

**UNIVERSITY OF GHANA**  
**INSTITUTE OF AFRICAN STUDIES**

**‘ALTERNATIVE’ FEMALE GENITAL CUTTING DISCOURSES? A  
STUDY OF THE MAASAI OF KAJIADO, KENYA**

**BY**

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## DECLARATION

I, Rosemary Wamuchii Kimani, hereby declare that this thesis is my own work and no part of it has been published or submitted for another degree elsewhere. Excerpts from other sources have been duly acknowledged and I have not copied any author's work with the intention of presenting it as my own. All the interviews conducted for the purposes of this research have also been duly cited. It is submitted for the award of a PhD in African Studies at the Institute of African Studies, University of Ghana.

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## **DEDICATION**

To the glory of God, I dedicate this work to the blessed memory of my late father, Mr. Stephen Kimani, a great visionary of his time. He believed that his daughters were just as well-endowed as his sons and did all he could within his means to give them what they needed to fulfill their full potential in life. Today, I reap the benefits of his fruitful labor of love.



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I have had a long standing interest in how context impacts communication and construction of knowledge and I am grateful to the Almighty God for granting me the opportunity and ability to research this topic. There are a lot of people who contributed one way or other to the completion of this study.

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## ABSTRACT

The study examines knowledge construction on female genital cutting (FGC) and notions of womanhood and the resultant discourses by the Maasai community in Kajiado, Kenya. There has been a global upsurge in anti-FGC interventions by the international community, feminist movements, national governments, and NGOs in the last three decades which have described FGC as a barbaric practice that violates the health and human rights of docile and helpless women and girls.

Kajiado has been a recipient of those interventions but reduction in prevalence of FGC has been slow in the community. This study interrogates how the Maasai construct FGC and womanhood. The study utilized qualitative methods in data collection and analysis: 34 in-depth interviews of men and women above 18 years of age and three focus group discussions of naturally occurring women's groups.

Overall, the study reveals a multiplicity of discourses on FGC in the community. Five of these are steeped in Maasai culture and include the supernatural, social transition, sexual morality, economic benefit and social integration discourses. The other five are influenced by the anti-FGC campaign messages and other modern 'alternative' concepts and include the medical, modernistic, sexual fulfilment, bodily integrity discourse, and the illegality discourses. Another key finding of the study is that although the Maasai demonstrate familiarity with the anti-FGC arguments, they have not owned those arguments as it is demonstrated by their regular use of the phrase "they say" in their reference to those arguments.

The older women's categorical rejection of claims in those arguments that FGC results in loss of sex drive, excessive bleeding, difficult child birth and death clearly shows that exposure to the anti-FGC arguments does not necessarily convince targets of the interventions. The study also found out that Maasai women are not passive victims of patriarchy and tradition but are rather organizing themselves into groups called '*chamas*' from which they are clearly prioritizing their agency through the raising of independent incomes, access to education and skills training for themselves and their daughters to free themselves from subservience to men, culture and confinement to the domestic sphere. Clearly, FGC is not considered by Maasai women as big a problem as lack of economic independence and education. Further, the assumed equivalence of agency of women with rejection of FGC is undermined by the fact that young educated women are not automatically renouncing FGC, some are actually demanding it. Based on these findings the study recommends an all-inclusive community engagement strategy by the change agents that will clearly empower the Maasai people to construct development in their own terms by naming their major concerns and identifying culture-specific ways to address those concerns. In so doing, the community will be encouraged to get more involved in their own culture change and development. This study contributes to the scarce literature on knowledge construction on female genital cutting, one of the most hotly debated issues regarding African women, by practicing communities. By highlighting the intricacies of the contexts within which this construction is done, these findings lend support to the social constructionist perspectives.

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## **LIST OF ABBREVIATIONS/ACRONYMS**

AMREF	African Medical and Research Foundation
GOK	Government of Kenya
IEC	Information, education and communication
KDHS	Kenya Demographic and Health Survey
KNBS	Kenya National Bureau of Statistics
MDG	Millennium Development Goals
MYWO	Maendeleo Ya Wanawake Women's Organization
NHIF	National Health Insurance Fund
PATH	Program for Appropriate Technology in Health
SDG	Sustainable Development Goals
WHO	World Health Organization
YWCA	Young Women Christian Organization

## CHAPTER ONE

### BACKGROUND TO THE STUDY

#### 1.0 Introduction

Female genital cutting (FGC) has been practiced by many communities on the African continent and elsewhere for centuries. Early in the 20<sup>th</sup> Century, however, the practice came under negative scrutiny of the Christian missionaries and the colonial administration who referred to it as an uncivilized, barbaric and immoral practice that violated the health of women. The practice came to the larger attention of the West in the 1970s especially through the UN Decade for Women celebrations and since then, the West, together with the international community, has been the most forceful and consistent voice in attacking the practice. The discourses emanating from the West which are referred to as the dominant discourses on FGC have framed the practice as a gross violation of the health and human rights of women and girls. In those discourses, women are seen as totally subservient, passive, and voiceless victims of abuse in a discriminatory and oppressive gender system that is governed by absolute patriarchy bent on controlling their sexuality at all cost (Hosken 1979, Abusharaf 2001, Rahman and Toubia 2001). Women are presented as having no agency especially when it comes to making decisions concerning their own bodies and sexuality. The report on the practice by Fran Hosken (1979) is often quoted in those discourses as ground-breaking especially in its contribution to framing the practice as female genital mutilation (Shell-Duncan & Hernlund, 2000).

Adding their voice to those discourses, African activists Rahman and Toubia (2001) argue that framing the practice as a violation of women's rights is highly appropriate and critical for raising the political profile of the neglected rights of women as well as for generating dialogue on how to stop the practice. Since the 1990s, the World Health Organization (WHO) has stated categorically that the practice is universally unacceptable because it constitutes violence against women and girls, and is an infringement on their physical and psycho-sexual integrity. In 1991, the WHO recommended that the UN adopt the term female genital mutilation (FGM) and subsequently, the term has been widely used in UN documents and interventions. Svoboda and Darby (2008: 286) observe that "No matter how important circumcision of girls may be to the cultural/ethnic/religious groups that practice it, world opinion has determined that girls' bodies are more important than tradition, and that any cutting of the female genitals is Female Genital Mutilation, now banned by law". Criticism has been raised concerning the use of the term 'mutilation' arguing that it reflects excessive judgment by outsiders on a cultural practice and, consequently, the term female genital cutting (FGC) or FGM/C are now in use (Shell-Duncan & Hernlund, 2000). For this work FGC will be used in reference to the practice while FGM will be used in reference to specific programs and documents carrying that name or in interview quotations where respondents specifically used the term in English.

Reactions to dominant discourses on FGC have been many and varied. Some critique the construction of FGC as a violation of human rights, finding it difficult

to see how individual human rights like those propounded by the anti-FGC activists apply to people bound by communal structures like those in Africa (Deng & An-Na'im, 1990). Rahman and Toubia (2001) concur with this challenge of using broad standards of international human rights law on specific social belief systems because that law was originally constituted to deal with political and civil violations.

In her critique of the dominant FGC discourses, Frissa (2011) observes that the interpretation given to the practice reflects Western social thought and is an imposition of Western cultural norm on a practice that is largely foreign to Western culture. Acknowledging that FGC is a basic violation of the right to physical integrity of women and girls, a number of Western educated African feminists and activists have nonetheless condemned the Western feminists for what they deem an imperialist and racist approach to the practice (Rahman & Toubia, 2001; Dirie, 1999; Toubia, 1995; Dorkenoo, 1994; El Sadaawi, 1980 among others).

These dominant FGC discourses, mainly emanating from the West, have informed the campaigns aimed at creating awareness amongst, and educating the practicing communities on the harmful health effects and the human rights violations of FGC with the hope that those communities would stop the practice. But Mackie and Le Jeune (2009) are of the view that for the uncut state of women and girls to

be conceived as a better option, practicing communities need to discuss and reach a consensus that FGC is harmful to health and human rights of women and girls. In other words, practicing communities themselves need to construct FGC as a problem, just as those pushing for its eradication have done in their discourses. This study seeks to examine how the Maasai community in Kajiado, Kenya, constructs FGC discourses and notions of womanhood.

### **1.1 A brief overview of anti-FGC Interventions in Kenya**

In Kenya, anti-FGC interventions started in earnest in the early 1990s. But prior to this, the colonial administration and the Christian missionaries enacted laws and church rules in attempts to ban the practice (Izett & Toubia 1999, Rahman & Toubia 2000). These efforts were met with hostility by the local people, especially those from the Mount Kenya region. Lynn Thomas (2001) describes the case of a ban on FGC implemented in April 1956 among the Ameru people of the Mount Kenya region by *Njuri Ncheke*, the traditional local council of elders. The ban was overwhelmingly resisted especially by the girls who went into an orgy of cutting oneself or each other called '*Ngaitana*'. Indeed, FGC became one of the issues at the core of Kenya's fight for independence (Kenyatta, 1938). The nationalists leading this fight considered the colonial action as a threat to national solidarity and an attack on cultural identity and social order. Ngugi wa Thion'go's (2009) novel, *The River Between* presents a vivid description of the struggle the people of Central Kenya faced as Christianity confronted and tried to change their deeply

held cultural beliefs and practices. It was not until the early 1990s that Kenyan-driven interventions as we know them today began. This was initiated by the Maendeleo Ya Wanawake Organisation (MYWO), a nation-wide community-based women's organization, who began a sustained information dissemination campaign to address the FGC issue in liaison with Government, NGOs and private establishments. Kisii, Meru, Narok and Samburu districts constituted the initial project sites for these interventions but this later spread to other districts. At international and national platforms, there has been heightened advocacy for legal formulations to criminalize the practice and many countries including Kenya have already enacted laws criminalizing it. The legal framework on FGC is discussed in detail in Chapter Two.

Of great significance in the anti-FGC intervention campaigns in Kenya has been the twenty-year National Plan of Action (NPA) which was launched in 1999 by the Ministry of Health developed with support from the WHO. With the overall goal of accelerating the elimination of FGM, the NPA had four objectives: to reduce the proportion of girls and women undergoing FGM; to increase the proportion of communities supporting the elimination of FGM; to increase the proportion of health care facilities that provide care for girls and women with physical and psychological problems associated with FGM; and to increase the technical and advocacy capacity of organizations and communities involved in FGM elimination programs. Program development and management, provision of basic health services, advocacy, and action oriented research and documentation

have been the four main program components for implementing the NPA. It is less than one year to the 20 year target but the practice is yet to stop.

In addition to these efforts, a large number of non-governmental organizations (NGOs) like Africa Medical & Research Foundation (AMREF), Young Women's Christian Association (YWCA), World Vision International, and the local chapter of the International Federation of Women Lawyers (FIDA) among others have also been actively encouraging communities to discontinue the practice.

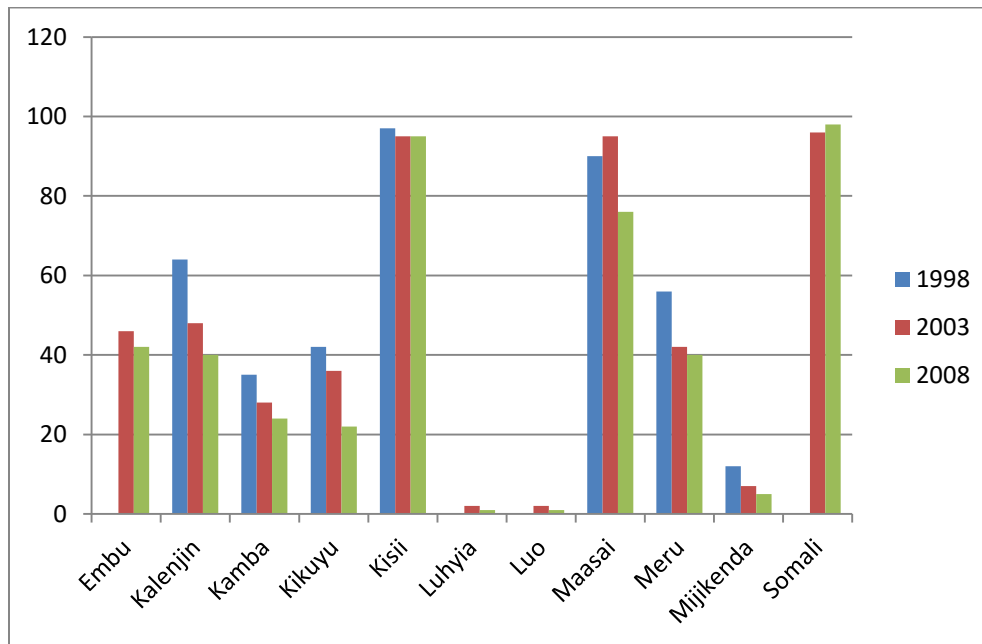
Following a consultative conference in March 1997, at which were represented 67 local NGOs, governmental, bilateral and international organizations, a National Focal Point (NFP) was initiated, with the NGO Northern Aid being nominated to host the NFP. A second conference held a year later attracted 96 organizations, which consolidated and endorsed the role of the NFP as the coordinating body to maximize collaboration between all organizations concerned with FGC in Kenya.

