other girl should be a statistic. FGM is harmful and has no known benefits, and it is everyone's business to end it as it tampers women's and girls' achievement of their full potential.

This study attempted to answer the question on which interventions are applied to end FGM and why FGM persists among the Ameru community despite the efforts of activists and the presence of the prohibition of FGM 2011 Law that was passed to eradicate the harmful culture of FGM. The focus of my study was on the analysis and evaluation of current interventions that a number of NGOs based in Meru County are implementing in order to eradicate FGM. I utilised feminist content

analysis in my study to analyse the interventions used and why some of the intervention strategies seem not to work well to eliminate this harmful practice among the Ameru. I explored the trends in FGM interventions, and challenges among critical actors in the fight to end FGM despite the presence of diverse interventions and the law.

The research includes a discursive study of three organizations that are at the forefront of FGM eradication in the region. The organizations include Care Health Providers which targets the involvement of the youth as an intervention and rallies organizations, media, and activists to fight against FGM deaths in Meru County. The second organization is Men End FGM which rallies men and boys as an intervention to eradicate FGM, child marriage, and other sexual and gender-based violence perpetrated against women. The third organization is Maendeleo ya Wanawake Organisation (MYWO) which utilises alternative rites of passage (ARP) as an intervention to eradicate FGM. The organisation has dealt with anti-FGM activities in Meru County since 1996. The study outcome will be a proposal for a set of more successful eradication interventions that will consider the reasons for inadequacy in the current interventions. I used the insights of my understanding of the Ameru community, the value system and beliefs, economic status, and my study and application of feminist theories of social change in this project. The outcome will go beyond the current FGM elimination strategies to ensure more effective strategies. After attainment of my degree, I will go back to my community and under a legally

registered NGO that I am in the process of registering, implement the findings of my study.

The World Health Organization (WHO) informs us that the practice of FGM is done on girls between the ages of infancy and adolescence and sometimes on adult women. The harmful practice is reported in 30 countries in Africa, the Middle East, and Asia (WHO, 2015). Twenty-eight of these countries are in Africa, and Kenya is one of them. Statistics by WHO indicate that over 3 million girls worldwide are estimated to be at risk of FGM annually. Over 200 million girls and women alive today have undergone the practice, too (WHO, 2015). There has been controversy and debate about the practice of FGM and the sexuality of women, the naming of the practice, its eradication, and strategies for eradication. However, the big question is why such a harmful practice persists.

The national prevalence of FGM in Kenya is considered moderately low (21%); however, pockets of hotspot areas are as high as 98% among the Somali and Samburu communities (KDHS, 2014). The history of activism organizing for the abandonment of FGM began as early as 1906, spearheaded by mainstream churches such as the Catholic Church, Seventh Day Adventist and Methodist church among others and basing its argument on morals (Thomas, 2000). The advancement of medicine in the 1920s led to the missionaries grounding the elimination of FGM in health concerns. The campaign continued as colonial administrators preferred controlling the severity of FGM by mandating its medicalization. It became a problem

in 1929 when some missionaries called for total abandonment of the practice, and the consequences of disobedience led to the denial of participation in church and enrolment in mission administrated schools (Murray and Pedersen, 1976; 1991, as cited in Shell-Duncan et al., 2017). The move was met with backlash, specifically among the Kikuyu community. Opposition to the practice was equated to oppression by colonialists, and it took space in the struggle for independence against British rule. Jomo Kenyatta, the future President of Kenya and leader of the Kikuyu Central Association (KCA) criticized the move as an "attack on old customs of the country that has enormous educational, social, moral, and religious implications" (Kenyatta, 1978 [1938], p.133).

Further efforts to control the practice came later through legal measures. An example of this was in 1956 when the Meru council of elders, i.e., *Nchuri Ncheke*, passed a ban on the practice. It was, however, received with resistance too. Young girls, specifically in Meru, following the ban, opted to circumcise themselves. The local opposition led to the colonial government rescinding resolutions governing FGM in 1958 (Chege et al., 2001)

After the 1963 independence gained by Kenya, FGM ceased to be viewed as an epitome of cultural loyalty and colonial defiance. Efforts to discourage the practice were revived in the 1970s and were led by the church (UNICEF, 2013). Activists and the government also joined the church as Kenya became part of the global community that embraced the elimination of the practice. Ignited by the UN Decade for Women

conferences in the 1970s and 1980s, lawmakers in African nations were pressured to conform by enacting a ban or ceremonial laws prohibiting FGM. The late President Moi compromised on the resolution by speaking against the practice and advocating prosecution of anyone practicing FGM. It was, however, viewed as a measure to appease the West. Decrees by President Moi followed in 1989, 1998, and 2001 with policy directives to stop FGM by the Director of Medical Services. Attempts to pass formal law against FGM were met with resistance in parliament, centering the debate on whether FGM practice was a crime or legitimate cultural custom (Thomas, 2003).

In 1997, a consultative conference of local non-profit organizations and international organizations was held after the 1996 legislative attempt failed in parliament. The organizations formed a National Focal Point (NFP). A non-profit known as Northern Aid was designated to host the NFP to coordinate and collaborate on all FGM eradication-related activities in Kenya (Chege et al., 2001). A National Symposium on FGM was held in 1998, representing key government ministries, NGOs, and interested parties. The symposium lobbied for concerted efforts to end FGM. The Ministry of Health 1999 developed a 20-year action plan against FGM. The plan focused energy and resources on the goal of ending FGM. Among the most active pioneer NGOs in eradicating FGM is the MYWO and PATH organizations that developed and implemented ARP in 1996.

In 2001, the Children's Act was passed in the parliament. The Act bans early child marriage and FGM for girls less than 18 years (Children's Act, 2001 no.8,

Section 20). The law aimed to align Kenya as a signatory to the UN Session on Children, 2001. Passage of the law did not bring out the mass outcry and protest seen under colonial rule. The reason behind it was that the process preceded a shift in boundaries of parental and extended family rights toward children concerning the government and church institutions (Shell-Duncan & Olungah, 2009). In 2011, the legal restriction against FGM expanded with the Prohibition of FGM Act. The law criminalizes aiding or abetting FGM and the use of derogatory language against "uncut" girls and women. It also bans cross-border FGM, and penalties for violating the law include imprisonment of up to 7 years or a fine of KE 500,000. As an activist, even though the law has played a part in eradicating FGM, I find this law quite lenient and its enforcement difficult. On the one hand, parents do not perform FGM on their girls because they hate them, and on the other hand, children would not want their parents arrested and to be separated from them. FGM involves children and their loved ones, thus the need to incorporate interventions that are non-combative and involve dialogue and community ownership of the abandonment of the practice.

The study is timely since, compared to previous years; there exists an enabling environment for cessation. For example, there is a law against the practice. The President supports an end to the practice, and there are also men activists. The church and cultural custodians are engaged in the fight against FGM. Given this present moment of unprecedented support from multiple sectors for the eradication of FGM, the continuation of the practice, and in some areas, its prevalence, is worth studying

and opens up questions about the effectiveness of prevailing elimination approaches. This study contributes to research related to ending FGM and strategies used by various stakeholder individuals and organisations and the effectiveness of the strategies. I explored specific approaches used by actors in Meru County and present recommendations for gaps identified in the existing eradication system.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Broad review of debates**

African feminist scholars and activists have been at the forefront of thoughtful and tuned-in analysis surrounding FGM/C and its eradication. They provide important grounded, insider perspectives that should be central to discussions about interventions and eradication approaches. The literature reviewed below shows the role of culture, religion, law and human rights in FGM campaigning and prevalence of the issue. The insider outsider perspective in representation is also conspicuous with colonialism and racism being a bone of contention. The need for cultural sensitivity when engaging communities is necessary when transcultural and transnational feminism agencies and collaborations occur. This body of work has been an important help in framing the analysis work of this study.

A review essay for the African Gender Institute (AGI) on African feminist studies from 1980-2002, written by Desiree Lewis (2002) for a project on strengthening gender and women's studies for the social transformation of Africa, is a helpful place from which to think about prevailing debates relevant to this study. The project's goal was to enhance the intellectual quality of research, relevance of research in practice, and to consolidate scholarship trends. The author identifies gender studies work in Africa as an area of future expansion for new writing and research and dissemination strategies and the development of curriculum and teaching. She also interprets exchanges and linkages among scholar's networks, the gaps and the possibilities, the strengths as well as challenges in the field. Among the challenges still present are the protest against imperial control now in the form of neocolonialism, silencing and misrepresentation due to studies done by outsiders among insiders. Other challenges that face scholars is the lack for opportunities to dialogue due to inadequate resources, low rates of feminist scholarship being published and teaching and administrative demands that are heavy thus hindering the possibility of collaborative and exploratory research. The authors' argument resonates with me since it describes the situation on the ground in the place I come from in Meru County. I will follow up my current study with another one once I get back home where I will utilise the knowledge I have acquired through this degree and collaborate with scholars there. It will be an opportunity to dialogue and publish knowledge from my community to the world since majority of FGM literature has been by outsiders from the West.



The essay formed a backdrop of foundational research scholarship that utilised information technology as a strategy to document African feminist work. I am happy to be part of the beneficiaries of the work as I conduct this study through feminist content analysis and online documents.

In her study, Tania Missa Owino (2006) did an analysis of the framework, concept, address, and response to FGM by the United Nations Children Fund (UNICEF) in Africa. While the author uses feminist content analysis in her study just like I did, she adopts different theoretical frameworks that are based on reproductive rights and reproductive justice. An illustration of how human rights, religion and culture discourses are mediated and represented are provided in the documents. The study findings revealed a shift in the naming of FGM to FGM/C (including a reference to “cutting”), reference to the practice as harmful in a way that resulted in its “medicalization”, and from understanding FGC as a human rights issue to recognising it as a cultural practice and focusing on its prevalence perpetrated mostly by religion and culture. In my opinion though, the issue of naming has been dealt with currently through encouraging activists to use the Do No Harm language. The author concludes with the need for a multi-sector and collective approach to the issue, tapping into the mindset of the community and the cultural aspects of the practice among local communities. She further suggests exploration of alternative rites of passage to retain benefits of traditional teachings that are taught in the transition. The aim of the alternative rites of passage is to pass the girls through the traditional teachings, beliefs, and norms of the community that the initiates who have undergone

FGM go through during the seclusion period. However, the author observes that most NGOs and churches that are in the fore front of helping eradicate FGM have diverted the alternative rites of passage initiative to be more religiously based, by incorporating Christian doctrines at the core. It is such content that makes those who undergo the cut perceive the uncut as outsiders in their community, since they are out of touch with local teachings. The issue of medicalization of FGM mentioned by the author is one of the situations facing my community since community members perceive it as a safer and secretive direction compared to the traditional way of doing FGM. However, my experience as a campaigner against FGM shows there is inadequacy in alternative rites of passage as a method of FGM eradication.

According to Blay Yaba Amgborale (2008) discussion on Africology, the author discusses it with resistance of blanket definition of feminism among women globally. The author further opines on realising African feminism(s) as a research methodology for African studies. Blay (2008) posits that for the longest time in Africology, there have been sentiments that feminism is an import of the West and thus not applicable to the African context. The article argues that based on the work of African feminists, African feminism is an African centered methodology that attends to African studies' form and function. It is capable of providing a framework for investigating issues that are gender relevant to the African community globally. The author's opinion is relevant to my study since the FGM campaign has had controversy on methods of eradicating the practice. Some activists have had arguments against western domination in the process of ending the practice. For example, Fran Hosken

(1981) who is credited to have contributed to making FGM an international feminist issues. However, her reframing of the term female circumcision to FGM was received with controversy globally. African women rejected the feminist perspective and pointed out that the practice is done for women to take their position as wives and mothers. In an international conference featuring Hosken in 1980, African women boycotted the event terming her perspective as inconsiderate, racist and ethnocentric, (Boyle & Carbone-Lopez, 2006). Other feminist controversies include how funds are used and the content such as the Do No Harm approach that is brought from the west to support the effort.

In her study on colonising bodies, Wairimu Ngaruiya Njambi (2000) critiques anti-FGM discourses arguing that the reason for the persistence of the practice is context specific and beyond the dual issue of patriarchy and health effects of FGM. The author further reports on evolving discourses of anti-FGM that is intertwined in politics of feminist activism, scientific and medical grounds of female body and sexuality which I agree sheds light to the erroneous generalisation of FGM as dangerous, when focusing on the harm done rather than the politics around the practice. The author concludes that science and technology studies and feminism stress that sexuality and human bodies are images and products of culture. Based on historical and political performances and knowledge about them, the images and products of sexuality and human bodies are therefore context specific. There is, therefore, need to allow the historical origin behind the practice with a call to action in envisioning interventions that consider a legacy of historical inequalities based on

racism and imperialism. Outsiders as social change agents need to tone down arrogance and presumptions, however well-meaning they may be in their wish to help, and consider the imperialism in their views and actions by adequately addressing the past domination, inequalities, and challenges facing those who practice FGM. The issue of outsiders versus insiders in the bid to end FGM has been a controversy to date. The current debate being on how funds and end FGM content is dictated by outsiders yet the affected communities may not align with the stipulations and are in a better place to define how they can end FGM.

Njambi (2004) does a further feminist critique on the dualisms of female bodies and western feminist theories as viewed in African female circumcision. Being a circumcised woman from the Gikuyu ethnic group, the author does not celebrate the practice as she presents her experience. She sheds light on the importance of understanding the practice from the point of the “other” woman and the politics behind it. For example, she explains how in her community the practice was meant to galvanise their identity in relation to neighbouring communities and later in resistance against colonial intrusion into their culture. They saw the attempt of the colonial government to end FGM as an intrusion into their long held culture. The practice was gateway to transition from childhood to adulthood and the teaching that came with it defined morals and roles in the community. The author reiterates that separating female bodies and cultural contexts is a presumption in anti-FGM discourses that not only adds to culture and nature dualism that has been questioned by feminists, but also perpetuates how colonialists assumed a universal western image of a “normal”

and “natural” body and sexuality in the bid to rescue women and girls. She suggests that feminists and activists’ opinions about the seemingly “sat on” women they advocate for have stories from a cultural point beyond the practice and there are complexities behind it that if taken seriously could be a way out of the problematic tendency to advocate and represent them as passive victims and knowledge objects. I totally concur with the author since from experience, for evident change to be recorded, community-led and community engagement with dialogue has been important to the abandonment of FGM practices. This study investigated on how well the activists sought to understand the community side of the story to ensure dialogue and unveiling of the complexities behind the practice.

In response to Njambi’s (2004) feminist critique on dualisms and female bodies in representations of African female circumcision, Kathy Davis (2004) argues that there is the issue of moral outrage and cultural relativism that needs to be considered by western feminists in relation to the practice of genital cutting. Moral outrage comes out as a mission to rescue African sisters from a practice that reduces them to passive ignorant victims of culture while western feminists advocate for their rights. The position is, however, translated as imperialism, thus the resistance by African feminists even in a situation where some are opposed to the practice. In terms of cultural relativism, the practice is assumed as relevant and with value in a specific culture and western feminists should be tolerant and cautious when engaging with it. The author, calls for the need for western feminists to be culturally sensitive when engaging in issues relating to FGM to avoid their efforts being translated as

colonialist. The move encourages indifference to those who suffer under the practice and detachment to issues happening outside others' cultural domain. The move thus encourages political paralysis and discourages alliances among feminists across nations, ethnicities, and religious borders. Davis reiterates that the cultural relativistic stance towards FGM treats it as a significant practice and value for the specific culture and ignores the political context that it occurs in and the silencing of the voices of those who oppose it within the culture. She calls for a revision of sympathy and solidarity in relation to moral outrage since it has been Eurocentric. Further, the author demands reflexivity and a sympathetic politics type of engagement where the opinion held in respect to FGM and its persistence is founded on proof from practicing communities. I agree with her that it is no time to have feminists from different parts of the world keeping away from other people's concerns to only concentrate on their own. It is, rather, a time for taking up the challenge to engage in transcultural and transnational feminisms through seeking coalitions across differences on issues that affect us all. However, cultural relativism only informs but does not end FGM.

In her study on discovering African feminism, Glory Joy Gatwiri and Hellen Jaqueline McLaren (2016) embark to explore a journey of Kenyan women's oppression that includes FGM. Even though the journal article does not give her a final destination on her own discovery of African feminism, the picture reflects the journey of African women, their diversity and lived experiences that need not to be put under one blanket. She explains that though women are victims of the practice of

FGM, they are also perpetrators of the practice. The author gives an example of the Samburu community women in Kenya who wanted circumcision of their daughters and others who offered their children as community sexual slaves to old men and warriors in the community (Jimoh Amzat & Oliver Razum, 2014). Women thus submit to patriarchy which silences them since they fear being marginalised by other community members. Their conformity to cultural practices is based on ignorance and lack of information on alternative discourses, and pressures and constraints based on the sexist internal dynamics of the community. The politics of patriarchal, structural, and institutional power overwhelm them, thus the need for a critical approach to the institutionalised and systemic domination by men that makes the women unable to notice or resist their contribution to reinforcing their own oppression. This is part of the reason why FGM currently persists.

This also provides a moment of reflexivity on my journey as an uncircumcised woman, growing up in an environment where your peers ridicule you as not being an adult, and ostracization as an outsider in your own community. Yet, to be honest, apart from the cut, there has been community doctrines passed through the practice that I regret missing out on such as traditional education on sexuality, identifying medicinal plants, how to create and maintain a family, all which are basic skills of life. The time I spent in school learning the ‘western’ way was spent by my peers going through the cultural knowledge, which is equally important. The oscillation between the western ways and my culture is a handful, yet the Christian doctrines and bible also does not make it easier since the system is on the same wavelength of

patriarchy with submission and oppression of women at its core. There are political, social, and economic functions that form the discriminative but effective system that either way keeps women subordinate and submissive. However, in defense to this statement, Christianity which is the faith I profess takes lead in terms of morals and ending FGM is one of its goals. I personally agree with the verses in the Bible that have helped in anti-FGM campaigning such as the story of Abraham circumcision where his wife Sarah was not circumcised but only her name was changed from Sarai to Sarah.

There is a gap in the literature related to the focus of this study, which is that there are only two communities in Kenya so far studied with regard to the persistence of FGM (Matanda et al., 2022; Ondiek, 2010), and FGM persists at high rates. These include the Kisii, Kuria and Maasai in Narok. The studies are also based on non-material issues such as access to education and empowerment. The studies applied in-depth interviews, focus groups, and questionnaires as modes of data collection. There is scarce research on activists, especially blending male, female, and survivors versus uncut persons as activists, and the interventions used to end FGM.

Van Bavel Hannelore (2022) interrogates the Kenyan anti-FGM law of 2011 on whether it is based on cultural imperialism or not. The author argues on the basis of a case by a Kenyan medical doctor who contested against the anti-FGM law in 2019 on the grounds of the law being culturally imperialist. A critical analysis by Van Bavel (2022) on the law being imposed by the West shows findings of influence by international power hierarchies on what can be said about FGM and who can speak.



The findings also challenged the Africa vs the West aspect of cultural relativism and imperialism divide among the law's critiques and interventions. The author further argues that imperialist imposition of the law ignores African agencies and collaborations transnationally that occurred in the production and contestation of the Act. Hughes (2018) further reports that resistance to the law is manifested in stunts such as public protests, medicalization of the practice, secrecy of the process, cutting at younger ages and foot dragging as well as not complying with the law. This is a trend that has been witnessed in my community. Crenshaw, (1991), observes that intersectionality exists in the intersection of sexism, colonialism, and racism reiterating that the different discrimination axes not only co-exist but also overlap and add up to create more harmful effects. In terms of sexism, African women are considered inferior to African men and should submit at all costs. The colonial era put the African inferior to their colonial master whose ripple effect gets to racism too.

On the legal wavelength based on the Constitution of Kenya 2010, Yvonne Nekesa Ouma (2020) did an analysis on the efficacy of article 44 (3) in relation to female genital mutilation in Kenya. The article stipulates that no person should compel another person to undergo a cultural rite. While the practice is prohibited, the author reiterates that women and girls continue to be coerced to go through the cut. The author recommends how to eradicate the malpractice through sensitisation and involvement of relevant institutions. She also concludes that the practice will be de-escalated through implementing and legislating ARP. While I agree with the former conclusion, I disagree with the latter one since it has been there for the longest time

possible and nothing much has been seen to be of benefit. It is a one-off and lacks consistency and follow-up, yet FGM eradication requires constant dialogue with community stakeholders.

The literature coming from the continent's scholars and activists highlights three axes of sexism, colonialism and racism as sources of discrimination that co-exist and overlap thus creating more harmful effects of FGM. The literature's value is based in its grounding and insider understanding of local realities. The insights on feminist scholarship trends, the diversity and lived experiences in the form and function, patriarchy, human rights, religion and culture from this literature helped to inform my analysis.

### **2.3 Initiation rites and FGM among the Ameru community**

Kyalo Paul (2013) states that initiation rites are "symbolic, routine and repetitive activities and actions." Through rites, "we make connections with what we consider the most valuable dimension of life." p.36. Rites are performed at a specific time and place that allows the opportunity to ponder the meaning of the rite of passage and connect emotionally. They often accompany events and places in an individual or communal life.

Among the Ameru, before the 1930s, Koronya Charity (2003) narrates that one month before FGM was a hectic season when girls and boys organized dances in the village. The dances had songs praising heroes and defaming girls who feared going through circumcision. The evening dance exclusively attended by

uncircumcised girls and women, involved songs that encouraged those yet to be circumcised and mocked those who conceived before circumcision or wedlock.

A girl underwent stages before circumcision. The stages involved initiation to community secrets and adulthood issues. *Gukurwa Kwa nkenye inkuru* meaning "naming of the girls," was one of the crucial ceremonies in preparation for FGM. It had five stages. The first stage, known as "mungaungo" involved a thorough beating from senior girls to ensure the initiate conformed to Ameru culture and traditions. Unfortunately, the practice is presently done among boys, and sometimes it has led to the initiate's death. Lessons were also imparted at this stage, but the better part of the activities entailed beatings to show abandonment of childhood to adulthood and prepare her for adulthood hardships. The beatings, also known as *Kuwaata kinyuru*, i.e., "catching the mongoose," had initiates warned against pre-marital sex and avoiding any relationship with uncircumcised boys and girls. Completing the stage earned the girl a new name in preparation for the second stage. The phrase "catching the mongoose" in my opinion could be related to the English meaning of a person who flirts with many people due to unhealthy low self-esteem seeking and to be loved by as many people as possible. This stage was meant to tame the behavior.