Clearly, there is much interest and activity at both the grassroots and national levels in seeking ways to eradicate this practice. Two of the most active of the local NGOs that work at both levels have been MYWO and the Program for Appropriate Technology in Health (PATH), an international NGO with a national office that focuses on improving the health of women and children. For over two decades, these two organizations have worked closely together using a wide variety of funding support to learn about the practice and to then use this

information to develop strategies for encouraging its abandonment. Three broad phases in their activities can be identified. Over the period 1991 – 1993, PATH coordinated a series of qualitative and quantitative research studies with MYWO to learn about the nature and extent of the practice in four districts (Kisii, Meru, Narok and Samburu). Narok is one of the Counties occupied by the Maasai people. Based on their findings, MYWO and PATH developed and started implementing numerous community mobilization, behavior change communication (BCC) and educational activities with leaders, religious groups, schools and parents in these districts, and educational and advocacy activities with opinion leaders and the media at the national level. These sensitization activities, which began in 1993 and are still continuing, were implemented under the auspices of MYWO's broader 'Traditional Harmful Practices' program and provided the basis for the most recent phase, which was the development of the 'Alternative Rites of Passage' (ARP) and its introduction in 1996. The ARP is an intervention constructed by NGOs aimed at abandonment of FGC in communities where at puberty, girls traditionally go through ceremonies that traditionally mark the rite of passage from childhood to adulthood with genital cutting rituals. In those communities, the ARP replicates those traditional initiation rituals without the girls receiving the cut hence its name *Ntanira na Mugambo* which translated literally means circumcision through words. The 1996 introduction of the ARP in Kenya was carried out in the Tharaka area of Meru and by 1998, 13 rural communities had instituted it (Davis, 2001) and it has since then spread to other communities in Kenya. The girls are secluded in a designated place for a week

where they are trained in life skills, taught about sex and reproductive health, FGC, human rights among other topics and the seclusion culminates in a public graduation ceremony where the girls together with their parents and community leaders declare their abandonment of the FGC practice and certificates are awarded to them. Though ARPs are a highly touted intervention in Kenya, a 2018 University of Leicester LIAS Working Paper review by Droy et al of 19 studies which have evaluated ARPs implemented mainly in Kenya came to the conclusion that “no study has yet concretely demonstrated the positive impact of ARP interventions on the practice of FGM/C” (p. 19).

The close to 30 years of formal activism against FGC in Kenya and has yielded mixed results in prevalence rates. An analysis of descriptive statistics from four waves of demographic and health surveys in Kenya by Shell-Duncan et al (2017) shows a decline of close to 20% in national prevalence rates from 38% in 1998 to 21% in 2014 with a caveat that this was actually higher as the 1998 survey did not include North Eastern Kenya where prevalence is close to 100%. Communities that have enjoyed little development like the Somali of Northern Kenya, the Kisii and Maasai of the Western and Rift Valley regions have recorded minimal reduction in prevalence with the first two consistently recording prevalence of over 90 percent. Others like the Kalenjin and the Kikuyu of the Rift Valley and Central regions registered a steady reduction of about 20 percent between 1998 and 2008 respectfully. Figure 1 below gives more details of that 10 year period.

**Fig. 1: Prevalence of FGM in Kenya between 1998 – 2008 (KDHS data)**

According to Askew (2005), a sustained change in the prevalence of FGC is the ultimate indicator of its abandonment. It is clear from the Fig.1 above that some of the communities are closer to abandonment than others. The Maasai community is one of those communities that are still far from abandoning the practice. In 2003, prevalence among the Maasai stood at 90 percent and it was reported to have steadily dropped to 80 percent in 2008. A more recent survey report (KDHS 2013) shows a mere two percent drop for the five year period (2008-2013) giving a prevalence rate of 78 percent. These figures do not illustrate a sustained change in prevalence, a clear indication that the Maasai are far from abandoning the practice of FGC.

According to Ahlberg et al (2004), persistence of the cut seems to reflect the nature of the eradication interventions, their assumptions and related discourses.

## **1.2 Statement of the Problem**

On July 22, 2012, the BBC Focus on Africa news (BBC podcast) reported on a meeting held in Kajiado county of Kenya by Maasai women to decide on the cultural practice of FGC. The women were reported to have arrived at a decision that they would not support Government action to stop the practice of FGC. This was at a time when the Kenya government was at the early stages of enforcing the law criminalizing the practice. According to the BBC reporter, Ann Soi, the women argued that the government did not consult them before deciding that FGC should be criminalized. Female genital cutting (FGC) has been constructed in dominant discourses as a barbaric and harmful practice that violates the health and human rights of women and girls (Hosken 1979; Rahman & Toubia, 2001; WHO, 2008). The picture constructed in the dominant discourses of womanhood in FGC practicing communities is one of ignorant, helpless victims of oppressive traditional practices or as malicious torturers of their own kind (Hosken, 1994, Walker & Parmar, 1993). There have been calls and interventions by the international community, many advocacy groups and governments to salvage women in FGC practicing communities from the cultural practices deemed harmful to them. These dominant discourses have attracted critics who have constructed their own alternative discourses. Stanlie James and Claire Roberson

(2005: 5) argue that the Western portrayal of womanhood and FGC is “exaggerated, overgeneralized, stereotypical, inaccurate, or misplaced militancy.” According to James and Robertson, the portrayal “has eclipsed any reasoned consideration of historical contexts, contemporary experiences, and the agency of African women themselves.” This argument is supported by Lynn Thomas (in Shell-Duncan & Hernlund, 2000) who points to limitations of the universalist discourses of sexual oppression, human rights and women’s health and argues for an understanding of social complexities of the practice of FGC.

In many jurisdictions, including Kenya, the decision has been reached to abolish the practice. In Kenya, for example, several anti-FGC interventions have been rolled out for over three decades. These began with baseline studies which were carried out in the different communities in Kenya by the MYWO, Ministry of Gender, Children and Social Development in collaboration with international organizations like UNFPA, Population Council and others to establish FGC prevalence, document reasons for the practice, identify key knowledge gaps on it and create inventories of interventions for the abandonment. Following information, education and communication campaign efforts, situational analyses of the FGC programs (e.g. the National Situational Analysis Report on FGM 2007) have been carried out on a continuous basis to document the status and trends of the practice and also identify gaps in programming. The demographic and health surveys (DHS) have also been carried out on a regularly basis and have a component highlighting FGC prevalence and medical manifestations. Though

these studies and survey perceptions of the respondents to FGC, they do not clearly examine how the communities construct FGC discourses. One cannot also assume that how one community constructs knowledge on the practice is how another will because cultures and other variables can intervene in that construction. Kenya has signed to several treaties and conventions relating to the rights of women and girls and enacted laws like the Prohibition of Female Genital Mutilation Act 2011. All these efforts highlighted here result from the construction of FGC in dominant discourses as a problem that needs to be addressed. In the different discursive spaces where the dominant discourses of FGC and responses to it have been constructed, the voices of the people from the practicing communities are conspicuously missing. Loseke (2011) argues that a social reality does not become a problem until it has been identified as such and claims made about it are in harmony with existing cultural values and meanings. This view is echoed by Saguy et al (2010:1) who argue that “social problems do not emerge on their own but are socially constructed by claims makers who have a stake in defining an issue as an urgent problem, frame it in particular ways, and identify specific solutions.” In their view, factors that vary cross-culturally can lead to distinct social problem constructions. The implication of this argument is that practicing communities may not conceive of FGC as a problem and if they do, it may not be in the same terms as those advanced by the advocates of its abandonment. The call then by these scholars is for methods of enquiry that are in harmony with the way local people, and in this case Africans, learn and construct knowledge

Given that anti-FGC interventions have been on-going for several decades, the slow reduction in prevalence suggests that the construction of the practice in the dominant discourses and the subsequent interventions driven by these discourses may not have been well embraced by the practicing communities. The dominant discourses and data resulting from the baseline studies and the DHS have been used to construct the interventions against FGC but these have not been successful in eradicating the practice. A study of the Rendille people of Kenya (Shell-Duncan, Obiero, and Muruli 2000) illustrates how communities like the Maasai confronted with interventions against their culture have found it difficult to embrace change. The reaction by the women in Kajiado cited earlier suggests a need to hear them out. This study seeks to explore how the Maasai construct discourses on FGC and how that is linked to their understanding of womanhood to establish whether the discourses they construct align with or are alternatives to the dominant discourses.

### **1.3 Aim and objectives of the study**

The main purpose of this study was to understand FGC and womanhood from the Maasai perspective to determine if these constructions could be considered alternatives to dominant constructions. More specifically, the study sought to:

- Understand Maasai conceptions of FGC and notions of womanhood
- Explore the linkages between the practice of FGC and cultural notions of womanhood among the Maasai

- Assess how notions held about FGC and womanhood shape the practice of FGC
- Examine the place of women's agency in decision making on FGC

#### **1.4 Research Questions**

The overarching question of the study was how FGC and womanhood are constructed among the Maasai of Kenya and whether those constructions constitute alternatives to dominant discourses. In this regard, the following research questions were posed:

- How do the Maasai make sense of FGC and how is this linked to notions of womanhood?
- In what ways do notions about FGC and womanhood shape the continued practice of FGC among the Maasai?
- What roles do Maasai women play in decision making about FGC?

#### **1.5 Significance of the study**

In FGC literature, discussed in detail in Chapter Two, statements such as violation of the health and human rights of women and girls and the term mutilation have been used to construct discourses on FGC as if their meaning was obvious and unproblematic. This study makes a useful contribution to the growing body of

FGC literature on context specific construction of discourses on FGC and evolving notions of womanhood from the perspectives of an FGC practicing community. It further contributes to literature on womanhood identities and how women's agency is being exercised in a local context. Findings from this study will also provide empirical support and guidance to Kenyan policymakers and international players in their quest to deal with the practice of FGC. An implication of this to the anti-FGC efforts is to provide an enhanced understanding of multiple and interrelated factors that mediate how a specific target of change campaigns makes sense of the practice and constructs womanhood identities which are key to the success of any campaign. This is especially important when dealing with people like the Maasai because many of them live in rural communities that are scarcely reached by modernization. Engaging with these factors would be a great help to change agents as it would help them understand the kind of people they are dealing with, their goals and aspirations and hopefully craft communication for change from these people's perspectives and actually think of ways of empowering them to engineer and drive change themselves.

### **1.6 Organization of the rest of the study**

Chapter two comprises a detailed description of the conceptual framework undergirding the study and a review of the relevant literature on FGC discourses. Chapter three give an overview of Kajiado county by looking at characteristics

relevant for understanding the context within with the Maasai construct of womanhood and FGC discourses. Chapter four discusses the methodology of the study while Chapter five reports and analyzes notions of womanhood among the Maasai. Chapter six looks at the FGC discourses as constructed by the Maasai. The last chapter comprises of the summary, conclusion, recommendations and areas for further study.

### **1.7 Summary**

This chapter constitutes the introduction to the study. It gives the background to the study and to FGC in Kenya, captures the statement of the problem, aims and objectives of the study, research questions, the significance of the study, and the arrangement of the rest of the study. The next chapter explains the conceptual framework undergirding the study and reviews the relevant literature on womanhood and FGC.

## CHAPTER TWO

### LITERATURE REVIEW AND CONCEPTUAL FRAMEWORK

#### 2.0 Introduction

In an article exploring dominant discourses surrounding male and female genital mutilation, Bell (2005) argues that few topics have polarized opinion as much as the practice of female genital cutting. According to Shell-Duncan and Hernlund (2000), the practice has little parallel in its ability to arouse an emotional response. Indeed, the practice has in the last three decades or so become a major concern for many including feminists, academia, and policy makers worldwide resulting in the diversity of discourses around it. The general consensus reflected in those discourses is that FGC is a great threat to the lives of women and girls in that it violates their health and human rights and that action must be taken to rescue them. Barely heard in those discourses are the voices of the women from the grassroots who have undergone the FGC rites as well as the communities where the rite is practiced. This study sought to interrogate the perspectives on FGC by one such community.

In order to examine how the Maasai, a practicing community constructs FGC and notions of womanhood, I ground my study mainly in the social constructionist perspective. The practice of FGC has been constructed as a problem in dominant discourses and interventions rolled out to address the problem. From this premise,

I particularly examine the ways in which the social constructionists theorize construction of social reality and social problems. The section explores the following questions: How do social issues or practices come to be seen as problems? Are social problems objective realities? What explanations do social constructionists give regarding construction of social problems and womanhood identities? In what ways do people contribute to the construction of knowledge?

This chapter begins with a discussion of social construction of knowledge in relation to how social problems, womanhood and self-identity are constructed. The premises of the perspective regarding social problem construction and definition as well as construction of identity will be explicated. I will show the potential contribution the perspective has for my study. This will be followed by a broad review of literature on the pertinent discourses on the practice of FGC. The review will focus on frames within which the so-called dominant discourses on FGC have been cast namely: inferiority frame, health violation frame, and the human rights violation frame and criticisms on each frame which are considered by some to be alternative constructions or discourses. There is also a review of justifications given for FGC by practicing communities.

## **2.1 Social Construction of Problems – an introduction**

Different terms have been used in reference to the practice of female genital cutting giving rise to a variety of discourses which as has already been noted have

been quite contentious. Although FGC is portrayed as a peculiar Third World problem, the practice has been recorded in other parts of the world including Europe and America. Lightfoot-Klein (1989) documents clitoridectomy which is practiced in a number of communities in Africa as having been practiced in England in the 19th Century to cure what was referred to as “the vexing mental disorders of women” that caused them to masturbate. Further, she records a similar practice in the United States of America in the early 20th Century carried out in an attempt to cure lesbian practices and inclinations, an aversion to men as well as mental disorders including hyper-sexuality, hysteria, and nervousness. According to Castro (2010), infibulation which is another FGC practice in some African communities was practiced in the United States to prevent masturbation until 1905. According to Shell-Duncan, and Hernlund (2000: 1), however, the same cutting of female genitals which is a traditional practice for many African communities has for some decades now come under increasingly intense international scrutiny that casts it in negative light “in discourses on women’s health and empowerment and international human rights.” Whereas in the West FGC was seen as a cure for mental and physical shortcomings, that practiced in other parts of the world, especially in the Third world has been cast as a violation of the health and human rights of women and one that must be eradicated. The last three decades have seen an intensification of eradication efforts, with international health and aid organizations placing political and economic pressure on African governments to legislate and exert pressure against the practice (Shell-Duncan and Hernlund, 2000). The interventions notwithstanding, the rite has

continued to be practiced to date in many parts of the African continent with some of the communities recording prevalence of over 90 percent. Bell (2005) makes the observation that opinions on FGC remain firmly divided both within Africa and in the international arena.

### **2.1.1 Social Constructionist Perspective**

This study sought to interrogate how the Maasai of Kajiado construct discourses around their cultural practice of FGC and how they account for it. The social constructionist perspective was very useful in this regard because it has been used to explain how reality gets to be named in society or how knowledge of issues comes about. With origins in sociology, the perspective emerged in the early 1980s as an attempt to come to terms with the nature of reality. Berger and Luckmann (1991) are acknowledged as the major influences in the development of the social constructionist perspective and they in turn acknowledge Mead, Marx, Schutz and Durkheim as having influenced their thinking in that regard. The constructionist perspective is said to have also been influenced by the post-modernist era in qualitative research. Social constructionists hold the view that all reality is socially constructed (Burningham & Cooper, 1999; Crotty, 1998; Neimeyer, 1993; Guba & Lincoln, 1985) and in Berger and Luckmann's (1991) view, it is individuals or groups of people who engage in the process of defining that reality as they interact in the world. According to Schwandt (2003) and Andrews (2012), the general focus of constructionists is on that process by which

meanings are created, negotiated or reasoned through, sustained and modified, the goal being to understand the world of lived experience from the perspective of those who live in it. To constructionists, knowledge of issues is not simply discovered by the mind (as propounded by constructivists) but rather created through people's interactions in society (Schwandt, 2003). Given that contexts within which people live and interact differ, the knowledge the people in the different contexts create concerning issues is bound to differ even if the issues in question may be common. The controversy surrounding FGC which has been ongoing for many decades can be understood from this perspective. The controversy has mainly been about the name that should be used to refer to the practice and whether or not to support or oppose the practice and why. The naming of a reality says a lot about the way those naming it conceptualize that reality. Because people look at their world through different lenses, it means that what could be construed as a problem concerning an issue in one context may be seen in a very different light in another context and these differences could result in controversies like those mentioned earlier concerning FGC. According to Shell-Duncan and Hernlund (2000), the process of naming and responding to the practice of FGC is complex and multi-faceted and has led to a polarization referred to as a "war of visions". Female genital cutting has been constructed as a problem mainly by individuals and institutions that are external to the practicing communities and this construction has been used to construct interventions as solutions to urgently deal with it. Intervention campaigns notwithstanding, health and demographic data continues to illustrate that a number of communities are

still carrying on with the practice suggesting that as communities, they may not be constructing FGC as a problem or that solutions being implemented may not be accepted by those communities. This aligns with Johnsdotter (2010) and Best's (1989) observation that an issue becomes a problem worthy of attention when claim makers construct it as such and proffer solutions to urgently deal with it. This study sought to interrogate whether a local community practicing FGC constructs the practice the same way it is done in the dominant discourses or whether their constructions can be considered as alternative discourses.

The term 'construct' suggests creating or configuring some explanation to a situation or issue. That explanation, though it is about the situation or issue, is not objective reality or experience or issue but rather what the people who experience or are confronted by it say it is. The social constructionist perspective therefore focuses on how people learn about their world and their place in it. It is the view of constructionists that as people interact with each other, they share their subjective realities of that world, resulting in shared meanings. Social reality then is created when people, in social interaction, develop a common understanding of their world. Through these interactions, people can modify meanings of what they see around them. Given that the world is becoming a global village with free flow of information occasioned by new technologies, social reality and the naming of it continues in a state of flux rather than it being static suggesting construction of reality can change if the people constructing it are exposed to new information or experiences or be sustained if conditions under which it is constructed remain

unchanged. This process by which meanings are created, negotiated, sustained and modified is what social constructionism focuses on (Schwandt, 2003) and it was of interest to this study as well.

Construction of a social reality becomes a discourse as people in social interaction align their mutual understanding of each other's perspectives on an issue and what it means. Worthy of note in discourse formation is that social interaction within which that formation occurs is grounded in language customs, as well as cultural and historical contexts. Similarly, Michel Foucault (2001) sees discourse as a way of representing knowledge about a particular topic at a particular historical moment and argues that people use language to construct a topic, define it and produce the objects of their knowledge. According to him, discourse rules out, limits and restricts how others talk or conduct themselves in relation to a given topic or even constructing knowledge about it. As more people align themselves with a given discourse, that discourse easily diffuses within the community where those people are found.

The diffusion of social problem claims in society, it is argued, is most likely to happen among people with a shared language, culture and networks (Best, 2001). Lupton (1988) further posits that besides reflecting and describing realities, knowledge, experiences, identities, social institutions and practices, discourses construct them. Crowe (2000) brings in yet another dimension to discourse

construction in her observation that discourses do not just happen and neither are they on just any topic but are rather constructed for specific purposes, to serve the specific interests of particular groups. Looking at the focus of this study for instance, discourses from the international community have constructed FGC as an unnecessary mutilation of female genitalia, as a serious threat to the health of women and girls, and as a violation of their human rights violation while the practicing communities construct it as a very critical and necessary rite of passage. For the local communities, their constructions have been part of socialization and meant to propagate their cultural identity and distinctiveness while the international community seeks to use its constructions of the practice for modernization of societies. In light of this thought Loseke (2011) argues that examining FGC like the international community does is mere claims making rather than objective reality. Best (1989) buttresses this view with his observation that social problems are social constructions, created through claims-making, labeling, and other social processes. Constructionists believe that the world can only be known in relation to peoples' experiences of it and not independently of those experiences which implies that the claims of reality that individuals or collectivities make in dominant discourses on topics like FGC are mere subjective interpretations and should not be taken as objective realities (Danto, 2008; Williams, 2006; Lupton, 1988; Schutz, 1967). Most postmodern theorists subscribe to this perspective and according to them, there are no universals, including no universal truth, reality, or morality (Danto, 2008; Lyotard, 1984) pointing to the need for collective knowledge production. This flies in the face of

claims in dominant discourses that practicing communities lack the capacity or agency to interrogate their own cultural practices or construct knowledge in a meaningful way. The contextual nature of discourse construction discussed so far points to the need to interrogate constructions of the cultural practice of FGC from the perspectives of members of the communities that practice it.

Hammersley (1982) has critiqued constructionists' denial of an objective reality that can be directly known. Given that social constructionism produces multiple accounts of reality, he questions the utility of research findings using the perspective in terms of contributing to knowledge in a meaningful way. He seems to contradict himself though with a caveat that even in positivist research the researcher interferes somewhat in the process by presenting findings from his or her own perspective. In their defense to critiques such as Hammersley's, Berger and Luckman (1991) argue that social constructionists do actually acknowledge existence of an objective reality but their emphasis is on the fact that the naming of that reality and what it constitutes is a matter of social construction. They further posit that while reality is socially defined, it is individuals and groups of individuals who define it, always trying to present their version in such a way as to prevail over other versions. This paves way for interrogation of the version(s) of reality constructed by the Maasai.

Hilgartner and Bosk (1998) buttress the point made by Berger and Luckman (1991) with their argument that beyond calling attention to certain conditions, claims about social problems frame the issues in certain ways by selecting a specific interpretation of reality from several possibilities. The reality that dominates public discourse in the public arena where social problems are selected, discussed, defined, framed, packaged and presented to the public ends up impacting the future of that issue. That public arena constitutes institutions such as legislature, media, social action groups, campaign organizations, research communities, and religious organizations. According to Hilgartner and Bosk (1998), these institutions, driven by given agendas, cast the issues in dramatic and persuasive terms with vivid, emotional rhetoric to ensure their problem definition receives attention. Literature cited on the dominant discourses, media coverage of the issue of FGC in countries like Kenya in the last decade and videos being used in the intervention campaigns clearly reflect this observation by Hilgartner and Bosk. Burr (2003) concurs with that argument adding that construction of reality is power related in the sense that it is often the more powerful who are most successful at having their version of events or issues predominate the discourses while views of the underprivileged become repressed or entirely silenced. This is clearly what has been happening with regard to discourses on FGC.

These views of Hilgartner and Bosk (1998) and Burr (2003), however, that it is the powerful that have their version of issues dominate discourses and make determination on the future of the issue does not appear to be fully supported by

the reality on the ground. If those views hold, then the FGC prevalence among communities like the Maasai should have drastically reduced given the many years of campaigns to end it but it has not. Might the power dynamics regarding FGC be different among the Maasai? This study therefore interrogated what notions about FGC and womanhood are constructed among the Maasai and how these notions are shaping the practice of FGC among them.

Some social constructionists argue that because local knowledge is oftentimes denied credibility in majority-dominated social arenas (Freeman & Couchonnal, 2006) and hence marginalized, discursive spaces must be provided for those who are hidden from the dominant discursive articulations for their perspectives to be heard. Dutta and Pal (2010) argue further that agencies external to a community must never construct problems and solutions for a community as has happened in relation to FGC without listening to the community members including those marginalized voices. Cultural studies have been carried out already on a number of FGC practicing communities but questions have been raised about relevance of discourses arising from such studies that claim to represent African cultural realities. According to Mulemi (2011), most cultural studies and ethnographies on Africa from which discourses on Africa emerge have been carried out by researchers from the western world. It is Mulemi's view that the scholarship resulting from that research has contributed to a misrepresentation of the African indigenous and cultural realities because they draw on etic accounts of the Euro-American scholars. Mulemi goes further to treat with suspicion native Africanists

who try to represent African reality because in his view, a large number of them have been trained in Western perspectives that may be sources of error. The other concern raised about the construction of African realities in key literature in the Euro-American scholarship is that the voices of the natives of Africa are missing in accounts of their experiences (Mkabela, 2005). In Mkabela's view, experiences of Africans have been largely appraised in European contexts and not in terms of their own. Mulemi (2011) critiques the state of affairs where perspectives of non-natives dominate the construction of the African realities arguing that African and other non-Western peoples have human agency to construct reality from their experiences and then tell their story. He propounds Afrocentrism in the place of Eurocentrism whereby the researcher on African people's realities assumes the responsibility of articulating the research subjects' reality from their perspectives, drawing on their own ideals and values. Although Mulemi sees the researcher and the researched as having an interactive role in the production of theoretical and applied knowledge, he stresses that African experiences are best articulated by those directly involved. In researching experiences of Africans, the researched natives then become 'experience experts' (cf. Van der Geest 2007) of their experiences and their perspectives of those experiences as well within a given historical, cultural or other context. Context is related to what Haraway (1991) refers to as situating knowledge which is a useful way of avoiding distortions in how researchers represent the world and people's experiences. It is based on the premise that all utterances people make are situated hence the need to understand and delineate those positions in reporting knowledge construction.

This study is in line with Mulemi's (2011) call for African studies to revitalize the agency of Africans as primary and central agents of making their histories and telling their stories. According to him, African languages constitute rich concepts that typify African worldview and Afrocentrism that can be tapped as a window to their construction of social reality. Tapping into the wealth of knowledge contained in those concepts requires skills in building of rapport and trust with the research informants as well as an understanding of their worldview. Bearing in mind that I am not a Maasai and hence not Maa speaker, I took into consideration appropriate ways of gaining access into the community, how to build rapport with them, appropriate ways of sampling the population to ensure there was a good representation as well as what language to use since a large segment of the population are conversant mainly with the local Maa language and many speak Swahili which is the national language (See details of this Chapter 4).

### **2.1.2 Relevance of social constructionism to the study**

This study sought to interrogate how the Maasai people of Kajiado construct discourses on the practice of FGC and the underlying notions of womanhood in a context where they have been exposed to campaign messages informed by dominant discourses. Social constructionism was very instructive in this regard because the goal of constructionists is to understand the world of lived experience from the perspective of those who live in it. Dominant discourses on FGC and womanhood (See section 2.2) have been constructed mainly from Western

perspectives which are universalistic in nature without sufficient attention being paid to cultural diversities inherent between communities that practice FGC or other diversities within the practicing communities themselves. In the dominant discourses, FGC practicing communities have been constructed as lacking the ability to interrogate their practices but in the constructionists' view, these are the best placed people to construct reality about it because they are the ones who have directly experienced the practice. The constructionist approach therefore helps this study to unmask the dominant, taken-for-granted constructions of FGC from the perspectives of a practicing community as well as their culturally produced ideas about the subject. By representing the community's account of FGC and underlying factors of those accounts, findings from this study will add new perspectives on the topic to scholarly, public and policy debates and actions.

Further, social constructionists look at social reality not as a static phenomenon but as something that changes over time given intervening factors on the reality, environment or even the persons experiencing that reality. The Maasai community has been undergoing changes in communication, education, religious belief, health delivery, livelihoods among others brought about mainly by modernization but those changes are not uniformly distributed across the community. This situational diversity according to social constructionists mediates how people experience and construct social reality. These considerations helped me to appreciate the diversity of the constructions shared by the research

participants as useful contributions to knowledge created from this study on womanhood and FGC.

As already noted, the constructionist assertion that it is often the more powerful who are most successful at having their version of events or issues predominate discourse and the future of an issue while views of the underprivileged become repressed or entirely silenced needed to be interrogated further as facts on the ground seemed to suggest otherwise. What happens when there are competing power bases where an issue is concerned, whose version dominates? It is clear that the international community, government and NGOs have had the upper hand with regard to circulating the dominant discourses on FGC in countries like Kenya. The Kenya government for instance has leveraged this to institute and enforce an anti-FGM law to criminalize the practice. All these actions of the powerful have, however, not repressed or entirely silenced the views of the community concerning the practice if the FGC prevalence data is anything to go by. The study hence sought to interrogate how the Maasai people of Kajiado construct FGC and womanhood.

To contextualize the discourses that arise from those constructions, a review of the dominant discourses on FGM is presented in the next section.

## **2.3 Dominant discourses on FGC**

Discourses on the practice of FGC date back to the colonial and early Christian missionary era and have continued to-date on different platforms. Right from the beginning, that discourses have reflected misunderstanding, assumption, controversy, and bias (Castro, 2010). Until quite recently the controversy has focused on women and girls as the term suggests and not on men who also undergo genital surgeries in a number of communities all over the world. What are popularly referred to as “dominant discourses” on FGC with their origins in the West have problematized or framed the practice as a barbaric, harmful practice that must be eradicated urgently for it violates the health and human rights of women and girls. Literature on FGC casts these discourses in three main frames namely; inferiority frame, health frame and lastly, the human rights frame. These are looked at separately below.