The second stage, known as *thairora* was more intense than the first one. The beatings were more than in the first stage, and initiates in the first and second groups never shared secrets since they belonged to different statuses in the community. The third stage, "*Ncekei*" involved threats and more beatings, more intense than the one in the second stage. Some community secrets were also divulged to the initiates. This

stage, in my opinion, marked the socialization and norming of culture into the initiate. Social puberty rites involve transitioning from the asexual to the sexual world from childhood to adult society, differentiated by sexual roles. The initiate goes through particular ordeals to test their resilience to take on new responsibilities. The secret knowledge of the community is taught to them. They are shown sacred objects and finally given the symbol of their new status and recognized formally as transitioned Kyalo (2013).

In the fourth stage, the initiates could be sent to settle disputes between circumcised and uncircumcised girls. They were also taught how to use carved wood to communicate with males using symbols about sexual issues. In the fifth and the last stage towards the actual circumcision, the initiate could communicate and discuss issues with both circumcised girls and boys. Graduates from the stages formed an age set known as "Nthuki". The five stages concur with Mbiti's (1989) study noting that the times at which the rites were performed were related to socialization, marriage, and the death of a family member. The author asserts that initiation rites were significant because it was the time that young people were educated about their culture. It symbolized a move from childhood to adulthood and from the familiarity of dependence and protection to assuming responsibility in adulthood. The stage is marked by some form of "statelessness," a kind of "limbo" where an initiate is prepared for the new station. The state is equated to being in the wilderness, darkness, and death. Here the initiate is stripped of status, loses rank, is submissive, and is symbolized by a uniform dress. The person is neither here nor there, and they do not

possess their previous status, nor have they also not been conferred the new status. In this stage, the behavior and actions prepare the person for their new status. A person is considered outside the ordinary life structures and is potentially exposed to a progressive state of movement to becoming.

The key to note is that before the 1930s, preparation for a first-born girl for FGM was unique and different from the other girls in the family. The father would buy a hive of honey and slaughter a lamb to make merry with relatives and his age mates to celebrate his daughter's transition. The skin from the lamb would be used to make a necklace that the father would give to his daughter as a blessing in her journey to adulthood (Koronya, 2003).

From the 1940s to the 1950s, the author reports that much of the preparation rituals had not been diluted. However, a notable change was that initial preparations involved the mother informing her daughter about her transition to adulthood. She was guided to go and inform her maternal uncles about the ceremony. It was a deviation from the earlier years when young women and other relatives were involved. Here the mother and an age-mate played a crucial role in preparation for the whole process. In the 1960s and 1970s, the value placed on FGM kept eroding, there was no elaborate preparation process, and the role was left to mothers and grandmothers who forced the girls to be circumcised. Men were no longer in the picture.

Apart from a change in preparation processes over the years, other aspects such as the type of FGM, circumciser, the caretaker, and payment, among others, have

changed. For example, the type of circumcision in the earlier period was FGM type 1, i.e., infibulation. However, over the years, it has changed to clitoridectomy. My experience as an activist informs me that the community translates the latter type of FGM as less harmful than the former. The circumciser role has also changed and is shared between traditional circumcisers and medical practitioners. The competition between them has led to traditional circumcisers lowering their prices for the service. The girl's fiancé initially made payment for the cutting process. However, with time the role has been relegated to the girl's mother (Koronya, 2003).

The process of FGM also previously involved a critical aspect of a caretaker. A person of high moral character was showered with gifts before the ceremony by the girl's family. In the earlier years, her role was to take care of the girl before the cut, where she would shave the pubic hair of the girl and ascertain whether she was pregnant. The caretaker had the authority to curse the girl if she refused to obey her instructions. The girl would be forced to procure an abortion through the caretaker who pushed a banana stalk into her womb if found pregnant. She would then be secluded far from her home and be prepared for FGM in two or three months. It conforms to Arnold Van Gennep's (1960) stages that it involves rites of passage patterns. These include three elements, i.e., separation, transition, and reincorporation. Over the years, the role of the caretaker became eroded with the choice of caretaker being transferred to the girl's age mates or mother's younger friends. It then shifted to the mother's role as the practice of FGM became more secretive and medical

practitioners were involved. Upon circumcision, the girl was secluded, and lessons on family life education continued through the caretaker.

The reincorporation stage shows new status to everyday life (Turner, 1969). Symbols accompanying the stage may include wearing new attire, ring, and other symbols. It was the last stage in the Ameru FGM ceremony. It drew much attention with gifts to the circumcised girl. However, the situation is different currently since there is a law against FGM, and parents fear being arrested. The situation has gone underground, and celebrations are done in disguise as other ceremonies such as birthdays.

The main reason for this detailed review is to give a sneak peek at the role of women and men, the rituals involved, and the power and relations surrounding FGM among the Ameru. Over the years, it is notable that women have been center stage in the process. While men were visible in the earlier periods, their role faded, and they diminished in their participation in the practice. It shows the power dynamics in gender where FGM is done to suppress sexuality of a woman for the sake of a man. The responsibility is left to women who do it for men with reasons such as marriageability being the center of discussion.

However, as an activist, I have found the situation self-diminishing and oppressive to the girl child. There is masking that leaves the girls suffering when women say they are doing it for the men, and men, in turn, say it is the women who do it for their girls. The review will also help compare how the current FGM interventions, such as ARPs, concur or deviate from the former practice.

## **2.4 Intervention strategies**

Recommendations are given on critical dialogue as a strategy to change social norms to reduce stigma among uncut girls and their families (Matanda et al., 2022). Including more awareness, media campaigns, parents sensitization, ARPs, counseling centers for uncut girls, enacting the anti-FGM law, and sensitization of circumcisers is also recommended by some (Ondiek, 2010; Shilabukha, 2010; Kavulya, 2010). Studies have been done on media as a strategy to influence the communication of FGM in Meru County. Findings by the researchers report the use of media and media ambassadors as a strategy to influence effective communication since the criminalization of FGM made the practice go underground (Kalangi, 2009; Kaunga, 2014). The studies also reiterated the use of local language in anti-FGM campaigns. While these strategies are among the ones used currently by activists, in my study, I will analyze the media content by activists from Meru County through the videos, websites, and written content they post as interventions to end FGM.

Mwendwa et al. (2020) did a study among activists to unveil the importance of locally-led initiatives to fight FGM within the Meru community in Tigania East and West of the county. Findings from the study reported the joint FGM abandonment initiatives to include ARPs combined with community sensitization for behavior change. Specifically, the activists participating in the study noted five alleged actions to accelerate ending FGM as reviving and supporting ARPs, encouraging fathers to be part of their daughter's upbringing (Nkumbuku, 2003), the inclusion of FGM as a



topic in the school curriculum and public fora, strengthening community policing, i.e., *Nyumba Kumi* and setting up orphanages for children. The church was mentioned as key to challenging the harmful practice at the community level. While the recommendations from the study are among the various ways FGM can be tackled, setting up orphanages may not be a favorable direction. Experience with activists from Samburu County, where rescue centers are established, informs the difficulty the girls face in being reincorporated into their families. Ostracization increases, and reporting the parents to authorities builds conflict within the family.

Alternative rites of passage have also been used by AMREF Health in Kajiado county as shown by Muhula et al., (2021). In the study, the authors reported that ARPs impact the lives of beneficiaries in that community-led alternative rite (CLARP) as an intervention contributed to the decline of FGM prevalence by 24.2%. The study relied on data from KDHS 2003, 2008-2009, and 2014. The results show that eradicating FGM requires more than one approach, which is why my study aims to fill the gap.

Other strategies by agencies such as UNFPA have been using youth caravans traversing counties. In 2020, Meru County was part of the youth caravan where youth were reached through a football tournament dubbed "Katisha" at Maua stadium. However, in my opinion, one-off events like this may not be effective. FGM as an issue requires dialogue and more than one community contact. Meru's other strategies include engaging men and involving reformed cutters as a strategy by organizations such as Men End FGM (Muchui, 2021). The reformed cutters are members of

*Ntaanira na Mwaambo* (alternative rites of passage) anti-FGM groups. The organization will be within my study scope to inform how the intervention works since it is unique and involves men engaging men.

## **2.5 Insider and outsider perspectives on FGM and change strategies**

In feminist studies, positionality is used as a method of inquiry to highlight details that underpin the social, political, and religious factors that form a research process. This study tapped into insider-outsider mode of positionality in FGM and strategies to end it. According to Ocran Benedict Okaw and Atiigah Godwin Agot (2022), on the one hand, an insider in research shares common variables with research participants. The identities include the race, ethnic group, culture, religion, and language. In this study, the insiders include the activists and participants in the three organizations under study and I as a researcher and activist from the study area. We are natives of the Meru community and share similar language and culture as people. As activists, we have exposure to considerable level of experience in ending FGM. This aided in data collection from the online platforms and further shaped data analysis process allowing legal and type of language content interpretation of data extensively in the study. My knowledge of the Meru community FGM practice and research methods informed a literature gap on inclusion the community and FGM research.

On the other hand, an outsider in research is unrelated to the community under research as it is with an insider. The outsider is not a member of the community under

research and their positionality is not always negative. In this study, international funders assume the position of outsiders. They have different ethnicity, culture, upbringing, religion among others to the Meru community. The funders come with models of ending FGM from experts' positions that suggest localized models of sexual health that engage with motivations of FGM among practicing communities motivations and suggest ways to end FGM. Perhaps the best way to engage is as seen in successful ways to end FGM by McChesney Kay Young (2015). The author reports that end FGM approaches that are effective should have three components. The components characteristics are that they must be community led, change social norms at community level and empower women. The author gave the example of such a program as the one by Professional Alliance for Development in Ethiopia (PADET) in Muketuri, Ethiopia and Tostan in Senagal. The programs taught women to identify and find solutions to issues affecting them including harmful practices like FGM. The approach aims to change social norms at community level apart from attitudes at individual level.

Some of the criteria applied by funding agencies limit the work of organizations. However well they might be intended to shape the end-FGM discourse, some of them cut the feet of activists more so at grassroots level. For example, a funder may require an organization to have capacity in terms of staff for it to qualify in funding; however, grassroots activists barely work with even basic salaries. The activists have their own strengths in activism and trying to make them become experts in different arms of their organizations undermines their potential. The funders would

rather facilitate towards enabling such organizations to have the staff they require than try to train those in the organization.

## **CHAPTER THREE**

### **Theoretical framework**

This study employed African feminist theories. The African feminist theories address specific conditions such as culture and the needs of indigenous African women. Ruvimbo Goredema (2010) states that African feminist theories stem from the desire to validate the difference in experience among women of Africa and African origin against Western mainstream feminist discourse. The African feminist theories are ethno-cultural epistemic frameworks that highlight African women's history, presently lived realities, and future expectations. The theory puts a spotlight on the differences between African and Western feminisms. African feminist theories approach issues with need for an intersectionality lens as a term from the western context that applies to FGM in my study. These intersections include examinations of culture/tradition, socio-economic and socio-political issues, the role of men, race, and sex and sexuality that, as Goredema (2010) indicates, are key features of discursive study of African feminism.

This section discusses African feminist theories and their approaches relevant to this study, giving an overview of key arguments and collaborations in scholarship, at regional and transnational levels. Amina Mama reiterates that after the flag independence of over 50 African nations, women who participated in anti-colonial

movements have had to pursue more struggles in independent nations because the nations delayed or went back to conservative patriarchal ideologies relative to the need for freedom and equality for African women. Women of the new nations have had to form feminist movements demanding freedom, the right to equality in areas such as economic equality, and often freedom from sex and gender-based violence (GBV) (Mama, 2019).