### **2.3.1 Inferiority frame**

Positions taken by critics of FGC constitute a construction of discourse on the topic. The “we” and “they” standpoint taken by these critics in relation to the practice proposes categorizations of people into “superior” versus “inferior” groups – those who assume their practices are right against others considered to be clearly in the wrong and need to be told what is right. Explorers and early settlers on the African continent ran into different forms of the FGC practice and described it in specialist literature (Johnsdotter & Essén, 2010). They, together

with the colonial administration, constructed images of the practice to illustrate how primitive, barbaric and patriarchal it was to stress the fact that the people were in dire need of colonial control. Hoskin (1976) with seemingly very little grasp of the different practices and the context of the practice went ahead to conflate ‘Africans’ with ‘barbarism’ and constructed a thing called ‘female genital mutilation’ out of a wide range of practices. The World Health Organization has assumed some of those constructions and categorized the practices into the four main categories listed below.

Type 1: Excision of the prepuce with or without excision of part or all of the clitoris;

Type 2: Excision of the clitoris together with partial or total excision of the labia minora;

Type 3: Excision of part or all of the external genitalia and stitching/narrowing of the vaginal opening (infibulation);

Type 4: Unclassified (includes a wide variety of mutilations not falling into Types 1 through 3).

The list clearly shows that the severity of the cut varies depending on the type and how crudely the operation is performed and yet scholars and feminists in their condemnation have consistently referred to the practices as though it was one type and this has often been the most severe of the four types. They have then constructed it as an outlandish rite, performed by people they consider as obscure barbarians. According to Wade (2012), much of the heat regarding FGC is a result of stories about genital cutting that privilege the Type 3 which is most severe and

portray parents and practitioners as heartless and irrational. Toubia (1998:101), argues that Westerners have

. . . portrayed [FGCs] as irrefutable evidence of the barbarism and vulgarity of underdeveloped countries, a point of view they have always promoted. It became a conclusive validation to the view of the primitiveness of Arabs, Muslims, and Africans all in one blow.

Alice Walker's portrayal of the practice in her film "Warrior Marks" (1993, cited in Wax, 2006) corroborates this view of barbarism and vulgarity. In the film, Walker portrays a gory sight in which respected elderly women of a village in her view turn into 'murderers' wielding rusted weapons with which to 'butcher' children. Wax considers the FGC portrayal by Walker as mere objectification of women arguing that it reduces them to their sexuality by exposing their bodies to public consumption. For Hoskin (1976) and other Western feminists, FGM symbolizes the extreme nature of gendered oppression in Africa (Wade, 2012) with women seen as victims of an oppressive patriarchal system. Hoskin (1979) asserts that absolute tyrannical patriarchy characterized by absolute male dominance is the rule in Africa. Women and children are presented as the abused and voiceless victims. Hoskin considers FGM as a violent sexual mutilation of females perpetuated by the male-dominated tribal societies to suppress women's sexuality. Radical feminists have argued that patriarchal societies ensure women's subordination by retaining complete control by men of women in every aspect of their lives including their sexuality and this is said to oppress and exploit them. This creates asymmetrical power relations between men and women thereby

restricting women's exercise of agency in any area of their lives. Butressing this point, El Saadawi (1980) argues that FGM is orchestrated by men to ensure female virginity before marriage and female fidelity throughout marriage. This to her is a method of ensuring women's subservience to men and of coercing the women to accept the secondary social position in the community. Echoing this view, Idowu (2008) says that the FGM is deemed necessary by the patriarchal system to pave way for women's docility, obedience and total submission to their husbands.

Elaborating this point, Abusharaf (2001) looks at FGM portrayals by feminists from the West to stress the point that these portrayals give a notion of patriarchy in which African women's sexual reproductive potential is controlled by men and their genitals are mutilated in silence without protest. She says that in that portrayal, women are shown to be wholly subservient, passive and voiceless. She is of the view that this results from the economic power of men over women which produces a framework of sex roles and economic dependence. The Interagency statement (WHO, 2008) corroborates these views by noting that FGC is a manifestation of gender inequality and represents society's control over women.

Western discourses on FGM have tended to dismiss culturally-oriented explanations of the practice as lacking in logic and therefore inconsequential

(Frissa, 2011). Proponents argue that culturally-oriented explanations do not pertain to scientific rationale. From this perspective, practicing communities are constructed as lacking the rational ability to critically examine their practices. Science is presented as the dominant way of knowing and because practicing communities use culture and not science to explain the practice, their knowledge is deemed inferior. Indeed, the practice itself is constructed as lacking scientific rationale. In her critique of the practice, Hosken (1979) portrays the circumcisers as illiterate old women who are wholly ignorant of the anatomy of women's bodies and their sexuality because they have no access to what those in the West know to be the biological facts of life. In like manner, Mary Daly (1978, quoted in Walley 1997: 419) castigates women who participate in carrying out these procedures saying "mentally castrated, these women participate in the destruction of their own kind." Arguing that these women succumb to the practice out of ignorance, Hoskin (1979) asserts that they are in desperate need of liberation and civilization, and it is the obligation of the enlightened women from the West to share facts on female anatomy and sexuality with them so that they can be free to take control of their own lives. Similarly, Idowu (2008) says that such women grow up glued to their customs and are not ready to forsake their culture and patterns of existence because they have never mixed with people from enlightened societies. In fact, he refers to them as "illiterate" arguing that they do not know much or anything at all concerning the harmful medical and sociological effects of the practice. But he is quick to acknowledge that given the socio-economic and cultural settings of the people concerned, there is no

guarantee that they would give up the practice even if they suddenly became “literate”. Such discourse portrays traditional environments as barriers to rational and logical thinking (Frissa, 2011).

The inferiority frame has been critiqued on different fronts. The main contention has been the portrayal of women as total victims of male dominance, with no agency at all. Anthropologist Fuumbai Ahmadu (2000, quoted in Schweder 2003) utterly rejects the description of women as “victims”. Ahmadu fails to see how the joyous celebration of womanhood evident in the FGC ceremonies can disguise hidden experiences of coercion and subjugation. She is convinced that the bulk of the Kono women of Sierra Leone who uphold the FGC rituals do so not under compulsion, but because they want to do so. Ahmadu, a Western educated woman, chose to return to Cameroon in her mature age to perform the rite. Flax (1990) is opposed to the view that sees women as totally passive beings at the mercy of men in a harsh patriarchal system arguing that such a viewpoint prevents its proponents from seeing areas of life in which women have had an effect, have been less determined by the will of the other(s), and in which some of them have and do exert power. This is corroborated by Swai’s (2006) study of Maasai women in Tanzania and Mahmood’s (2005) study of wearing of the veil among Moslem women in Egypt. Swai (2006) found that women in her study assumed their culturally prescribed roles not as victims of cultural dictates, but as their individual way of affirming their womanhood, and in so doing empowered themselves. Through networking in women’s groups, the women were able to

negotiate their position and respond to social and cultural barriers they faced. In her study, Mahmood (2005) argues that Moslem women who veil do not simply act out of subordination or oppression from a patriarchal or religious compulsion but as an ethical practice and as a tool for emancipation. According to Swai (2006), all human beings are endowed with capacity which prevents them from succumbing entirely to the oppressive systems they find themselves in.

Mohanty (2003) argues that dominant discourses on FGC overstate images of victimized women in dire need of help and empowerment to live out their full potential. Wax (2006) agrees with this view adding that such views of women as victims of the whims of men are often racist, ethnocentric, and disrespectful of the lives and cultures of the women who experience FGC. Similarly, Vander Kwaak (1992:785) argues that to aggressively attack the practice of FGC without respect for women in practicing communities is an “ethnocentric, ideological position.” Wax (2006) explains that these discourses are oversimplified representations of the experiences of women from practicing communities by the feminists and other activists who use their power and privilege in relation to non-Western women’s lives. She quotes Nahid Toubia (2006:14) saying:

The West has acted as though they have suddenly discovered a dangerous epidemic which they then sensationalized in international women’s forums creating a backlash of over-sensitivity in the concerned communities. They have portrayed it as irrefutable evidence of the barbarism and vulgarity of underdeveloped countries ...

The inferiority frame fails to recognize that perceptions of women from practicing communities to FGC are complex and nuanced in ways that those of the West are not. From another perspective, Strong-Leek (2009) criticizes Western feminists for using FGC to focus on genitalia of African women and legitimizing the continued exploitation of Africa under the pretense of saving African women and children from 'barbaric' rituals. This is the same point Hodzic (2017) raises concerning the “Adopt a Clitoris” campaign in Burkina Faso which she considers to be a form of imperial debris. To her, the campaigns against FGC “are replete with patronizing, narrow concerns void of larger analyses of African gender relations and subjectivities, geopolitical inequalities, imperial formations, and feminism’s own imbrications in them.” (p. 52).

Frissa (2011) explains that when practicing communities are constructed as lacking the ability to critically examine their own practice, experts are used to gather data to be used to explain the practice. She laments, however, that because these experts use Western worldviews, the so-called expert views they produce of the practice and the practitioners are biased. These experts determine what the problem is and how it should be solved. Fraser and Nicolson (1990) argue that because feminist theories from which practices are evaluated are constructed by Western white women, they do not give sufficient attention to cultural diversity but rather falsely universalize features of the theorist’s cultural, class, sex and racial background. Using a postmodernist lense, Fraser and Nicolson argue that there is no universal concept of subordination of women or dominance of men as

is perpetuated by feminists. In their view, the paucity of voices of women from FGC practicing communities on these matters puts to question accounts that have been considered in constructing universal theories of oppression of women. According to Frissa (2011), this reality gets to be entrenched even among practicing communities as experts from the international organizations control the type of information to be disseminated to the communities and also work to socialize them and the world to values and standardized ways that are suitable to the international community. The socialization to Western values and ways of thinking at the local level by NGOs and government agencies takes place as practicing cultures are trained in modern and scientific ways through IEC efforts. Consequently, the people's voices on the practice are muted, their minds are manipulated towards a scientific rationale of thinking about the practice, and their cultural explanations for the practice are dismissed. In Hodzic's view (2017), such experts and agencies are agents of western imperialism designed to destroy or disregard African identities.

For Frissa (2011), the dismissal of culturally-oriented explanations by actors from a Western science-oriented context intent on intervening to end FGC is problematic and bound to fail. Criticizing the heavy-handed approaches that were used by the colonial administration towards the practice of FGC, Gruenbaum (1982) pointed to the need to have indigenous women in particular and practicing communities in general involved at all stages of dealing with the practice if success is to be realized.

These arguments buttress assertions of Mukabela (2005), Mulemi (2011), Van de Geest (2007) and Dutta and Pal (2010) among others that African realities are best constructed and appraised by the Africans themselves. Fraser and Nicolson's (1990) assertion that there's no universal concept of subordination of women or dominance of men speaks of diversity in social construction of reality and allowing FGC practicing communities to problematize their realities and propose solutions contributes to scholarship.

### **2.3.2 Negative health consequences frame**

Since the colonial and Christian missionary era, health concerns have constituted the public face of anti-FGC activism. According to the WHO and other leading health organizations, there are no known health benefits of FGC. In 1979, the WHO identified FGC as a serious threat to the health of women, especially in sub-Saharan Africa and consequently, discourses on FGC in the 1980s framed it mainly as a health issue. It has been claimed that the practice has the potential to cause negative physical effects such as chronic urinary tract and pelvic infections, urine retention, uncontrolled bleeding, complications during childbirth, infertility, severe pain during intercourse, and formation of deltoid cysts (Fulgieri, 2010). In addition to these effects, Sipsma et al (2012) mention obstructed menstruation, difficulty conceiving, prolonged labor, tearing of tissue during delivery, neonatal death, abscess formation, sepsis, tetanus, hepatitis and human immunodeficiency virus (HIV) infection because the procedures are often conducted under non-

sterile conditions. A community-based survey on long-term reproductive health consequences of FGC in rural Gambia by Morrison et al (2001) corroborates this claim about HIV infection. Their study found that women who had undergone FGC had a significantly higher prevalence of bacterial vaginosis and a substantially higher prevalence of herpes simplex virus 2 (HSV2). They concluded that a higher prevalence of HSV2 suggested increased risk of HIV infection for cut women. A study by Jones et al (1999) suggested a positive association between the severity of FGC and the probability that a woman has gynecological or obstetric problem. Dorkenoo (1994) highlights psychological effects associated with FGC such as terror and chronic anxiety, depression, post-traumatic stress disorder, and other demonstrations of trauma and humiliation. To these health complications, the WHO (2000) adds reduced quality of the women's sex life.

The negative health consequences frame has also not been without controversy. Carla Obermeyer (1999, 2003) in her reviews of studies on health consequences of FGC argues that a lot of the reports of the negative health consequences were based on data sources that had shortcomings. According to her, the use of small samples in the research on health consequences of FGC resulted in biased estimates; the high nonresponse rates to the surveys questions the veracity and validity of conclusions drawn; and in some of the reports, there was no indication of how the data was collected or even where it was collected. It is her view then that results on negative health consequences are inconclusive.

### **2.2.3 Human rights violation frame**

Before the 1970s, the practice of cutting female genitals in many African and some Asian and Middle East countries was known outside the regions by medical doctors and anthropologists as female circumcision, clitoridectomy or infibulation. These terms according to Shell-Duncan and Hernlund (2000) were technical, neutral and non-judgmental. Shell-Duncan and Hernlund highlight a controversial campaign initiated by a network of women's and human rights organizations in 1974 to draw wider attention to the issues concerning FGC as the one that was responsible for renaming the practice as female genital mutilation thereby raising its salience as a matter of public international concern. According to Shell-Duncan and Hernlund, this renaming of the practice is said to have moved it away from linkage to male circumcision to an implied linkage with a practice like castration, effectively reframing it as violence against women and resituating it as a human rights violation. Davis (2001) agrees with this separation pointing out that failure to distinguish the two would trivialize the horrors of the female procedures such as are depicted in film, *Razor's Edge*. Davis is, however, concerned that whereas both surgeries involve removal of healthy genital body parts without medical necessity, one is seen as a mutilation and therefore criminalized while the other is taken as a societal norm with no legal oversight or licensing of its ritual practitioners.