African feminism, as put by African Women Development Fund (AWDF), is about "our current struggles that are inextricably linked to our past as a continent, diverse pre-colonial contexts, slavery, colonization, liberation struggles, neo-colonialism, globalization, etc." (Nanjala, 2022). All these factors apply to my study on the persistence of FGM in Meru County. They will allow me to examine these aspects using current interventions to eradicate FGM.

Nyabola Nanjala (2022) posits that AWDF further informs that The African Feminist Principles Charter of 2006, which was an outcome of the first ever-African Feminist Forum in Ghana, has a central theme on sexual reproductive rights. The evidence draws heavily from information on social media potential and brings GBV forms such as FGM to our attention. Such information is what I used for my feminist content analysis. AWDF reports that millennial/fourth-wave feminism has rejuvenated African feminism through demonstrations and marches with high social media activity. Though not grounded enough in theory, calling out sexual violence against women has been vital. As part of the interventions that activists in Meru

County use involve the media, this study taps into the information to analyze the interventions.

Afropolitan/afro-futurist feminism as an aspect that connects African women and women in the diaspora with a future-oriented approach to liberation was also examined in the analysis of the interventions. Achille Mbembe and Laurent Chauvet (2020) define Afropolitan as a transnational culture that includes the political, cultural, historical, and aesthetic sensitivity in relation to differences such as race and gender. Afropolitanism involves domesticating these differences in knowledge of facts, remoteness, foreignness, strangeness, and remoteness to become closer to one. The authors argue that African precolonial histories are part of colliding cultures due to instances of forced migrations and displacements that keep them on the move. Further, Eke Gloria Ori and Njoku Anthony (2020) describe Afropolitan feminism as one, which makes the African woman comfortable, and at home in any part of the world while not taking the victim role and identity. It goes beyond the fixation on historical injustices and violence due to patriarchal society. It rather gives African women the optimism and confidence needed for them to assert subjectivity. My study on FGM and its persistence is seeking this direction.

Afrofuturism is described as a recall of the forgotten legacy and past, the acknowledgment of the current struggle and an attempt to include rights as part of equality in future forecasts of Black women (Upton and Joseph, 2021). The authors state that the goal is to disrupt the past through confronting race memories i.e.,

historical events. This aligns with my study since FGM as a practice has its historical events that are still haunting, yet there is hope to change for the better and the need to consider the rights of everyone, be it the victims, the insider or outsider i.e., activists, Meru women, girls and men and funders who support in the journey towards its eradication.

Molefi Kete Asante (1987) defines Afrocentricity as placing African ideals literally at the core of an analysis involving African culture and behavior, the phenomena is viewed from an African perspective in terms of people, the concepts and studied history from the worldview of an African. The approach negates cultural absolutism whereby one has inability to awareness of other people's culture and desire to impose their culture on others, (McChesney Kay Young, 2015). This is the framework my study applied in my feminist content analysis on the persistence of FGM among the Ameru. It involved analyzing FGM as a culture and why it persists in the community, why the community still upholds the harmful practice, and the historical origin of the practice.

Goredema's (2010) reflection on African feminism and theories about African feminism reveals important angles that need attention when dealing with African women's issues. These include patriarchy and double consciousness, i.e., looking at the self with the eyes of the "other" i.e., the empathizing from and insider-outsider perspective in African women's liberation journey. My analysis included consciousness of the two angles since they exist in the community I come from and in

me as a researcher. Some of the key concepts from African feminism used in this study are the use of data from text and videos done directly by African activists who have interacted with both insiders and outsiders in their FGM campaign work. Women, men, boys also create the content, and girls who experience the FGM vice in their community and face the reality of its effects in their day-to-day life.

Okech Awino's (2020) study on African feminist epistemic communities and decoloniality speaks about decolonization projects being used in higher education institutions as pathways to arbitrate neocolonialism. The author posits that some of the strategies used to fix the colonization in research in the United Kingdom and South Africa include hiring persons with diversity and syllabus review. He reiterates that the strategies are quick fixes that will not address the real issues anchored in structural deficits and the labor and penalties that come with the work. There exists gender and power that is racialized within them. The authors' study aligns well with my research since I am doing it in a higher education institution away from home and the topic involves a history of sexism, colonialism, and racial discrimination perspectives. The disparities are a subject to watch out in the contemporary research arena.

According to Josephine Beoku-Betts's (2021) study on contemporary standpoints and activism sites, there has been change in African feminist and gender scholarship over the last two decades. The author highlights that the knowledge produced by the scholars is based on traditional scholarship that is based on western ideologies, forms



of activism and engagement at state institutions and feminist movements regionally and transnationally. There has been feminist research and publication through collaborations, policy influence, and new forms of activism.

The theories in this section highlight several elements important to my research and analysis. These include the uniqueness in experiences of African feminists in terms of history, presently lived realities, and future expectations. The theories highlight on the intersectionality of culture, race, sex, and sexuality, socioeconomic, socio-political aspects of African feminism. Further the theories, highlight on precolonial contexts, slavery, colonialization, liberation struggles, neo- colonialism and globalization. Social media activity and feminism, afropolitanism, afrofuturism and Afrocentricity are highlighted too. Decoloniality project, regional and transnational activism and insider/outsider perspectives are covered. Finally, the stages and categories on people in adoption of innovation to abandon FGM practice are described. As a collection, these approaches help my analysis of my study.

## CHAPTER FOUR

### Methodology and Methods

My study uses Feminist content analysis as proposed by Reinharz Shulamit and Davidman Lynn (1992) and Sharlene Nagy Hesse-Biber (2013) feminist research practice Reinharz and Davidman (1992) in their exploration between feminism and methodology posit that there is no “politically correct” feminist research method. Reinharz further defines feminist research as what feminists do, various methods they use and the rationale for applying the methods. The approaches include interviews, social surveys, experimental designs, case studies, feminist ethnology, and oral history highlighting the contribution of women. Feminists methods are a diverse set of perspectives with historic origins and diversity that has played part in current controversies and accomplishment of international feminist scholarship. The authors challenge the existing stereotypes through explaining the history and origin of current controversies. My study explored case studies of three organizations working to end FGM in Meru county through analyzing online content such as interviews previously conducted, songs against the practice of FGM, social media platform updates and newsletters, podcasts and oral testimonies. The content was analyzed from a feminist perspective to understand the history in it and the impact on the current persistence of FGM in Meru County.

In this study, I used NViVo version 14, this is a qualitative data analysis software that supports researchers to bring in data, organize, discover, connect and

collaborate data to unveil significant implications from qualitative data in a fast way. The software was ideal since it imports collected data, organizes and analyses qualitative data such as the one in my research that includes audio, video, unstructured text, social media, interviews and articles. I created case nodes based on the three organizations and theme nodes based on the various methods the organization's use as interventions to ending FGM. The various themes guided in creating a coding framework based on codes that included interventions to ending FGM and reasons for its persistence. The codes include use of the law, use of Do No Harm language, structural gender inequalities fueled by patriarchy and the insider- outsider differences in the African-led movement to end the harmful practice. The codes included functions of FGM relative to the economic, political, and sociocultural organization of the community, historical positions of sexism, racism, and colonialism characterized by top-down approaches. Each case was analyzed and data put into the various codes to identify the themes and patterns forms. Interpretation of the results was done using the themes and patterns to determine the research implication.

Use of online data for research had potential limitation in that not all activities by the organizations are captured online. There could be more being done at grassroots level and not reported thus the researcher misses on it. In terms of analysis, the software used was ideal since it allowed for creation of new codes as the researcher continued with analysis to answer the research questions.

According to Abigail Brooks in Hesse-Biber (2013) feminist research practice. The author proposes feminist standpoint epistemology as an innovative approach to building knowledge that removes research boundaries between academia and activism. Scholars from a feminist standpoint perspective amplify the voices of women who are mainly members of the oppressed group to unveil the hidden knowledge that women have cultivated and lived with on the periphery. The feminist standpoint takes the knowledge by women into practice through applying lessons learnt from women's experiences towards social change and elimination of oppression among women and marginalized groups. Just like Reinharz and Davidman, the author recognizes the evolution of feminist standpoint epistemology over time. The approach does not categorize women experiences in to one group but recognizes the diversity in class, culture, race, geographical location and social realities and the type of oppression and exploitation endured in different forms and shapes. Feminist standpoint framework is a work in progress and scholars continue to apply new and innovative methods to capture diverse lived experiences among women. The author also emphasizes on the importance of dialogue and empathy to understand each other and create room for alliances without repressing differences. These will enable societies that are more just and improved conditions of women from within. My study involves both academia and activism and brings out the hidden voice in the perspective and lived experiences of women and the practice of FGM. These are based on structural gender inequalities that are invisible but deeply entrenched into culture and have become part of their daily lives. The study focused on Meru county

and the women within it recognizing that their experiences are different from other women who still undergo the oppression with the practice. Feminist standpoint framework being a work in progress allowed the flexibility of my study to analyse content based on internet text, songs, and videos of the three organizations in this study. Further, I intend to use the knowledge in this study for social change through alliances with scholars from my institution of study and this part of the world that is different from Africa.

My study getting into websites and social media platforms of the three organizations under study in this work. The organizations are feminist and at frontline working to end FGM in my study area. The organizations are also part of the main participants and beneficiaries of western feminist support through training by organizations such as the Global Media Campaign to end FGM and are the most active in contemporary online platforms. While having the organization's content online makes it free to access for anyone, I ensured I requested consent from the founders and management of the three organizations that I will be using their content. For data privacy, the founders assured that the names used in their platforms are not necessarily the names of the cases for confidentiality purposes. They also informed that content used has written or verbal consent from participants or their guardians. For Men End FGM organization, I went into the Facebook and twitter accounts and read their posts for analysis. I also went to their website and accessed their newsletter and videos for content to analyze. The other organization was care Health providers

which I did an analysis of a podcast about a girl known as Jelida who succumbed to complications after undergoing FGM. I also collected data on their social media platform on Facebook. For Maendeleo ya wanawake, I did look at content on their website, mainly their current participation in FGM related issues. The analysis involved talk, written materials, and media as expressed online by anti-FGM activists in Meru County in newsletter content, feedback from training videos and social media handles. I also analyzed policies, narratives, written text, speech meetings, nonverbal communication, visual images, multimedia, and videos for thematic content related to anti-FGM and its persistence in the county based on podcast story, songs, Facebook, Twitter, and websites.

## **CHAPTER FIVE**

### **ANALYSIS**

#### **5.1 Introduction and analysis**

The use of feminist content analysis method is used to discuss FGM persistence crisis by examining discursive practices in three organizations that actively campaign against FGM in Meru County. The process of analysis involved using NVivo software to first create a coding framework based on codes that organized data from each of the three organizations. Related concepts and existing

frameworks for ending FGM were used to explore the interventions used, their environment and their potential to contribute to FGM persistence in the region. These include codes on use of the law to end FGM, use of Do No Harm language, structural gender inequalities fueled by patriarchy and the insider-outsider differences in the African-led movement to end the harmful practice. Other codes included functions of FGM relative to the economic, political, and sociocultural organization of the community, historical positions of sexism, racism, and colonialism characterized by top-down approaches. The second step was to code the data by assigning the codes created with data from each of the three cases to organize and categorize the data for easier analysis. The third step was to analyze the coded data based on themes and patterns formed and the fourth step was to interpret the results and drawing conclusions to determine the implications for my study.