In the human rights discourse, FGC has been framed as a violation of human rights under international and several nations' laws. It is seen as an affront to the right to life and dignity of many women and the girl child especially through deaths that result from unorthodox FGC practices and the complications that arise in the course of the practice mentioned under the negative health consequences frame (Idowu, 2008). Rahman and Toubia (2001) are of the view that the cutting of healthy genital organs for non-medical reasons is a basic violation of girls' and women's right to physical integrity regardless of the degree of cutting or the extent of the complications. The Fourth United Nations World Conference on Women that took place in Beijing in 1994 made the case that there were intimate interconnections between women's health and women's human rights, and consequently called on governments with practicing communities to eradicate the practice. One of the actions taken by the United Nations was to declare April 6 of every year as the "International Day of Zero Tolerance for Female Genital Mutilation" (UNFPA, 2007).

The WHO (2000) situates human rights violations of FGC on the loss of sexual pleasure associated with damage to or removal of the clitoris. According to feminists (Hosken, 1994; Nussbaum, 1999 and Rahman & Toubia, 2000), the removal of the clitoris is said to further destroy, annihilate or impair female sexuality. Because these feminists consider the clitoris to be a key erogenous zone and the most sensitive part of the female genitals the way the penis is to the male genitalia, they conclude that the removal of the clitoris is the same as castrating

the male genitals. This view is reinforced by the claim that “almost all types of female genital mutilation involve the removal of part or all of the clitoris, which is the main female sexual organ, equivalent in its anatomy and physiology to the male penis” (WHO 1997:8).

Findings of studies carried out to investigate this phenomenon have reported mixed results. A study of Ismalia women to investigate their psychosexual realities of sex by El-Defrawi, Lofty, Dadash, Refaat, Mohamed and Eyada (2001) found that cut women had more complaints about lack of sexual desire, being less pleased by sex and having less orgasm than the uncut women. El-Defrawi et al concluded that sex has negative psychosexual impact on cut women. Thabet and Thabet (2003) also carried out a study to try and verify the effect of female circumcision on female sexuality using women who had minor cuts and others with the severe cut plus a control group of uncut women. They found that sexuality was not affected in those with minor genital cuts but it was markedly affected in the severe cases of genital cutting. The findings further showed that sex desire, arousal and ability for attaining orgasm were especially affected in the latter cases. In yet another study of infibulated Somali women by Catania, Abdulcadir, Puppo, Verde, Abdulcadir and Abdulcadil (2007) found that contrary to this construction of FGC as a violation to the sexual rights of cut women, infibulated women do experience orgasm. Although there was a significant difference in desire, arousal, orgasm, and satisfaction between infibulated women and a control group of women who were not infibulated, the infibulated ones still

reported orgasm in high percentages. Catania et al also reported no significant differences between the two groups in lubrication and pain during intercourse. Whereas FGC is said to be comparable to castration in men in the dominant discourses, Catania et al argued that infibulation does not excise all erectile structures fundamental for orgasm and this found support in the data. Another study of infibulated Eritrean women by Dopico (2007) found that the respondents experienced sexual pleasure in many different ways and she came to similar conclusions like those of Catania et al. As an insider in a FGC practicing community reflecting on the practice, Ahmadu (2000) contends that lack of sexual satisfaction has been grossly exaggerated in dominant discourses on FGC and that there is a sense in which interpretations of sexual satisfaction might be prejudiced by the insistence on the biological role of the clitoris in orgasm. Such mixed findings go to show that the claims that FGC is a human rights violation of women is not definitive.

The construction of FGC as a human rights violation of women's sexual integrity in the dominant discourses led to actions being put in place to deal with FGC. Hosken (1979) is reckoned to have been instrumental in convincing the international community to put measures in place to eliminate the FGC practice. Western agencies like the United Nations and the WHO resulted to defining FGC as an atrocity that must be stopped. Consequently, a number of treaties and conventions were enacted condemning and ultimately criminalizing FGC and several of them have been ratified by several governments of countries where the

practice is still prevalent. The WHO Interagency statement (2008) lists those treaties and conventions to include:

- The Universal Declaration of Human Rights (1948) that proclaims the right of all human beings to live in conditions that enable them to enjoy good health and health care (art. 25)
- The International Covenants on Civil and Political Rights and on Economic, Social and Cultural Rights (1966) condemn discrimination on the grounds of sex, and recognize the universal right to the highest attainable standard of physical and mental health (art. 12)
- The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) (1979) (art. 2f and art. 5a)
- The Convention on the Rights of the Child (1989) (art. 19.1, art. 37a, art. 24.3)
- The Vienna Declaration and the Program of Action of the World Conference on Human Rights (1993) expanded the international human rights agenda to include gender-based violence including FGM/FGC
- The African Charter on Human and Peoples' Rights, (1997) (art. 4, art. 5, art. 16, art. 18 (3))
- The Addis Ababa Declaration. At the Council of Ministers during its sixty-eighth Session in July 1998, the Organization of African Unity (OAU) adopted the Addis Ababa Declaration on Violence against Women
- The Beijing Declaration and Platform for Action (2000)

- United Nations Economic and Social Council (ECOSOC), commission on the status of women resolution on Ending Female Genital Mutilation (2007)

As a response to this human rights violation discourse and actions taken by the international community, Svoboda and Darby (2008: 286) observe that:

no matter how important circumcision of girls may be to the cultural/ethnic/religious groups that practice it, world opinion has determined that girls' bodies are more important than tradition, and that any cutting of the female genitals is Female Genital Mutilation, now banned by law.

The Kenya Government has ratified several of the international conventions on the rights of women and children listed above and signed several conventions, charters and protocols. A report appraising the performance of the anti-FGC campaign in Kenya by the Ministry of Gender, Sports, Culture and Social Services (2007) lists the treaties and conventions that the Kenya government has signed which include the United Nations Convention on the Rights of the Child (UNCRC, 1990), the African Charter on the Rights and Welfare of the Child (AFRWC 1996), and the Protocol to the African Charter on Human and Peoples' Rights on the Rights of the Women in Africa, "Maputo Protocol" (2003). It also adopted the recommendations of the Fourth Conference of Women held in Beijing (1995) which cited FGM as both a threat to women's reproductive health and as a violation to their human rights.

According to the Ministry report cited above, Kenya enacted The Children's Act in 2001 and the following year, the Act came into force, outlawing the practice of FGM. Section 14 of the Act stipulates that "no person shall subject a child to female circumcision, early marriage or other cultural rites, customs or traditional practices that are likely to negatively affect the child's life, health, social welfare, dignity or psychological development". The Act stipulates that practices such as FGM are punishable by law. It specifies that a person who is found to have violated section 14 of the Act shall upon conviction be subject to "a term of imprisonment not exceeding twelve months, or to a fine not exceeding fifty thousand shillings or to both imprisonment and fine." Further, Section 119(1)(h) provides that a child in need of care and protection is one "who, being female, is subjected or is likely to be subjected to female circumcision or early marriage or to customs and practices prejudicial to the child's life, education and health." On 30th September, 2011, the Prohibition of Female Genital Mutilation Act was assented to by the Kenyan parliament and the same was gazetted on 4th October, 2011.

Like the other two frames, the human rights violation frame too has been contested. Bell (2005) for instance argues that the terms in which FGC is condemned by international agencies require review. In the same vein, Lane and Rubinstein (1996) are opposed to parents of girls who have undergone the rite being referred to as monsters bent on grossly violating the rights of women and girls, claiming that on the contrary, such parents are ordinary, decent, caring

persons who are concerned for the general welfare of their children within the context of their cultures. This observation points to the need to look at issues of human rights in light of the context of the FGM practicing communities. Smith (1992) observes that dominant discourses on FGC were grounded in universalism and hence failed to adequately appreciate the importance of culture in defining women's experiences and priorities given that practicing communities operate within the context of collective rather than individual rights. Concerning the argument that FGM annihilates women's sexuality, Wax (2006) contends that there is no meaningful way of compiling data to support this claim. Indeed, Obermeyer (1999, 2003, 2005) argues that the claim that FGM destroys, annihilates or impairs female sexuality is problematic because there is no sufficient empirical evidence to support it. Corroborating this view is Lightfoot-Klein (1989) who observes that many infibulated women retain a significant capacity for sexual pleasure. This is corroborated by the studies cited earlier (El-Defrawi et al., 2001; Thabet & Thabet, 2003; Catania et al., 2007; Dopico, 2007).

Claude Ake (1987) makes an analysis of human rights in general and argues that it would be difficult to apply them in a traditional African set-up. He begins with the premise that by their very existence, human beings anywhere in the world have certain basic rights that constitute the necessary condition for them to enjoy a good life. He argues that not only are humans entitled to basic human rights but that they are required to claim them. To ensure that the quality of life of persons is not compromised, Ake says that society is enjoined to allow the people to enjoy

those rights. In his discussion of legal rights, he contends that legal jurisdictions provide the framework upon which individuals can claim their rights against individual members or institutions and society is obligated to uphold those claims. He, however, contrasts this set-up with African traditional societies which are by nature collective entities. In the African traditional set-up, there is a strong sense of belonging to families, clans, ethnic groupings and lineages. Consequently, it is very difficult for individuals to claim autonomy from the group they belong to or claim rights that set them off against the other members of those groups. In that context, individuals are obligated to their community members and are not allowed to make individual claims that take precedence over those of the society. Because the communities think largely in terms of and are committed to what is good for the group, Ake is of the view that pursuing individual rights would bring about conflict rather than harmony in the society. The importance of context when discussing human or women's rights is echoed by Mead (1959) who argues that in the African setting, self develops based on one's interpretation of the generalized other, which in this case is the attitude of the entire community. Flowing from this, self is not realized outside community and consequently, an individual from such a community will succumb to community demands. Whereas the human rights discourse situates such a person as a victim who must be set free, Ngambouk (2010) argues that within such communities, the decision to succumb to community demands is about empowerment, social integration and women's agency a point that has already been made earlier by Swai (2006) and Mahmood (2005). Ngambouk is of the view that framing anti-FGM interventions in human

rights terms undermines cultural survival and community rights and considers organizations that do so as agents of neo-colonialism. This view is elaborated by Hodzic (2017) in her anthropological work in Northern Ghana in which she questions why despite low levels of female genital cutting in the region for 30 years, there has been an influx of NGOs campaigning against the cut and working with government to enforce laws against the practice. To her, such interventions are impositions on practicing communities from outside and she is not surprised these interventions encounter resistance because the practicing communities are not involved in the debates that shape laws and policies against FGC. Hodzic considers such interventions cultural imperialism. A study of legal enforcement against FGC in Senegal by Kandala and Komba (2015) found that although legislation has been one of the driving forces behind the eradication of the FGC in that country, it falls short of offering adequate protection to potential victims. They conclude that no amount of legislative measures would be sufficient to completely eradicate FGM.

A review of the current status of legislation and policies on FGC in 27 African countries and Yemen by Muthumbi, Svanemyr, Scolara, Temmerman and Say (2015) showed that the majority of countries have adopted legal frameworks prohibiting FGC but that the measures have been ineffective in preventing and/or in accelerating the abandonment of the practice. The review further indicated that legal frameworks had achieved limited impact on societal attitudes and perceptions of FGC and that it is only in two of those countries where the law has

had an impact on prevalence mainly because of strict enforcement of legal measures which had been complemented by robust monitoring and advocacy efforts in communities. There was evidence in that literature, however, to suggest that rigid enforcement of FGC laws has sometimes been counterproductive. Odkogbe, Afolabi, Bello and Adeyanju (2017: 145) are of the view that this failure of legislation to realize the expected reduction in FGC prevalence is “because most of the legislations are not complemented by measures to influence the cultural and religious expectations of the communities within its comprehensive social context.”

Ake (1987) proposes that a solution to this challenge would be to involve local communities in constructing human rights violations of their cultural practices and posits that any intervention seeking to push for human rights has to be visible and relevant to the communities. In their research on the limited effectiveness of legislation against the practice of FGC in the Upper East Region of Ghana, Ako and Akweongo (2009) reached a similar conclusion noting that communities practicing FGC must be educated and dialogue strengthened between them and other actors to ensure that they are fully involved in the planning and implementation of anti-FGC interventions. A case that illustrates this was a study on abandoning FGM in Ethiopia (Womankind International n.d.) which discovered that human rights were seen by the community as abstract concepts and were therefore not prioritized. The study which utilized community conversations ensured that discussions about FGM and human rights took place in

‘women only’ spaces to build up the women’s confidence so they could voice their views before involving them in mixed conversations with men. The study facilitators deemed it important to engage men and boys in the conversations as well arguing that change in the practice could not be achieved without them. It was also observed that when communities do not believe they are mutilating girls and women, the use of the term “FGM” can make it difficult to start conversations.

Though a proponent of dominant discourses on FGC/M, Idowu (2008) appeals for a realist approach in handling FGC and human rights especially where the practice is a deep-rooted socio-cultural phenomenon. A systematic review of the effectiveness of interventions designed to reduce prevalence of FGC by the Norwegian Knowledge Centre for the Health Services (Kunnskapscenteret, 2009) acknowledged that a causal link between beliefs about women’s rights and FGC behavior has not been fully explored, pointing to a need to interrogate local communities perceptions of human rights vis-à-vis cultural practices. Critics of the human rights discourse are of the view that ‘human rights’ is a foreign concept to practicing communities. Mackie and Le Jeune (2009) argue that deliberations on what human rights mean in terms of the local vernacular and how they relate to the most fundamental values of the local community can be transformative. In the same vein, Merry (2006) observes that for anti-FGC interventions to be successful, human rights ideas need to be translated into local terms and be actively remade in the local vernacular. Murray (1974) contends that the legal

community must first start with the experiences of women and girls in naming the terms of the FGC debate arguing that only then will the constructed debate adequately address their oppressive experiences and expose the violations of their rights. She is of the view that when women and girls are given the power to name their true oppressions and experiences in the public space, they may then be able to work together to re-evaluate the traditions that silence them and determine which ones are essential and which are oppressive.

### **2.3 African constructions of FGC – an overview**

Constructions of FGC discourses in Africa have also been captured in literature. To a large extent, those constructions show cultural nuances of the practice and hence differ from the dominant discourses which look at the practice from a health and human rights perspective which is modernistic in approach. The constructions of FGC by practicing communities are as diverse as there are communities and cultures. According to Mogga Frissa (2011), FGC is generally carried out to shape an identity meant to define social relations, norms, values, and principles relative to the ethnicities that practice it. For instance, among the Somali where infibulation is quite common, the emphasis on purity in relation to readiness for prayer tends to be used as one of the justifications of the practice (Boyle, 2001). Although there is no evidence to link the practice to Islam, some Moslems encourage the practice on the basis of fulfilling religious obligations (Abusharaf, 2000, Lightfoot-Klein, 1989).

For some communities, the procedure is deemed important because it,

removes the last vestige of maleness from the female body, as the male circumcision removes the last vestige of femaleness from the penis; female genitals are totally hidden and internal after the procedure, as male genitals are fully exposed and external after theirs. (Wax, 2006:2)

Those communities consider external female genitalia to be ugly, offensive and/or dirty (IRIN News, 2004). Aesthetics of the female genitalia inform some communities' FGC practices. According to Lane and Rubinstein (1996), communities that practice infibulation consider the cut genitalia to be more hygienic and attractive than the natural one. Commenting on this, Hellsten (2004) observes that all forms of genital alteration derive from ideas about the place of human sexuality in society and are done with the belief they will improve the subject's life.

In Kenya, culture and tradition are cited as the most common reasons for the FGC practice. Among many communities, FGC has been practiced as a rite of passage by which the initiates make a transition from childhood into womanhood, consequently rendering them marriageable. In those communities, an uncircumcised female would be referred to in derogatory terms as a girl (kirigu is used among the Kikuyu) no matter her age. Indeed in some communities, an uncut state is unconceivable because FGC is embedded into all cultural practices and it is mandatory for one to be cut in order to participate. The uncircumcised in those communities suffer stigmatization of various kinds. In his ethnographic

study of the Kikuyu people of Kenya, Jomo Kenyatta (1938) saw female circumcision among the Kikuyu people as fundamental to tribal psychology, asserting and reinforcing the educational, social, moral and religious belonging to the Kikuyu community. The traditional practice was deemed crucial to the continued survival of the Kikuyu as a distinct cultural entity and through it girls were admitted into full membership of the community.

A quote from the report of an anthropological study of the Rendille people of Kenya (Shell-Duncan, Obiero & Muruli, 2000: 115) reported a woman saying, “For Rendille women, circumcision is the only thing that separates us from animals.” For this people group, the cutting marks the transition from childhood to womanhood after which one can marry and get children. Cutting has economic implications because the family the initiate comes from can receive bride price for her. The ability to endure the pain is considered important in preparing the initiate for the pain of childbirth and challenges of the married life. They also consider the cut as useful in reducing sexual desires because if the husband is away for long periods and she sleeps around with other men, she can lose respect. For them, circumcision gives one an enhanced social status since the initiate can head her new household once she is married and is also allocated livestock. Many practicing communities in Nigeria believe the rite helps preserve traditional values such as “religious purification, family honor, protection of virginity, prevention of promiscuity, increasing sexual pleasure for the husband and enhancing fertility” (Idowu 2008: 19).

These are but a few examples of how FGC is constructed in Africa. It is clear that diversity exists in the way different people groups in the different contexts construct discourses on the practice. While some consider it important as a cultural norm, for others, it is about religion, and yet for others it is about body aesthetics and so on. This then puts to question the universalistic discourses of health and human rights violations to the exclusion of cultural considerations.

The literature review on FGC mainly examined how FGC has been constructed in dominant discourses. The literature reveals that there are two broad discourses on FGC namely the health violation and the human rights violation of women and girls. That literature presents a monolithic view of oppressive patriarchal cultures bent on taking control of ignorant and subservient women without consideration of their right to health, physical integrity and sexual fulfillment. The literature casts the practice as a symbol the extreme nature of gendered oppression in Africa. It is clear as Mkabela (2005) argues that the voices of the natives of Africa are missing in these accounts and appraisals of their FGC experiences in this key literature by the Euro-American scholarship. The brief overview of FGC discourses from the African perspective clearly reveals a diversity of discursive spaces available to the Maasai and a diversity of constructions resulting from those spaces which suggests that there are different nuances on the practice beyond what the world has been and continues to be socialized to regarding the practice of FGC. The literature also highlighted criticisms to the dominant constructions raising questions about evidence to support the dominant positions on the practice.

## **2.5 Summary**

This chapter has presented the theoretical underpinnings of the study with a discussion on social construction of reality and discourse formation. Its relevance to the study was also explicated. Literature on dominant discourses on the practice of female genital cutting has been reviewed and criticisms against those discourses highlighted. An overview of African constructions of the practice was presented which reveals that great diversities exist among different African communities in how they view FGC.

The next chapter gives a profile of Kajiado, the location of the study, to help in contextualizing the finding of the study.

## **CHAPTER THREE**

### **KAJIADO COUNTY IN PERSPECTIVE**

#### **3.0 Introduction**

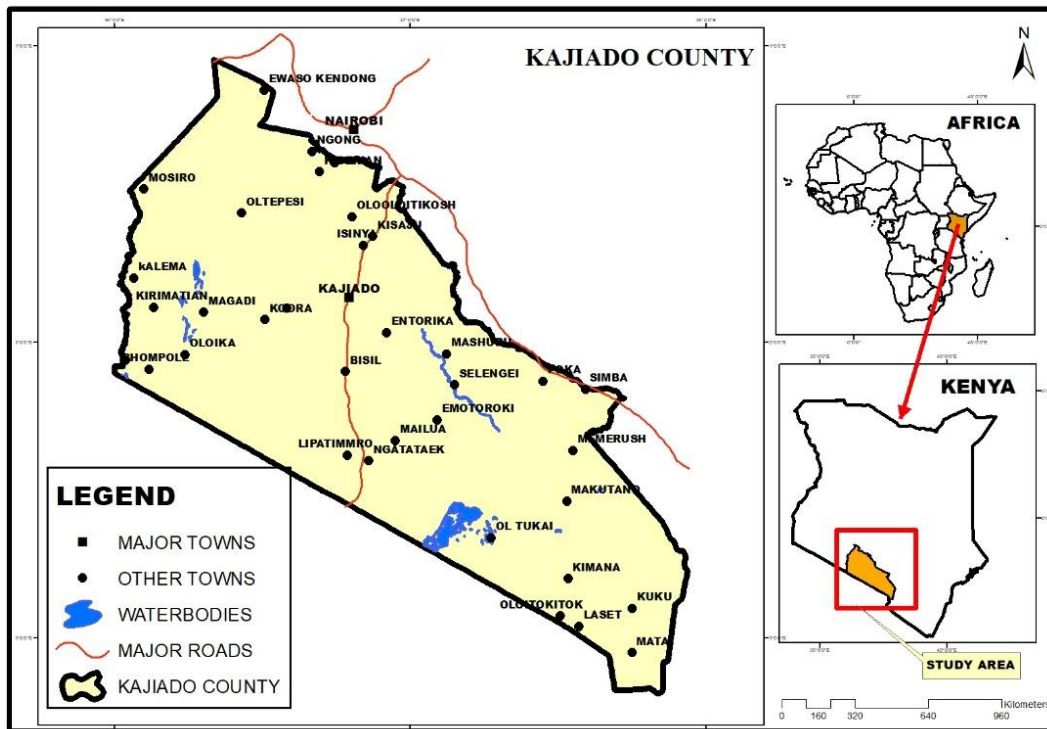
Kajiado County was chosen as the field for research (see rationale given in section 4.3). This chapter presents an overview of the community within which the study was carried out. It includes the geographical, economic and other socio-cultural aspects of Kajiado County to help contextualize the construction of FGC and notions of womanhood among the Maasai.

#### **3.1 Location**

Kajiado County was created after the implementation of the 2010 Kenya Constitutional Referendum. It lies at the southern edge of the former Rift Valley province, about 80km from the Kenyan capital, Nairobi. It borders Nakuru, Nairobi and Kiambu to the north, Narok to the west, Makueni and Machakos to the east and Taita-Taveta and Tanzania to the south. Data from the County website indicates that it covers an expansive area measuring about 21,292.7km<sup>2</sup> with an estimated population of 687,321 people according to the 2009 National Census although the current figure posted on the County website now estimates it to be 999,819. The population was projected to grow to one million by 2017 hence the latter figure is not far from that reality. This constitutes a very small part of the Kenyan population which is moving towards the 50,000,000 mark as

per the 2017 estimates. It has seven administrative districts which are Kajiado Central, Isinya, Loitokitok, Magadi, Mashuru, Namanga and Ngong. Some of these double up as districts and towns.

**Map 1: Map of Kajiado County**



Designed at the GIS Remote Sensing Lab, University of Ghana.

History has it that the name Kajiado derives from the Maasai word '*Orkejuado*' which means 'the long river' in reference to a seasonal river that flows west of Kajiado town. Kajiado was initially occupied by the Maasai people and a majority of them occupy the rural areas. In the last two or so decades people from other Kenyan communities as well as foreign nationals have been moving into

Kajiado and settling mainly in the urban areas of the different towns in the County. Ngong administrative district takes the largest share of the population registering over 100,000 residents in the 2009 population census and this has been rising steadily since then as more and more people buy land from the indigenes and put up their homes. Many of these people commute to Nairobi the capital city to work on a daily basis. It is a highly cosmopolitan district and its close proximity to the Kenyan capital explains this. The Kenyan migrants into Kajiado County include Kikuyu, Kalenjin, Ameru, Kamba, Luhyia, Kisii and Luo among others. Some of these, including the foreign nationals have intermarried with the Maasais and hence made Kajiado their home. There are those who have settled there primarily to do business while others are employed as civil servants by the national as well as the county governments and non-governmental organizations such as AMREF and Action Aid. Others have bought land to do modern farming using irrigation in the drier parts but live in neighboring counties and often visit their farms over the weekends.

Despite influences from other cultures, education and modernity in general, the Maasai people have clung to their unique culture making them stand out whenever they are among other people especially because of their dress and other traditional adornments and way of life.

**Image 1: Maasai women**



Photo credit: <https://afktravel.com/wp-content/uploads/2015/06/maasai-women.jpg>

### **3.2 Socio-political organization of the Maasai community**

The Maasai culture has a political organization that is based on a series of age-sets of the male in the community. The males, like the females, also have rites through which they transition from childhood to adulthood. At age four, a young boy's lower incisors are removed with a knife and as they grow older, they are tattooed on the stomach and arms. Then their ears are pierced till the earlobes dangle sometimes up to their shoulders. This is done by piercing the cartilage of the upper ear with hot iron and when this heals, a hole is cut in the ear lobe and enlarged by inserting leaves, wood or mud. Next is circumcision which is considered the most important event in a young Maasai male's life and which is carried out according to age-sets. Involving great physical pain, circumcision is said to test courage of the young men. Cowards bring shame to their families and are fined a cow while the brave are a source of pride to their families and get

rewarded with cattle or sheep. After circumcision the boys are incorporated into an age-set whose first step is becoming warriors, also known as *morans*. They move into a camp called *emanyatta* for about ten years where they learn about brotherhood and acquire skills to protect their community and take care of livestock. In this period, they grow their hair long and style it into thinly braided strands using ashes, clay, animal fats and ochre and then weave it together with threads making brightly-colored red locks.

**Fig. 4: A Maasai Moran**



Photo credit: <https://www.pinterest.com/Mankosa/masai-tribe/>

After graduating from the camp, the morans have their heads shaven clean by their mothers after which they transition to junior elder and they can then marry and establish their own home. They transition to senior elder and finally retired elder. Each of these stages is estimated to last for about 15 years. Traditional administration of the Maasai community is a responsibility that is carried out by the senior elder age-set and what the junior elders do is to carry out the instructions of the senior elders. Traditionally, decision making among the Maasai on community matters is the domain of these senior elders but even at the family level it is the husband who makes decisions and never the woman.

Administration functions of the Kenyan communities have to a large extent been taken over by the government who work through chiefs appointed from the localities but the age-sets among the Maasai continue to provide an important social structure for relationships among them. With modern education slowly taking root among the Maasai, women are entering the political decision making arena but because of the marginalization they face in the socio-political structure, they find it a big challenge to get the support for them to compete favorably with the men. The gender mainstreaming policy of Government is opening up the space for women and little fruit is being realized among the Maasai as they now have their first female MP and a few others serving in different capacities in the County government.

### **3.3 Climate of Kajiado**

Kajiado County primarily has a semi-arid climate. The average annual temperature in the county is 18.9°C. The area receives about 500mm of rainfall annually, most of it falling in April. Areas bordering Tanzania seem to have fairer weather and are good for agriculture. This arid nature of the larger part of the county has negative implications for agricultural and livestock farming. The month of August is usually extremely dry. It is common to find community members mainly those in the rural areas trekking long distances in search of water, some as far as 10 kilometers. The urban communities are to a large extent served with pipe borne water by the County government and where that is not available tankers that sell water can be easily located. The County government has put into place measures to increase the forest cover to ensure that there is improvement in the climatic conditions because the Maasai livelihoods of livestock herding and agriculture depend on it.