The organizations are Men End FGM (MEF), Care Health Providers (CHP), and Maendeleo ya Wanawake (MYWO) and are analyzed based on the interventions they use to end FGM and why it could contribute to its persistence. I have analyzed verbal and written text content from the organizations' websites, newsletters, blogs, policies, and social media handles, videos, songs, and podcast content. The platforms have been studied to help understand how the discourses in FGM campaigning play a part in the persistence of FGM. As a researcher and an activist there were potential biases in the analysis since I have used some of the interventions by the Meru county activists that I can term as successful or unsuccessful and others that they do not use and I perceive as successful such as use of Popular Education Model to end FGM.

Analysis of online content is also limiting since the content is not exhaustive of what is going on at grassroots level.

## **5.2 Men End FGM organization**

This entity rallies men and boys to be part of ending the FGM journey. This study analyzed content on the organization's website and social media handles. The emerging theme in the persistence of FGM was two-fold, namely, use of the Do No Harm approach and the effectiveness of the anti-FGM law among participants.

### **5.3 The Do No Harm Approach**

The discourse analysis is based on videos featured on the website, which are part of a project by the Men End FGM organization, UNICEF, Umoja Development Organization (UDO), and Samburu Pastoralist Child. I analyze social media handles and the 2021 newsletter content. This section will show the application of the Do No Harm approach versus the reality on the ground. The Do No harm Approach is a form of social change communication that advocates for sensitivity to people's culture and avoiding the use of language that instills fear, and that can lead to a backlash. It discourages negative criticism language that demonizes and blames culture. The approach strives to curb the long time contested issue of insider/outsider approach to situations that face African women such as FGM. Its application in FGM campaigning is effective but slow in implementation, possibly because it is a new method and direction that needs to be learnt and understood by activists.



In one of the songs by Napis women group in West Pokot singing against the practice of FGM, there is a verse from the music that goes, “We curse you circumcisers, if you continue, may you die, and may you be paralyzed.” (Napis Women, 2022)

In the Meru county training video, a medical professional is quoted terming the act of FGM as an "awkward, barbaric, and evil act" (Men End FGM, 2020). The statements contradict capacity-building recommendations to avoid backlash as disseminated by TGG in the Do No Harm (DNH) approach. While as an activist, I have used the DNH approach in our work, language use as part of eradication interventions should not forget that local context and the grassroots community best knows mode of communication. The locals have their language that they use to refer to various issues respectfully. Their expectation is that any outsider for whatever reason comes to their premises should address and use language in respect to their culture and they do not take disrespect lightly.

MEF uses videos to educate men about FGM. While the DNH approach advises on disclaimers before watching the videos due to potential trauma, the videos are graphic and may lead to trauma. For example, in one of the videos from MEF on the use of film visuals to educate men against FGM, a participant in Garsen commented, “Which type of men are we, if we watch our girls driven to the forest for such an act to be done on them? It has to stop with us now” (Men End FGM, 2021). Both elderly and young men in the anti-FGM training denounced the act. Some could not stand to watch videos and went outside, possibly because it was shameful or due

to the trauma that came with it. On the other hand, it is a form of technology utilization to provide education and lessons that would not be easily taught otherwise. The shock is triggered to shift attitudes among men.

An aspect of the blame game between men and women about FGM is conspicuous. In the 2021 newsletter by Men End FGM, there is a notable highlight as the author writes,

“There are blame games between men and women, each accused the other of facilitating FGM, with mothers stating that it’s men who ask them to take their daughters for the cut as soon as they are in their adolescence, while men distance themselves from the practice saying, traditionally, girls issues are left to their mothers and they have no role to play in regards to when a girl is subjected to FGM.” (Men End FGM, 2022)

At face value, women are victims while men are viewed as oppressors. However, the real issue is power relations. From the quote above, women are put in a position where they are tied in a cultural system that is a pathway to earn them respect. In this case, men are in charge. They, therefore, do not question the practice since they depend on it to survive. Men term their input towards FGM unnecessary since they trust their women to do right for their daughters. In cases where social status and financial security are derived from being wives and mothers, they adhere to marriageability rules. There is fear of marginalization, thus conformity by women is based on ignorance, and lack of information on alternative discourses (Gatwiri &

McLauren, 2016). The authors highlight that the diversity and lived experiences of the women are different and should not be put under one blanket.

The newsletter further reiterates the power politics that are exacerbated by disparities in education levels thus calling for understanding about the FGM culture and the environment in which it occurs in order to avoid harming the practicing communities in the process of change.

"Illiteracy level and limited exposure- FGM is more prevalent in areas with high illiteracy levels and low exposure to the urban centers. Girls living in these rural areas have been made to believe failure to undergo FGM means they will not get a husband, yet they value marriage. Consequently, this has fueled perpetuation of FGM albeit in secret." (Men End FGM, 2022)

The power politics concur with Njambi (2000) argument on the importance of understanding the other woman and the politics behind FGM. She argues that FGM is beyond patriarchy and the health effects that come with it as activists put it. Her view is that human bodies are images and products of culture that is anchored on historical and political performances of knowledge about them (Njambi, 2000). While she does not condone the practice, she calls for understanding the practicing communities before condemning their behavior. The author further informs us that feminists need to understand the definition of normal or natural as they advocate to end FGM does not apply similarly to all women and there are stories behind that surpass the practice that involve culture and political complexities. For example in her community FGM was practiced for identity to distinguish between them and neighboring communities,

and as a way of resisting colonial intrusions (Njambi, 2004). In my study analysis, on one hand, the words used in the song by Napis women's group and the medical professional feedback after anti-FGM training may be termed as contradicting the DNH approach. On the other hand the message they send and the authority they hold in the community is held with high regard and works well in the journey to eradicate FGM just like the FGM videos have been effective to educate men. The blame game issue of FGM by men and women on who harms the girl child brings out the power politics in the community and the harmful practice. In summary, the use of language is context specific and depends on who is communicating it to end FGM. There exists more than meets the eye in the practice of FGM; the power politics are deeply entrenched in structures of the community. It is important to be conscious about it as activists engage to allow dialogue with the practicing communities.

#### **5.4 FGM and the law**

This section will discuss content in relation to the prohibition of FGM Act 2011 in Kenya. The law stipulates penalties on anyone found to aid or abate in the practice of FGM.

In the Men End FGM website, there are songs produced by community members passing anti-FGM messages through singing. This was a project by UNICEF, MEF and a local organization in West Pokot known as UDO. The song by Alale Ushanga women's group from West Pokot. In the video song by Alale ushanga women's group from West Pokot, they sensitize people about the anti-FGM law. They

warn the circumcisers that, “It is upon you if caught in it; the government does not want it. FGM circumcisers go to church and accept God” (Alale Ushanga Women Group, West Pokot Kenya, 2022). These words in the song reflect the journey toward ending FGM since the 1900s when missionaries and the government started the fight to end FGM to the current FGM law and use of ARPs.

The critical analysis by Van Bavel (2022) on the law being imposed by the West shows influence by international power hierarchies on what can be said about FGM and who can speak. The findings too challenged the Africa and West aspect of cultural relativism and imperialism divide among the law critiques and interventions. As in this song, the words show that the government, which is viewed as the agency of imperialists, is the same mandated to instill compliance against the practice in the community.

The work of UNICEF on FGM in Africa is also reflected in the words of the song as Owino’s (2016) article illustrates how human rights, religion and culture discourses are mediated and represented in the UNICEF documents. The study findings revealed apart from a shift from naming of FGM to FGM/C, reference of the practice as harmful that resulted in its “medicalization” and from understanding FGC as a human rights issue to recognizing it as a cultural value and its prevalence with a focus on religion and culture. The inter-causal relationship of the government, religion, and culture in the practice of FGM encourages the need for eradication efforts to be done from a multi-sector approach.

The law has been part of FGM campaigns, and on October 26<sup>th</sup>, 2021, the MEF Facebook post reads, “Kenya passed the Prohibition of Female Genital Mutilation Act 2011, which criminalizes all types of FGM, imposes heavy penalties on perpetrators and anyone who aid the practice, and outlaws the medicalization of FGM.” However, the criminalization of FGM has led to the practice going underground. The law is also ineffective, with very few cases of prosecution against a rampant and ongoing vice. For example, in the video by Habasweni men in Wajir on the MEF website, participant, Bashir, says,

“I found my daughter sick due to the cut...she had complications. I took her to the hospital but could not report who did it because it was her aunt. She had to go to the hospital for three months. I had to pay 4500 shillings for her medical bill," (Men End FGM, 2022).

The statement concurs with Hughes (2018) report that resistance to the law is manifested in public protests, medicalization of the practice, secrecy of the process, cutting at younger age and foot dragging as well as not complying with the law. In some instances, police are attacked for interfering with the culture. Fear of being arrested has also led to the practice going underground and being performed late at night or medicalized. People fear their loved ones will be taken away and be seen as family betrayers. Thus, in the legal wavelength based on the Constitution of Kenya 2010, Ouma’s (2020) analysis on the efficacy of article 44 (3) in relation to female genital mutilation in Kenya recommends how to eradicate the malpractice through sensitization and involvement of relevant institutions. As an activist, even though the

law has played a part in eradicating FGM, I find this law quite lenient and its enforcement difficult.

An analysis of role of the law from the Alale Ushanga song confirms that the government enforcement of the law is banked on for successful eradication of FGM. However, the same law enforcers are sometimes faced with hardship in their bid to enforce the law since they are attacked and the community is not ready to release their loved ones to be locked up in jail as in the case of a testimony in the video by one of the anti-FGM trainees in Habasweni, Wajir. The song by Alale Ushanga women not only cautions anyone caught aiding and abating in FGM but also refers to those practicing it to go to church and know God. While criminalization of FGM partly works since it instils fear among community members, it needs to be accompanied by rigorous education and dialogue with the practicing communities since instilling fear resonates with the colonial master approach, which does not settle well with communities.

### **5.5 Care Health Providers**

In this section, analysis for Care Health providers will be based on a podcast story. Catherine Thiakunu, the founder of Care health providers, which exposes the power imbalances in the community and around FGM (Kipainoi, 2019), gives this story of a 14-year-old who succumbed to death due to complications of FGM through a podcast. It portrays the culture and role of men and women in it. Catherine tells the story as follows,

“Being an anti-FGM activist in Meru grassroots, the story came to my attention through local media networks. The plan was to bury Jelida unreported. The grandfather had gone to ask for a burial permit. One of the area pastors was suspicious due to the hurried burial ceremony. He raised the issue to the local authorities but Jelida’s grandfather said that his granddaughter was ailing from stomach complications. In Kenya, when someone dies at home, you have to report to the police before being taken to the mortuary. In this case, they wanted to bury Jelida hurriedly without disclosing the problem. After a thorough investigation from the local authorities, they found out that Jelida had undergone FGM a week earlier with six other girls.

The chief declined to grant the burial permit. The police had declined to collect her body arguing that Jelida came from a different geographical region from where she was subjected to FGM thus the local administration tried to shift the blame. Due to the involvement of the local authorities, the perpetrators and some of the family members went into hiding, therefore, abandoning her body in the mortuary. On February 5<sup>th</sup>, 2021, during an anti-FGM forum towards the zero-tolerance Day of FGM, I raised the issue on the platform that hosted over 20 stakeholders that take part in the eradication of FGM. I explained that there was 14-year-old girl lying in a mortuary for two months, and nobody owned up to it. I directed my question to the Permanent Secretary (P.S.) of the Ministry of Gender. I followed up the next day with the anti-FGM board, and by the end of the day, the P.S. promised to follow up with the case.



On the youth anti-FGM platform, we decided to raise the issue on social media to demand justice for Jelida. We did this for two weeks and we attracted the attention of mainstream media. The media attention brought Jelida's case to light, which worked to our advantage since everyone watched for action and the relevant authority acted effectively. Instead of the secretive local burial with few people knowing what killed Jelida, the issue was exposed to the whole world and lessons against the practice taken. As an activist, I came to conclude that there is power in media and activism done locally has potential for support globally.

The social media activism conforms with Nyabola Nanjala (2022), who informs on African feminism, drawing evidence heavily from information on social media potential and bringing GBV forms such as FGM to public. Further, Lewis' (2002) analysis on the project of strengthening gender and women's studies for social transformation in Africa is formed as a backdrop of foundational scholarship that utilizes information technology as a strategy to document African feminist work such as this podcast in my study. The African Women Development Fund (AWDF) reports that millennial/fourth-wave feminism has rejuvenated African feminism through demonstrations and marches with high social media activity. According to the report, though millennial feminism through social media activity is not grounded enough in theory, calling out sexual violence against women has been vital. In Jelida's case, through the youth anti-FGM network, the hashtag #FGMKilledJelida, a campaign that sought justice for the girl who died of FGM complications in 2018, reached over 10 million people globally.

I joined a group of other activists in Meru and County continued to lobby for Jelida's justice. The Director of Criminal Investigations Office (DCIO), Meru County enjoined us as an organization in the post-mortem process and the Kenya National Human Rights Commission provided a government pathologist whom we trusted since I have worked with them as a public health practitioner.

After the postmortem was carried out on February 22nd, 2019, the report was that Jelida died due to a complication resulting from FGM type 2. The doctor reported that she developed a wound with an infection that led to septicemia, leading to sepsis. In short, the bacterial infection spreads to the blood and then to the organs, which leads to organs failing.

The process of according Jelida justice became part of me. I contacted the office of the director of Public Prosecution (ODPP). I also approached the Federation of Women Lawyers (FIDA) to seek justice for Jelida. I contacted the Ministry of Health (MOH) Nyambene district hospital after the post-mortem so that we could engage the family to prepare for the burial. The family disowned the body and before I could claim custody in my capacity as a gender activist as per the law, I contacted the *nchuri ncheke* council of elders which is a powerful form of local administration that has the mandate to delegate verdicts in community appeals. The council of elders is actively engaged in the fight against FGM. This was the conversation I held with them:

“My fathers; I know you banned FGM in 1956. Please use your power to force the family to bury their daughter. The family has declined and claimed that the land is

communal, and according to the Meru culture, a childless person is considered barren, and their body should be disposed of. Their second claim is that she died as in the process undergoing the cut meaning she was a coward and did not pose well for the cutting process thus she is considered a bad omen.”

The Njuri ncheke decided before any custody they would lay a verdict and term the family cursed and an outcast. This shocked Jelida’s family, so out of fear they gave in to burying their daughter. On March 16th, 2019, an innocent young girl was laid to rest due to long-term effects of FGM. Through the youth anti-FGM network in Kenya, we organized a memorial service in the community. We wanted to sensitize the community that FGM kills. On March 14th, 2019, as anti-FGM youth activists from different parts of the country, we did a peaceful demonstration in Laare town, Igembe central. At this point, the *Nchuri ncheke* allowed us to use their land to build a monument for Jelida where anyone around the world would come and know that a girl named Jelida died as a result of undergoing FGM.

The presence of men handling the case after her death makes conspicuous the role of men in the community and the status quo of FGM practice. As Amzat and Razin (2014) put it, the politics of patriarchal, structural, and institutional power overwhelm women, thus the need for a critical approach to the institutionalized and systemic domination by men that makes the women unable to notice their contribution to reinforcing their oppression.

Jelida’s case in terms of legal action may not have been successful since the arrest of the perpetrators did not materialize. This has been a common trend in enacting the

FGM law whereby perpetrators are not reached due protection by the community as they hide. However, the attention it brought at local and global level serves as a lesson to communities that practice the harmful culture. For the longest time using FGM as potential cause of death among victims had no example and some communities would defend the claim by saying death due to FGM has never happened in their community. The impact on the community and survivors is that they have an example of harm and loss due to FGM at a closer level thus the need to eradicate the practice. The podcast by Care Health Providers proves that FGM killed Jelida. In various instances, our activism work has faced challenges when trying to explain the effects of FGM since it occurs in hidden and private parts of the female body. The plan to bury the girl hurriedly and secretively is executed by lead male figures in her family, yet the act was performed by a female figure. The process unveils the power relations in the family and community level, having the grandfather lead in process would mean no or few questions since he is elderly and respected. However, with the collaborative agency of activists and relevant authority the issue was exposed and became a lesson to community and the world at large.

### **5.6 Maendeleo ya Wanawake Organisation**

In this section, the analysis will be based on MYWO. The review will analyze alternative rites of passage (ARP) since it is the approach the organization pioneered in 1996 to end FGM. The alternative rites of passage have been a household name for MYWO. The components of ARP include community awareness raising, seclusion of girls for learning and a graduation publicly to mimic the traditional rites that include

seclusion, education by older women, blessings from elders, feasting and gifts exchange. However, the ARP practice that mimics FGM has had loopholes since the Eurocentric ideas that come with it are resisted by the community (Graamans et al., 2019). Use of Christian doctrines to teach the participants is seen as western since Christianity came from the west and prohibits FGM. They also overlook kinship relations. ARP models also neglect the bride wealth exchange that binds that binds families that are marrying with the obligation of provision and protection of the newly incoming wives (Droy, Hughes, Lamont, Nguura, Parsitau & Ngare, 2018) Exchange of gifts may strike as odd to outsiders, however, bridewealth among majority of Kenyan communities builds strong bonds between families from an ethnic confinement perspective (Hodgson, 2000). A critic of ARP compared the procedure of FGM among the Ameru as narrated by Koronya Charity (2003) in the literature review explaining why the intervention has not been able to eradicate FGM in the region. FGM holds sociocultural meaning, and its process is time-consuming, as narrated in the literature review. However, ARPs occur as a short time event, and it is not certain that donors may be willing to invest in the approach while weaving the cultural aspects, yet the impacts cannot be measured easily. However, Ayodo (2018), in his study on ARPs as a means of FGM eradication, recommends investment by County governments in promoting the programs through planning, policy, and resource allocation.

In the literature review, I outlined how FGM among the Ameru was preceded by one month's preparation with dances and education about community secrets and

adulthood issues. However, the beatings in three out of five stages of FGM preparation mirror the colonial master's behavior where the victim is beaten to conform to a situation where the culture and traditions are in this case. Further, the aspect supported by African feminism, as put by African Women Development Fund (AWDF), is about "our current struggles that are inextricably linked to our past as a continent, diverse pre-colonial contexts, slavery, colonization, liberation struggles, neo-colonialism, globalization, etc." (Nanjala, 2022).

The ARPs replaced the FGM ceremony with a five-day crash program where girls are secluded in an avenue, taught about their rights and religion, and reincorporated through a ceremony with certificates to show they have graduated. The church has spearheaded the ARPs with messages from the bible to teach morals and against FGM. Where FGM has to be part of a transition from childhood to adulthood, ARPs may not work. For example, there is a case in the Kuria community where 281 out of 289 girls who attended an ARP were reported to be cut (Prazak, 2007). The girls succumbed to pressure on their way home or were forced to be cut, thus fulfilling the cultural norm that initiation candidates return home after they are operated on. Prazak argues the local point of view was not consulted and recommended that competing interests in cultural continuity need to reach a consensus and agree on what is to be maintained and what is to be dropped since FGM is central to cultural identity. An exploration of ARP to retain its benefits of traditional teachings is key (Owino, 2016).

ARPs are done in segregated venues such as churches and privately, where the initiates come out publicly on the day of the ceremony. The process contradicts the initial process that involved the public by making it private and involving the family only. Planning of ARPs often skip the consideration of sociocultural contexts that are specific to the community, the power balance and imbalances between men and women, and the financial benefits and incentives that come with the practice. For example, in one of the stories by MEF on ex-cutters, one ex-cutter comments:

“Throughout my life, I was taught nothing but how to handle a knife that I used to circumcise girls and women. I used to perform circumcision on girls to earn a living. I could cut as many as 100 girls a day.” Said Chepotupolel, Mary knew nothing else but how to perform FGM to girls and women to earn a living, an art she was taught by her grandmother, who was also a 'cutter.'

ARP should, therefore, be part of a more extensive process that educates about FGM, sexuality, human rights, and community sensitization for change in mind and stereotypes against uncut girls. The involvement of men and support to ARP needs to be ensured.

Elders and traditional cutters are not involved in sensitizing them on the effects of FGM while at the same time recognizing ARPs as an equal practice to FGM. An NGO among the Maasai community known as SAFE Maa has attempted an alternative model of ARP known as Loita Rites of Passage. The NGOs replicate the traditional FGM ceremony but only replace the cut by pouring milk on the initiates' thighs (Van Bavel, 2021). Ex-cutters were involved in the process of LRP design and

implementation. However, concerns of fear of men marrying the LRP women and police crackdowns due to suspicion of FGM are challenging since the LRP remains a family affair. It is not guaranteed whether the initiates from the LRP will remain uncircumcised, and backlash against them has been reported. Women who had undergone LRP were barred from preparing meat for men in a cultural ceremony since "adult" women do the task. Community sensitization through dialogue is therefore required.

In their study in Elgeyo Marakwet County, Kenya, on analyzing the adaption of ARP for girls, Kipkorir et al. (2018) reported a slow uptake of ARP practice. The authors recommended sufficient training on gender roles and symbolic elements of the community to be taught with the involvement of women in teaching the Marakwet traditional values. Involving the community in the process that leads to ARP is essential to enable adaption. It avoids the consideration of ARPs as an outsider affair that interferes with culture. Change agents need to be trained by the community.

Religion is solid and essential for the community, so religious aspects ought to be integrated into the ARP. However, Hughes (2018), in a study on ARP, faith rights, and FGM abandonment campaigns in Kenya, terms ARP as a ritual to which faith leaders significantly contribute in the form of culture. Religious messages in the ARP events do not necessarily rhyme with secular human rights and law revolving around FGM discourses. The author argues that while the ceremonies revolve around human rights and cultural rights, internal or external actors neither define culture. The fluidity in definition of whether FGM is a rights issue or a cultural issue gives a place to



metropolitan/afro-futurist feminism as an aspect that connects African women and women worldwide with a future-oriented approach.

The analysis for the MYWO case is based on ARPs as option to the practice of FGM. However, even though ARPs have been used since the 1996, the practice of FGM has not ceased. Use of ARPs has been received as an outsider approach that does not consider the insiders perspective. Critics have attacked the content and the time of engagement with the community. There are also consequences on girls who go through ARPs since they are considered outcasts. A way of blending the ARP with the initial practices and lessons while excluding FGM has proved nearly futile among activists, (Hughes, 2018).

### **5.7 Working with an insider-outsider perspective**

In this section, the role of insiders and outsiders in the communities that practice FGM will be discussed. There has been controversy with valid claims from activists such as Nimco Ali of the Five Foundation for lack of sensitivity by outsiders on people's culture such as FGM. The project focused on use of communication in words that do not discriminate, retraumatize or revictimize those who practice FGM. The activist argued that language alone cannot be used to end FGM and those who practice know best on how they can end FGM if given a chance to participate from their perspective. The result has been backlash and continued practice of FGM especially trying to end it while referring it as "barbaric" and "unchristian" like it was in the colonial times.