### **3.4 Economic activities in Kajiado**

The Maasai have historically been a pastoralist community dealing mainly in cattle and goats. They have traditionally considered cattle as a gift bequeathed to them by their god *Enkai* and that in a way explains their former cattle raiding activities because they believe that all cows belong to them. The animals are a sign of wealth in the community and are often used in payment of dowry when their daughters are being given away in marriage. Livestock rearing is a major

economic activity for the Maasai providing a source of livelihood for many indigenes. The livestock farmers mainly sell their milk to neighboring hotels and households, while they sell the surplus in Nairobi. The county also provides a huge market for beef and goat meat, with over 2,000 animals being slaughtered daily for its market. The county is famous for its meat roasting joints visited by people from neighboring counties with goat meat as their favorite. The livestock population has, however, been dwindling owing to the Government taking over large chunks of land and hiving it off as game reserves. Whereas the Maasai could comfortably move across large territories seeking pasture for their animals in the past, they can no longer do that. Besides, some people have started farming by irrigation thereby bringing conflict between them and the pastoralists who want their animals to roam for food. A lot of Maasai people have also sold their land to people from other regions especially in the districts adjacent to other counties thereby leaving very little land for pastoralism. In recent times, Kajiado like other counties in Kenya has suffered from drought resulting from current changes in global weather patterns resulting in the death of a lot of their livestock. The government is encouraging them to diversify their livelihoods to avert such calamities in the future.

The Kajiado climate is not conducive for agriculture but there is a growing number of farmers in Isinya, Kimana, Rombo and Entonet in Kajiado South who are doing irrigation farming to support subsistence crop farming. Crops that are grown under irrigation include kale, cabbages, onions, tomatoes, pepper, beans,

maize and oranges. A lot of these crops find their way to different markets in the country. Market traders from other counties travel all the way to Kajiado South to buy these crops during the harvest from the farms. To encourage more people to go into farming, the County Government is carrying out programs that are listed on its official website namely field extension services, crop production demos, training in crop husbandry, greenhouse management and project management. It has also been supplying seeds to farmers especially those in vulnerable households and carrying out excavation of water pans in collaboration with KEFRI. For livestock farmers and others on that food chain, the Government has also been carrying out livestock disease surveillance, training for butchers, and fish farmers on quality control and safety.

Another major economic activity in Kajiado County includes tourism, particularly in the Amboseli National Park. Part of the revenue from the National Park goes to the County government and is used for development of the community. There are indigenes who secure work as tour guides in the National Park while there are others who have set up cultural villages there where they sell their beautifully crafted cultural items, perform some cultural dances and other activities that bring them revenue. There is vibrant commodity trading which is carried out both in shops and open-air markets. The towns come alive and are very colorful on market days with a lot of the Maasai from the rural communities coming out to shop. Sand harvesting and quarrying are another important feature of the economy

of Kajiado and so is soda ash mining at Lake Magadi. A number of Maasai have also moved to the urban centers to get employment.

The County government is also collaborating with market players like the National Chamber of Commerce to market traders' goods and services in markets that have previously been inaccessible to them. An example given in the County website is of the 2015/16 opportunity that Maasai women had to market their handicrafts in Botswana. The County has also organized capacity building training workshops to sharpen the entrepreneurial skills of the traders.

### **3.5 Health delivery in Kajiado**

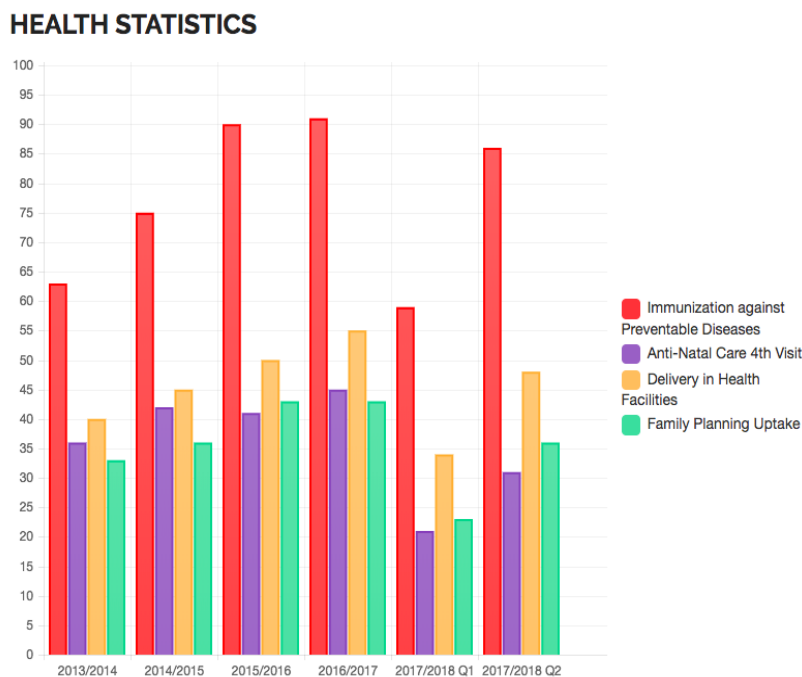
Kajiado has one referral hospital in Kajiado town, three sub-county hospitals in Loitokitok, Ngong and Kitengela, several health centers a number of which are undergoing upgrades, 98 dispensaries, several community health units and outreaches. This notwithstanding, the state of healthcare delivery in the rural areas is in deplorable shape because many of those areas lack access by road and are poorly resourced by Government so the residents have to contend with walking long distances to access modern medical care. However, international organizations such as AMREF are working to bring health care closer to the community at times with mobile clinics. Some of the notable healthcare facilities in Kajiado include the Nairobi Women's Hospital (Kitengela), Kajiado District

Hospital, Ngong Sub-District Hospital, Loitokitok District Hospital and Namanga Hospital among others.

The County Government is working hard to ensure all residents are able to access health services through the NHIF without having to incur huge bills. The chart below shows the state of accessing healthcare in the five year period between 2013 and 2018 and it is a clear indicator that access to healthcare has not been good. Antenatal check-ups on average are way below 50 per cent and baby delivery at health centers is not much better. Immunization against preventable diseases has, however, seen good patronage maybe because Government always takes immunization of children seriously and runs outreaches or mobile clinics for that purpose. If this analysis was controlled for just the Maasai people in Kajiado, the results would be negatively skewed. The people living in the urban areas are the ones who normally access modern health care and majority of these come from other regions and countries. A good number of them have an appreciable level of literacy to understand and appreciate the need to access those health care services

In the traditional culture of the Maasai, traditional healers known traditionally as *laibons* and herbalists have attended to the health needs of the people. In the rural areas where a lot of the Maasai people live, the services of these healers continue to be patronized.

**Figure 2: Access to health services in Kajiado**



Source: [www.kenyampya.com](http://www.kenyampya.com)

### 3.6 Access to education in Kajiado

Primary school education is free in Kenya but due to social cultural challenges, there are a lot of the indigenous Maasai who have not been able to access education. As of 2013, Kajiado had 198 primary schools but the enrolment rates among the indigenous Maasai in the county remains low. A 2013 report by the Kenya Bureau of Statistics showed that 31 per cent of residents in Kajiado have no formal education, 42 per cent have a primary level of education only and 28 per cent have secondary level education and above. The report noted that the percentages could be lower if the analysis took into account only Maasai children. The current literacy level is pegged at 65.2 per cent, the enrolment rate at 56 per

cent and retention rate at 47 per cent. There are eight vocational centers spread throughout the five sub-counties where students are trained and mentored in business and a model is in place for provision of start-up capital. There are 42 secondary schools in Kajiado County notable among which are Maasai High School, Oololaiser High School, Moi Girls Secondary School, Enoomatasiani Girls Secondary School, Dawamu Academy and Maasai Academy.

A 2013 joint program on FGM/C report by the Ministry of Finance and Planning in Kenya showed that illiteracy was highlighted as the number one cause of poverty in the district. Western education runs concurrently with traditional education but there is a wide gap between the two. In the latter, children and young adults learn to overcome fear, endure pain, and assume adult tasks through the activities they are made to engage in. For example, young boys will take responsibility of herding family livestock and they have been known to encounter wild animals like lions in the wild. They can call for help but there have been occasions when some of the young men have killed the wild animals on their own, displaying great courage. The girls carry out domestic tasks alongside their mothers thereby getting socialized to their adult roles. The rite of passage events for both boys and girls provide a great opportunity for them to learn about their culture and adult roles and the rite itself is a test of courage through the pain they have to endure from the cut. This kind of education inculcates cultural values into the children and ensures continuity of the culture. The Western kind of education

on the other hand inculcates the writing, reading and arithmetic skills in the children with a view to preparing them for the job market.

### **3.7. Summary**

The profile of Kajiado presented here shows a region that is expansive but not well endowed in terms of climate, natural resources and infrastructural developments but one that is attracting people from other regions and nationalities thereby exposing their rich cultural heritage to forces of change especially in the urban areas.

## **CHAPTER FOUR**

### **METHODOLOGY OF THE STUDY**

#### **4.0. Introduction**

This chapter outlines the methodology that was used in interrogating the pertinent issues of the study. It begins by explaining the research design that was used and the rationale for choosing it. This is followed by a discussion of the strategies used in this study, which include the sampling techniques, data collection, and data analysis plan and the rationale for their selection.

#### **4.1 Research design**

This study employs a qualitative approach that allows for an in-depth study of the construction of FGC and womanhood among the Maasai of Kajiado County of Kenya. The qualitative approach is best suited to study the construction of womanhood and the traditional practice of FGC from the perspective of the indigenes where the rite is practiced. Qualitative methods can be based on an interpretative epistemology that assumes social reality to be dynamic, constructed and evolving (Marsh & Stoker, 2002) and primarily seek explanation of phenomena from individual cases (Mahoney & Goertz, 2006).

To explore how the Maasai construct FGC discourses and the notions they have of womanhood, data was derived from in-depth interviews and focus group discussions (FGDs). I concentrate on the respondents' perceptions about FGC and womanhood to throw light on how a practicing community perceives FGC, a highly controversial topic.

## **4.2 Data collection instruments**

Two instruments were used to collect data namely in-depth interviews and FGDs.

### **4.2.1 In-depth interviews**

From a social constructionist perspective, I considered individual in-depth interviews as the most appropriate technique of exploring the research participants' notions of womanhood and how they make sense of FGC. The approach allows the researcher to explore perceptions, attitudes and opinions of respondents and in the case of the Maasai who are an oral society, in the way that they normally communicate. To do this, I developed two sets of semi structured open-ended questions, one for men and one for women to guide in interrogating these two concepts (See Appendix I & II). The aim was two-pronged: one, to get information on the Maasai notions of womanhood – processes or stages of becoming a woman, their roles, aspirations, status and agency in the community, and two, how the community makes sense of the practice of FGC and the

relationship of the two. The interviews assisted in helping to capture the complexity of the Maasai community's thoughts, perceptions, and feelings on womanhood and the cultural practice of FGC as presented by the interview participants. The use of open-ended questions allowed the interviewees to share their perspectives and enabled me as a researcher to discern contextual nuances as well as probe for depth (Aberbach & Rockman, 2002).

I conducted 32 in-depth interviews across three sub-counties in Kajiado, which consisted of 11 males and 21 females. The intention was to do 20 interviews each for the males and females but the final sample size was determined by the saturation point. The saturation point was reached when it was realized that additional interviews were not adding anything new to the data already collected (Patton, 2002). Some of the interviews were held in the participants' homes while other respondents preferred to be interviewed at their business premises and the rest were done in quiet rooms that were availed to us at the shopping centers. I had scheduled to run each interview for one hour but they ended up taking up approximately 30 to 45 minutes. Some of the participants were brief in their responses even when probed to elaborate and hence took a shorter time while others were much more detailed and took longer.

I also conducted two in-depth interviews with health professionals, one serving in a hospital in the county while the other had just retired and was operating her

private pharmacy shop. Through these interviews, I was able to capture the gynecological and related complications women and girls who have gone through FGC present at the health facilities.

#### **4.2.2 Focus Group Discussions**

Views held by individuals more often than not result from information received and discussed in group contexts. This is especially more true for communities that are communal in nature. Through conversations, such groups mediate messages where individuals in the group may “relay, censor, selectively highlight and oppose” (Green & Thorogood, 2009: 132) the messages being received by the group on issues. For this study, naturally occurring indigenous women’s groups were used for the FGDs and they proved useful in capturing how the discursive space provided by a communal setting facilitates construction of social reality. The FGDs were also used to compliment the data collected through the in-depth interviews. In Kajiado as well as in other counties in Kenya, women’s groups get constituted when women living in the same neighborhood decide to form a group to support each other in diverse ways. They have regular meetings where they discuss matters of importance to them and make regular agreed upon monetary contributions to a group kitty. They use some of that money to start income generating projects the proceeds of which are shared among the group members while the rest is shared among the members in a rotational basis. In Kajiado, the group members use these monies to purchase home and personal items, pay fees

for their children and in some cases invest in their personal small-scale businesses. In the group meetings, some women could be seen doing their beadwork while others brought items like eggs or milk to sell to each other. The NGOs seeking to reach women in these communities identify the leaders of these groups, considered as gatekeepers and then try to work with them. Because the YWCA had worked with those leaders before, I was able to get their contacts and hence get access to the community after getting the necessary research permits. Using the women leaders in Kajiado South and Central sub-counties, naturally occurring Maasai women's groups in the county were identified from which three groups were purposely selected. The leaders of the groups were then asked to select between six to 12 willing members from their groups to participate in the FGDs. This limit was proposed to ensure an effective group discussion where all members get the opportunity to contribute. Facilitating the meetings also required finances and I needed to work within my budget. Limiting the size of the groups, however, became difficult because the leaders proposed that the best day to hold the discussions was on the day and time that the groups meet. It was thus difficult to leave some group members out and we ended up with about 15 participants in each group discussion.

The discussions were intended to elicit more information about women's perceptions as a group about womanhood in the Maasai community, their aspirations, barriers in achieving their goals and ways they can be helped to achieve them. Their views were also sought on how they make sense of FGC. The

discussions were facilitated by the research assistants using an FGD guide (See Appendix IV) that had specific open-ended questions. These research assistants had been taken through an orientation before the actual FGDs.

All the in-depth interview and FGD participants consented to the interview and after getting approval from them, the individual and group interactions were audio recorded. Short field notes were also taken to capture non-verbal impressions of the participants, nature of interaction and anything else useful in contextualizing the responses.