However, outsider's perspective cannot be blindly ignored while engaging as activists since the activists neither play the role of outsider nor insider in their communities. The activists are not outsiders in their community since they belong there and understand their culture, yet, again they are not insiders since they are against a practice that part of their community holds dear to. They also come along with outsiders such as funders and researchers in the community and viewed as traitors of community values. By attacking FGM with outsiders they are seen as ganging up to attack their own community.

While the three organizations under study deal with FGM from an insider position, they are also viewed as outsiders. For example, MYWO activists who have been historically older women who have gone through FGM are considered insiders since they are survivors of FGM while at the same time they are outsiders since they are against the practice. For Care Health Providers, being led by person who did not undergo FGM makes it an outsider affair yet the founder considers herself an insider for being born in the community. When it comes to Men End FGM, the men are considered outsiders since FGM related issues have historically a women issue, yet, the men are the authority in homes and culture custodians.

Structural gender inequalities have not been effectively addressed through women's economic empowerment. While the three organizations strive to end FGM using approaches such as media and men engagement by MEF and, economic empowerment by MYWO, the strategies are limited since they do not address the root cause. Communities practicing FGM have gender inequalities entrenched in structures

and lack of economic empowerment among women to enable them access and own resources plays part. The women have no say since they do not have control over productive resources thus making them vulnerable to decisions related to the resources by men whose authority of ownership and use rests in. According to Ahinkorah et.al. (2020) study on socio economic determinants of FGM in sub Saharan Africa, the results showed that FGM is likely to occur in households with poorest wealth quintile compared to their counterparts in the richest wealth quintile.

Currently, the strategic plan 2019 -2024 for Maendeleo ya Wanawake has women's economic empowerment as part of their work; “In the next 6 years, social and economic empowerment will one of the three key thematic areas of our focus” p.12. However, their effect is yet to be felt at the grassroots level. They also do not target women at the bottom of the pyramid who are vulnerable and affected by socioeconomic issues that make them unable to resist pressure to support FGM. It is a lack of economic equality that leads SGBV like FGM.

Amina Mama (2019) reiterates that after the flag independence of over 50 African nations, women who participated in anti-colonial movements have had to pursue more struggles in independent countries because the nations delayed or went back to conservative patriarchal ideologies relative to the need for freedom and equality for African women. An MEF post supports this fact on the 30th August 2021 on the Facebook platform stating, “Female Genital Mutilation is frequent in economically depressed communities. Parents demand 'bride prices and some cutters revert to the practice owing to economic hardship. This is a grave problem for girls

who suffer denial of their fundamental human rights.” Further, another notable highlight of the Men FGM newsletter 2021 reports that, "Poverty and value of cattle - girls are seen as a source of wealth. A girl who has undergone FGM fetches higher bride wealth for the family. As such, FGM is seen as a means of enhancing a family's livelihood through which they will get more heads of cattle when the girl is married off." (MEF, 2021)

The story of Elizabeth by UDO on the MEF website narrates how economic disparities, FGM, and child marriage go hand in hand. Due to socioeconomic status worsened by drought and COVID-19 in 2021. Elizabeth was made the sacrificial lamb for their family's debt. She was to be married off to a 60-year-old man. She was abducted by three men and carried to her husband to be, "Her mother was unaware of her husband's plan to marry off their daughter. She was shocked by the betrayal..... she remembered when this happened to her years ago and she knew her daughters education would be cut short." (MEF, 2021). Her mother's plea to save her daughter was met with silence by the father, who justified his act of marrying off her daughter, as a way to pay a debt he had with the family and, on top of it, would bring something for the mother to survive on in the challenging economic time. Luckily, she fled back from her new home and got home to find her mother, who was happy to see her. To save her from early child marriage, she took her to a rescue home where she now stays and goes to school. Even though the mother's action contradicts the Kenyan government preference that discourages institutionalizing children, in Elizabeth's case, the move was the better choice in the situation. There is need to

balance between cultural relativism and politics such as Eurocentrism that are behind FGM that might silence the voices of those who are against the practice (Kathy, 2004). These include institutionalizing children since the African family culture has always preferred children to grow in a family setting with relatives as parents or guardians.

The issue of FGM and the economic lens is reiterated in the Men End FGM newsletter first issue for the year 2022, where the author writes, “Poverty and value of cattle - girls are seen as a source of wealth. A girl who has undergone FGM fetches higher bride wealth for the family. As such, FGM is seen as a means of enhancing a family’s livelihood through which they will get more heads of cattle when the girl is married off” (Men End FGM, 2022). The issue of bride price entrenches the structural gender inequalities since it also makes the man feel entitled to the woman as his property. More gender-based violence is likely to occur in marriage since the woman is “owned” by the man. Among the Pokot and Sabits ethnic group in Uganda, FGM is a means to marriage no matter the age (Kuka, 2004). If a girl delays for one or two seasons of circumcision, it is difficult to be married off since men rush for the younger graduates after FGM. On this premise, parents who want bride price coerce their girls into FGM to enable them get married easily. Bride price is withheld until a girl is cut and those married off without being circumcised are send back to their homes for the ritual. Circumcised girls therefore attract bride price.

Trends to end FGM started with the colonial master, followed by the church, and then the government. ARPs have been done among the Ameru since 1996 and

continue to date. However, the rituals involved in ARPs did not work since they were deemed as brought by outsiders. Recent campaigns have encouraged African –led movements and approaches to the issue. However, replicating interventions such as ARPs may not solve the situation. The root cause of FGM has to be addressed by questioning the structural gender inequalities that disempower women. The disempowerment comes from disparities in terms of power division and resources.

The insider and outsider perspective is also reviewed from a global level in this thesis. A blog by MEF highlighted controversy about the The Girl Generation (TGG), an African led movement funded by the U.K government through DFID (Mwebia, 2018). The blog was a response to Nimko Ali, a British social activist of Somali heritage who had a controversy about the TGG African led movement delivery of its mandate. The activist argued that the movement did not deliver as expected and should not be funded anymore. MEF responded to the controversy from a grassroots organization lens recommending various measures that should be considered in the next round. The measures exposed some of the reasons why FGM may persist if they are not addressed and reiterate with Mathonsi and Tallis (2022) on feminist advocacy voices and actions where advocacy is seen as western and donor driven. The author gave the following as some of the mitigation measures; dividing the fund into components managed by different organizations and not awarding the grant to one entity. Strengthening the structures of grassroots organizations with accountants and project managers at regional level, scale up grassroots organizations work based on quality and not quantity, include innovations and ideas component to

end FGM and maximize impact instead of using cosmetic events. The author further recommended having conversations at grassroots and national level from boardrooms and supporting activists who are flexible and can conceptualize issues of Do No Harm and Social Change Communication in their context to maximize impact. Finally, the author recommended men and boys' engagement in FGM campaigning. This exemplifies the importance of enhancing intellectual quality relevance in activism to enhance social transformation in Africa as Lewis (2002) recommends. It is a strategy to fight neocolonialism, silencing, and the misrepresentation of African women and situations that face them.

The recommendations made bring out the weaknesses of grassroots organizations and the solutions to their problems; however, it also highlights the opaqueness between funders and fund recipients. However, there are structural deficits that come with the current quick fixes of neocolonialism projects in institutions (Awino, 2020). The strategies do not consider the penalties of power and racialism that are currently facing anti-FGM activists. There is need to engage in new forms of activism that engages states, institutions, and feminist movements at regional and transnational levels (Beoku-Betts, 2021). Power relations in the field between activists in their communities require a cautious engagement to remove the insider/outsider aspect from it (Makana, 2018).

Based on MEF Facebook post and newsletter caption, it is evident that economic situations contribute largely to the practice of FGM. Women economic empowerment model for social change to stop FGM is recommended by Toubia and Sharief (2003).

The authors posit that at the core of the framework is to prioritize and to promote empowerment of women and girls through awareness creation and increasing their decision making abilities through economic empowerment. Among the organizations discussed in this study, none has clearly focused on economic empowerment as a root cause. The blog to DFID on what activists want clearly shows that activists know what they need, yet the politics of funding deny them the opportunity to perform their work to their full potential.

## **CHAPTER SIX**

### **6.0 FINDINGS AND RECOMMENDATIONS**

#### **6.1 Findings**

Despite advocacy by TGG movement on use of DNH approach among activists, there are traces of use of harmful language from trainees thus communicating the context specificity of language use. Outsiders as they recommend on language use that communities have their language and know best on when and how to use it should know it. While DNH advocates for no harm, some aspects such as use of graphic videos to train men about FGM have been seen to work in attitude change thus reinforcing on the relativity of when and how to use harm for ending FGM.



The case of Jelida succumbing to FGM brought out the role of men in perpetuating FGM. The presence of men handling the case of Jelida's case after her death makes conspicuous the role of men in the community and the status quo of FGM practice. There are gendered functions of FGM relative to the economic, political, and sociocultural organization of the community.

The ARP as a practice to eradicate FGM was a mainstay for Maendeleo ya Wanawake organization. However, the continued practice of FGM despite the intervention, which started long time ago during colonial times, speaks of its inadequacy. Hughes (2018) argues that while the ceremonies revolve around human rights and cultural rights, internal or external actors neither define culture. The fluidity in definition gives a place to metropolitan/afro-futurist feminism as an aspect that connects African women and women worldwide with a future-oriented approach.

The insider-outsider aspect is still an issue between the activists and the funders and even between activists and activists themselves. This aspect brings the need to engage with communities that activists come from with ebb of flow even if it is on ethnographic aspects to avoid the hierarchies and power relations for them who are neither insiders nor outsiders in their community (Makana, 2018).

## **6.2 Recommendations**

The order in which these recommendations are to be implemented is not linear. This is because different communities are at different stages economically, socially and politically. It is therefore prudent to engage in dialogue with the community to identify their needs and prioritize with them. The community dialogue approach leads

to project ownership and unveils the power of the often-left out ordinary people.

Organizations should implement FGM intervention strategies that are all round in terms of social, economic, and political aspects and that consider the existing structural inequalities entrenched in the society. Such approaches are documented by McChesney (2015). The author recommends that end FGM approaches that are effective should have three components of being community led, change social norms at community level and empower women. The author gave the example of such a program as the one by Professional Alliance for Development in Ethiopia (PADET) in Muketuri, Ethiopia and Tostan in Senagal. There are politics behind FGM that make it complex to eradicate and activists need to understand this so as to help them get a solution to the problem without viewing the women as passive victims and knowledge objects in their work. The potential barrier for this recommendation is getting support especially in funding which covers the holistic aspects of community needs. One way to overcome this challenge can be through need prioritization with the community. The other approach is for the donors to be flexible in funding and not to come with stipulated ways of grants use yet their idea may not be resonating with needs at hand.

FGM laws should be based on dialogue since using it to instill fear among those who practice duplicates colonial master approach, which leads to backlash and resistance. As Van Bavel (2022) reports on the law being imposed by the West and influence by international power hierarchies on what can be said about FGM and who can speak. Hughes (2018) further reports that resistance to the law is manifested in stunts such as public protests, medicalization of the practice, secrecy of the process,

cutting at younger ages and foot dragging as well as not complying with the law. For FGM and the law, there is a need to understand that FGM involves children and their loved ones, thus the need to incorporate interventions that are non-combative and focused on dialogue and ownership of abandonment by the community.

Organizations should focus more attention on the role of patriarchal power in maintaining FGM practice and on shifting structural changes. As Amzat and Razin (2014) put it, the politics of patriarchal, structural, and institutional power overwhelm women thus the need for a critical approach to the institutionalized and systemic domination by men that makes the women unable to notice their contribution to reinforcing their oppression.

Change agents engaging with FGM practicing communities should consider insider/outsider aspect. Caution should be applied when engaging with each other including the community on identity since any form of power relations overrides the actual aim of ending FGM. The feminist voices and actions as Mathonsi and Tallis (2022) report has feminist advocacy voices and actions where advocacy is seen as western and donor driven and needs to be localized based on needs of women's communities.

### **6.3 Discussion of recommendations**

Engaging in FGM campaigning while considering the existing gender inequalities would mean the social, political, and economic aspects of practicing communities are considered. An understanding of the three aspects would bring together agencies in private sector, civil societies, and government actors with expertise to support in

ending FGM. The support may occur in form of funding or in kind. However, in terms of funding, there would be challenges since most activists depend on external funding which has not been reliable partly due to lack of skills in writing grants and knowing where opportunities exist. Locally there exists a funding kitty for county women representatives, who can cater to FGM campaigns, however, the funds are inadequate, and sometimes it never reaches anti-FGM activism. There are also small grants given to activists on issues such as media amplification, which make it worthwhile to campaign as other areas of funding are explored. Finding local ways of funding through income generating activities among organization is likely to help organization navigate through funding challenges.

Implementing the FGM Act of 2011 using dialogue will involve first educating the community about it along with the effects of FGM. Little is known about the law among community members and even the law enforcers. Educating the community i.e. parents, teachers, religious leaders, and law enforcement team such as chiefs, police, prosecutors, and community police would be ideal. This would enable them to act from a point of knowledge. The training would need funding still to enable communication, transport, and meals and follow up which are a challenge to many grassroots organizations. The current enabling situation is that the community can offer venues for training and there is an existing law to be disseminated to trainees. Collaborating with communities on ways they can contribute in their own process of learning would ease the budget. Active seeking of funds through grants and investing in income generating activities are strategies to overcome the challenge.

For the longest time, engaging men in the fight against FGM had not been explored. Men are authority figures in the community and involving them from grassroots level to national level is a game changer. The situation would require using male influential figures through approaching them to talk about FGM. The challenge would be getting all of them say it together since for example, in Kenya, the president has been supportive of campaigners against the practice but the members of parliament do not do it due to fear of losing votes. So far engaging with elders in the community has worked since they are the culture custodians; however, more men need to be brought on board. Organization such as Men End FGM has also been able to influence agencies such as UNICEF and UNFPA to act in support of men and boys.

Ability of change agents to engage with FGM practicing communities while considering insider/outsider aspect will ensure supremacy battles of race, sex, and gender are toned down with sensitivity at the core. Both funders and funding recipients will treat each other with respect and dignity that is required. The challenge is that there are historical trends of dependency among funders and recipients and vested interests that have recently led to suspicions between the two. There have however been previous engagements that have borne fruit such as TGG movement.

There is also scholarly writing that allows writers to express themselves such as my study.

## CHAPTER SEVEN

### CONCLUSION

#### 7.1 Opening

While violence occurs across all social classes, FGM as a form of GBV is performed among specific communities in different parts of the world. The journey towards eradication of harmful practice dates back years to when colonial government was in place. Despite backlash in the early years, the church took part to champion against the act. Advanced milestones to abandon the practice took place after independence; the governments of the day have been putting tremendous pressure to comply with the international laws that prohibit FGM as an act against human rights. It was not until 2011 that the Prohibition against FGM bill was made to law.

The last decade has seen increased effort by both the government and civil societies to act in favor of eradication FGM. President Uhuru Kenyatta pledged to fast track the process of ending FGM by 2022. Foreign actors have also been part of the acceleration and galvanizing of local efforts to end FGM through African led movement. However, even though the efforts have yielded an overall reduction in FGM nationally, persistence of FGM is rampant in some parts of the country. This study demonstrates that for efforts to end FGM to work effectively, it requires a multi stakeholder approach where activists and the funding and grassroots community continuously weave in dialogue to create a unanimous move to eradication of FGM in the same wavelength. This chapter highlights the study findings of FGM persistence

crisis, the challenges of the study approach and recommendations for future study and action.

## **7.2 Summary of findings**

In relation to MEF and the Do No Harm language, on the one hand, the words used in the song by Napis women's group and the medical professional feedback after anti-FGM training may be termed as contradicting the DNH approach. On the other hand the message they send and the authority they hold in the community is held with high regard and works well in the journey to eradicate FGM just like the FGM videos have been effective to educate men. The blame game issue of FGM by men and women on who harms the girl child brings out the power politics in the community and the harmful practice. In summary, the use of language is context specific and depends on who is communicating it to end FGM. There exists more than meets the eye in the practice of FGM; the power politics are deeply entrenched in structures of the community. It is important to be conscious about it as activists engage to allow dialogue with the practicing communities.

An analysis of role of the law from the Alale Ushanga song confirms that the government enforcement of the law is banked on for successful eradication of FGM. However, the same law enforcers are sometimes faced with hardship in their bid to enforce the law since they are attacked and the community is not ready to release their loved ones to be locked up in jail as in the case of a testimony in the video by one of the anti-FGM trainees in Habasweni, Wajir. The song by Alale Ushanga women not only cautions anyone caught aiding and abating in FGM but also refers to those

practicing it to go to church and know God. While criminalization of FGM partly works since it instils fear among community members, it needs to be accompanied by rigorous education and dialogue with the practicing communities since instilling fear resonates with the colonial master approach, which does not settle well with communities.

The podcast by Care Health Providers proves that FGM killed Jelida. In various instances, our activism work has faced challenges when trying to explain the effects of FGM since it occurs in hidden and private parts of the female body. The plan to bury the girl hurriedly and secretively is executed by lead male figures in her family, yet the act was performed by a female figure. The process unveils the power relations in the family and community level, having the grandfather lead in process would mean no or few questions since he is elderly and respected. However, with the collaborative agency of activists and relevant authority the issue was exposed and became a lesson to community and the world at large.

The analysis for the MYWO case is based on ARPs as option to the practice of FGM. However, even though ARPs have been used since the 1996, the practice of FGM has not ceased. Use of ARPs has been received as an outsider approach that does not consider the insiders perspective. Critics have attacked the content and the time of engagement with the community. There are also consequences on girls who go through ARPs since they are considered outcasts. A way of blending the ARP with the initial practices and lessons while excluding FGM has proved nearly futile among activists, (Hughes,2018).



There is need to engage in new forms of activism that engages states, institutions, and feminist movements at regional and transnational levels (Beoku-Betts, 2021). Power relations in the field between activists in their communities require a cautious engagement to remove the insider/outsider aspect from it (Makana, 2018). Based on MEF Facebook post and newsletter caption, it is evident that economic situations contribute largely to the practice of FGM. Women economic empowerment model for social change to stop FGM is recommended by Toubia and Sharief (2003). The authors posit that at the core of the framework is to prioritize and to promote empowerment of women and girls through awareness creation and increasing their decision making abilities through economic empowerment. Among the organizations discussed in this study, none has clearly focused on economic empowerment as a root cause. The blog to DFID on what activists want clearly shows that activists know what they need, yet the politics of funding deny them the opportunity to perform their work to their full potential.

### **7.3 FGM persistence discourses**

As a form of GBV, FGM is also an issue of power and relations between women and men. The organizations under study in this thesis need to uphold the DNH approach in their context to avoid backlash from the community. While the law prohibiting FGM may be seen as a form of victory against FGM, the community needs sensitization and dialogue. According to the diffusion of innovation stages of how new behavior spreads, the three organizations studied in this thesis are at the first two stages. The first stage comprises innovators who are the first to adopt new ideas.

They are willing to take risks since they work within a community where FGM is a social norm and laggards defend the culture threatening the innovators to stop fighting their culture the way the Care Health provider founder was warned when she pursued the case of Jelida. Innovators tend to be young and in the youth stage, which is evident from the Men End FGM and Care Health Provider founders. In the FGM campaigning for organizations in this study, the activists oscillate their work around elders, men, law enforcers, religious leaders, and government leaders. The insider view of FGM informs that while outside interventions have been part of ending FGM campaigning, African-led campaigning is now encouraged to give insight from an insider understanding of issues that resonate with the community experiences. Aspects such as men and youth involvement are a trend compared to previously, where women were the significant campaigners.

#### **7.4 Challenges**

This analysis was based on internet and social media to define how communication plays a role in persistence of FGM among the Ameru. The analysis came with numerous challenges but also an opportunity for feminist content analysis method. The process required new data collection methods in new forms of content away from texts to language integrated in form of design and data in podcasts, social media handles on Facebook, blogs and Twitter.

The content is not because of activists alone, but social media also brings out elements that remain to be assessed and understood. It allowed identifying the gap exists where and the space for competing discourses and what they are. The schedule was also a challenge within the study period, and access to people working in the domain is minimal, especially during the COVID-19 pandemic when campaigns are minimal due to girls' vulnerability in the region. Discourse analysis contributes to the identification of shortcomings in the existing mainstream approaches.

### **7.5 Contribution of the research**

“When we set out to improve lives of others without fundamental understanding of their view points and quality of experience, we do more harm than good.” (Lauren, Reichelt, Tikkun, Winter 2011)

Feminist content analysis from feminist standpoint epistemology approach is innovative and removes research boundaries between academia and activism like applied in this study. I was able to amplify the voices women and girls facing the FGM vice by unveiling the language used in text, videos, and social media content. Sharlene Nagy Hesse-Biber (2013) emphasizes on the importance of dialogue and empathy to understand each other and create room for alliances without repressing differences to enable a truly just society.

To concur with MEF’s November 1st 2021 Facebook post, “Ending Female Genital Mutilation, child marriage, and other forms of GBV necessitate active engagement from all sectors of society, with a focus on susceptible people and developing gender equality in Africa's patriarchal societies.”

I intend to conduct this research in person when I get back home and would recommend other researchers examine their approaches in their FGM campaigning locations. Conducting the research in person will not only bring out the eradication of FGM from activists' point of view but also the social inequalities that inhabit where FGM happens among the Ameru. I also plan to engage the community using a participatory and critical consciousness approach such as the popular education model that we have used among the Abagusii in Kenya. It seems to be successful since it taps the mind. At the same time, to eliminate gender disparities, economic empowerment will be part of the approaches in the organization I am registering. I look forward to being the first FGM campaigner to create a model ward (the smallest unit of administration that makes up and sub-county, then a county) in our county, where residents will declare the area FGM free. In this region, FGM as a practice will not be a threat due to raising awareness of residents and holistic political, social-cultural, and economic empowerment of women and girls. I will also be cautious about collaboratively engaging insider and outsider perspectives to avoid discounting foreign input or blindly embracing insider perspectives. My study contributes to existing knowledge, as far as FGM is concerned by drawing attention to various stakeholders to focus on the role various NGOs that in the forefront of fighting against the practice FGM, play in the persistence of the practice. My findings will help the NGOs, adopt interventions that are culture sensitive and have the interests of potential victims of FGM, which is eradication of the practice. The government, through my findings will formulate policies that will help regulate the

interventions of various local and international NGOs by making sure that do not compromise the human rights of girls.

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