#### **4.3 Research site selection**

Kenya was the location of choice for this study given the longstanding and intense controversy over the practice of FGC since the early 19<sup>th</sup> Century. In those earlier days, the controversy pitted the missionaries and the colonial administration against the practicing communities, key among who were people from Central Kenya. The controversy has persisted to date and now pits the practicing communities against the government. Although there has been a commendable decline in national prevalence of FGC, some communities still record near universal prevalence. The Kisii, Maasai and Somali are three communities in Kenya that have recorded relatively little reduction in FGC prevalence over the years despite intervention programs by NGOs and government. Among the Maasai, for instance, groups like AMREF, YWCA among others as well as the

government have been involved in campaigns towards eradication but prevalence has remained high over the years (over 70%). As already noted, the community was reported on BBC in 2014 to have publicly resisted the anti-FGC law passed in 2011. It was, therefore, considered important to interrogate how the Maasai perceive the practice and its relationship to womanhood. When I left Ghana for my field research, I had limited finances and had therefore designed the data collection process to work optimally within my means. The Maasai people occupy a vast region which constitutes both Narok and Kajiado counties in the former Rift Valley Province of Kenya. I chose Kajiado as my primary research location but upon consideration of the vastness of the County I purposely selected three of the sub-counties, namely Kajiado South, Kajiado Central, and Kajiado North. To help contextualize the study, Chapter Three has given an overview of the county.

#### **4.4 Sampling**

Using community gatekeepers (see sections 4.2 and 4.5 for details), a purposive sampling method was used to select 20 women and 20 men aged 18 years and above who are Maasai indigenes in Kajiado County to participate in the in-depth interviews. Some were contacted in person or by phone by the gatekeepers before we began the interviews while others were asked on the spot in the settlements or at the shopping center and market place once the data collection began. The participants were selected to shed light on the community's notions of womanhood and how they make sense of FGC. The inclusion of a traditional

manyatta (see description of it in section 3.2) for in-depth interviews was a great eye opener regarding cultural views on FGC. In selecting research participants, effort was made to ensure that the sample had diversity in representation of views among the participants in terms of age, education, livelihood and related factors as seen in Table 1 below.

**Table 1: Research Participants Demographics**

ID	GENDER	AGE	EDUCATION	OCCUPATION		
IR1	F	Middle-aged	Basic	Business woman		
IR2	M	Middle-aged	Nil	Community elder		
IR3	M	Middle-aged	Basic	Anti-FGM ambassador		
IR4	F	Middle-aged	Secondary	Civil servant		
IR5	M	Old	Nil	Community elder		
IR6	M	Youth	Basic	Unemployed moran		
IR7	M	Old	Nil	Community elder		
IR8	M	Middle-aged	Training college	Primary school teacher		
IR9	F	Middle-aged	Secondary	Employed		
IR10	F	Middle-aged	Nil	Housewife		
IR11	F	Middle-aged	Nil	Traditional midwife		
IR12	M	Youth	Secondary	Employed		
IR13	F	Middle-aged	Nil	Housewife		
IR14	F	Middle-aged	Nil	Housewife		
IR15	F	Middle-aged	Nil	Housewife		
IR16	F	Old	Nil	Housewife		
IR17	M	Middle-aged	Training college	Pastor		
IR18	M	Youth	Secondary	Student		
IR19	M	Middle-aged	Basic	Community elder/church leader		
IR20	M	Youth	Secondary	Student		
IR21	M	Middle-aged	Training college	Primary school teacher		
IR22	F	Middle-aged	Basic	Businesswoman/women's leader		
IR23	F	Youth	Secondary	Anti-FGM activist		
IR24	F	Middle-aged	Nil	Business woman		
IR25	F	Middle-aged	Nil	Business woman		
IR26	F	Youth	Nil	Tailor		
IR27	F	Middle-aged	College	Women's leader		
IR28	F	Youth	College	Employed		
IR29	F	Young married	University	Employed		
IR30	F	Middle-aged	College	Housewife		
IR31	F	Young married	College	Employed		
IR32	F	Youth	Basic	Business woman		
IR33	F	Middle-aged	Basic	Business woman		
IR34	F	Old	Training college	Nurse		
IR35	F	Middle-aged	Training college	Nurse		

A number of men we had scheduled to interview kept rescheduling the interviews with the excuse of busy schedules and finally never made the time. Some of them were local leaders, that is, chiefs and MCAs (Member of County Assembly) and as much as their participation would have enriched the research data, I could not insist on them making the time since participation was voluntary. We ended up interviewing only 12 males and 21 females.

#### **4.5 Research Ethics**

Ethical considerations are important right from the start of the research process all the way to dissemination of the research findings. From the time of choosing the research topic, I had to think of how I was going to collect the data and how my research subjects would be protected from harm. To enable me conduct the data collection, I sought and obtained clearance from the Ethics Committee for the Humanities at the University of Ghana, Legon. I also applied for and obtained a research permit from the National Commission for Science, Technology and Innovation (NACOSTI) Kenya, and further authorization from the County Commissioner, County directors of health and education, a requirement from NACOSTI. To access the community, I sought help from the Young Women's Christian Association (YWCA) projects office in Nairobi who introduced me to a Maasai lady from Narok who is a girl-child ambassador who happened to be at one of their meetings and through her and the YWCA office, I was able to make the connection with women leaders from the community (gatekeepers). She

kindly accepted to be my key research assistant but I got two others one from Kajiado South and another from Kajiado Central. The different women leaders were the ones who got the permission from the local chiefs for us to be allowed to carry out the research, made calls to several community members inviting them to consider participating in the research and took us to the settlements.

Right from the start, I informed the people I met that I was a student at the University of Ghana conducting a study on women and the cultural practice of FGC. I made it clear that my study was not a government of Kenya or an NGO project but rather, a purely academic research project. Given that FGC is a sensitive and controversial topic, I did not want them to think that I was an agent of the government hence give me responses they think the government would be happy with instead of their honest views. I also did not want them to think that an NGO was funding my study and therefore raise their hopes for financial benefit. I encouraged them to be truthful in their answers because I was there to learn from them. I then read out to them the details on the consent form (See Appendix VI) which stipulated the research procedure, how their rights would be protected, as well as the possible risks involved in the research process. The decision to only do the research among people aged 18 years and above was to avoid having to look for parental consent for them to participate in the data collection. I also told them that they could ask questions during the interview and they could withdraw if they felt they did not want to continue with the interview. To ensure confidentiality and anonymity, I assured the participants that their names would

not be used in my research report and that all efforts would be made to ensure that information that could be used to identify them would not be used unless they desired for it to be used. Those who are working as anti-FGM ambassadors were proud of the work they are doing and introduced themselves as such. I then asked if they understood what the research would involve and if they were willing to participate. I reiterated that participation was voluntary. None of the people I was introduced to as potential research participants refused to participate and none of them withdrew from the interview once it had begun. I had asked the women's leaders and my YWCA contact whether I should prepare copies of the consent forms for the participants to sign but I was made to understand that it was not necessary and cautioned that doing so may even raise suspicions as to why I wanted their signature so I did not ask them to do so. They were happy to give verbal consent. Whenever I asked them to give me a convenient time for the interview, they all said they were ready on the spot. Some of the interviews took place in the participants' homes. There are some who decided to have the interviews in their business premises I guess so as not to miss making sales as the interview went on. We agreed to this plan but if the place was noisy and with a lot of interruptions, then we looked for an alternative place. One of the days we carried out the interviews was a market day and one of the research participants who had a beadwork shop in the market opened up her shop for us to use it to interview women who were coming to the market. After the interviews, I bought some items from her shop as a way of giving back something for her kind gesture.

Aberbach & Rockman (2002) argue that digitally recording interviews is a good way to allow the conversation to flow freely as the interviewer can pay more attention and probe more effectively. All the interviews were digitally recorded after permission was sought from the respondents. Apart from one of the health professionals who asked not to be recorded, all the in-depth interviews and FGDs were recorded. The audio recordings were downloaded onto laptops and then listened to using the oTranscribe software. To ensure that the richness of the interview was not lost, the plan was to for us to transcribe the interviews every evening while they were still fresh in our minds. However, because of distances we at times had to traverse each day in the community, we would be very tired by close of day to sit down to transcribe but we were able to transcribe the handwritten notes taken during the interviews and focus group discussions. We debriefed after each session and this helped me to do the preliminary analysis on emerging themes and note potential challenges. I noted for example that we had to clarify some in-depth interview questions for the participants when doing the initial interviews for the first day and this made me go over the questions again and do the minor edits on those that needed to be edited for purposes of clarity. For instance the question reading, “Please, I’d like you to talk about the process of becoming a woman in the Maasai community, i.e. what does it take for one to be regarded as a woman?” appeared to elicit a single answer, “Female genital cutting” but when I further probed, “Is that all?” then they would mention a number of other things. I therefore edited the question to read, “What are the stages through which one comes to be regarded as a woman among the Maasai?” I

also added the question “What things do Maasai women aspire to be and do?” which naturally led to another, “What prevents them from realizing those aspirations?” The final revised research instrument that appears in the Appendices 1 and 11 is what was finally used. In the FGD guide, question 5 read: (Prompt: Present samples of anti-FGC materials being used in the community and have the group look at and discuss them one after the other.). The follow-up questions read: What is the message in this material? What meaning(s) do you derive from the message in this material? These questions had to be dropped after attempts to get such materials proved unfruitful. The questions that followed these, however, did elicit the information from their memory.

#### **4.6 Data analysis**

Qualitative data analysis is the process in which we move from the raw data that has been collected as part of the research study and use it to provide explanations, understanding and interpretation of the phenomena, people and situations which we are studying (Lewins et al, 2005; Taylor & Gibbs, 2010). According to Marshall and Rossman (1995), data analysis constitutes bringing order, structure and meaning to data collected. As already noted in the data collection section and in line with recommendation by Paton (2002), a post-interview review was done each day whereby the research assistant and I recorded details about the setting of the interview, our observations of the interview, problems encountered and why, emerging insights from the field and the interview process as a whole. By this, we

were able to reflect on lessons learnt from the interviews done on a given day that could inform subsequent interviews and the research report. Data collection, note taking, and analytic memo writing were done simultaneously from the beginning to the end of data collection as a way of capturing issues of concern to be addressed as well as important ideas and concepts which were raised by the research respondents.

The data for analysis mainly constituted in-depth interviews and FGD transcripts. Attempts to get *Itepen e Maasai* a collection of Maasai sayings and proverbs or to collect Maasai songs and cultural artifacts relating to the research problem were not fruitful. The request was actually made to one of the FGDs to do a Maasai song on FGC but the women joyfully sang a song that had one line that said, “Congratulations for going through the cut” repeated over and over and this was not deemed to represent a major constructions of the practice by the Maasai besides the fact that the excitement they exhibited singing the song showed that FGC was celebrated with a lot of joy by the women, a point that is raised in Chapter Six. The profile put together on Kajiado in Chapter Three is helpful in situating the study and putting context to the perspectives research respondents constructed.

The first step we took in analysis of the research data after the post-interview review was to listen to the audiotape interview recording of each research

respondent as many times as possible using oTranscribe in order to immerse ourselves in the participants' perspectives on womanhood and FGC. I did this for respondent accounts in English and some in Swahili while my key research assistant (native Maa speaker) did the same for responses in the Maa and Swahili languages. Following this we did transcriptions of each of the audiotaped interviews verbatim into written text on MS Word. The data collected in Maa and Swahili was translated and concurrently transcribed into English by the key research assistant. Beyond the verbal responses, pauses in conversation and any guttural sounds made by the research respondents in the process of constructing their accounts were also included in the transcripts. These non-verbal expressions were put in ellipses at appropriate positions in the responses. Transcriptions turn the speech and accompanying non-verbal aspects of an interview into text that can be analyzed.

There are a range of approaches to doing qualitative analysis the most commonly cited being framework analysis, thematic content analysis, the interpretative phenomenological analysis (IPA) and the constructivist grounded theory (Rapley, in Silverman, 2005). Thematic analysis of the data content was selected because the study sought to interrogate the Maasai of Kajiado notions of womanhood and how they make sense of FGC and construct discourses around it. Thematic content analysis is the most basic type of qualitative analysis whereby the content of data is analyzed in order to categorize the recurrent themes in the respondent's accounts (Green and Thorogood, 2009). Themes can be taken to mean patterns in

the information gathered which describe and organize the possible observations made by the respondents. The various accounts generated from the interviews were compared with each other with a view to classifying the themes that were common in the data set. Looking for themes in qualitative data is said to involve coding (Lewis et al, 2005; Saldaña, 2013; Miles et al, 2014).

The code-and-retrieve system of data control has been successfully used by social science researchers for the analysis of qualitative data (Gibbs, 2007). The system allows the researcher to code or label all material as it is collected and develop hierarchical ‘trees’ from the emerging patterns of common themes and related ideas. According to Green and Thorogood (2009) the coding system in qualitative research is more commonly developed from the empirical data although elements of it may be pre-determined by the research questions and a researcher’s knowledge of the subject matter. In the case of this study, given that there have been several anti-FGC education campaigns informed by and driven by the dominant discourses, the broad themes of women as victims of patriarchal abuse, FGC as a violation of the health and human/women’s rights violations were used as the first level codes. For the initial codebook, these codes were listed and their accompanying meanings given. The expectation was that given the many anti-FGC education campaigns in the community, the dominant discourses on women and FGC would have been become part of the community conversations and would consequently be produced in their responses. However, given that high FGC prevalence is still recorded in the community, new codes were also expected

to emerge from the empirical data. Re-coding continued through the analysis as themes and concepts became more distinct.

Using Saldana's (2013) coding manual for qualitative researchers as a reference, I read the transcripts to identify key themes emerging from the respondents' accounts and examined them in their contexts and then compared them to establish patterns. Research findings were then categorized and consolidated in consonance with the research aims to facilitate discussion and explanation of the findings. The themes were then used to code the Nvivo data management program. The Nvivo software was then used to code the data and import the portions of transcripts that illustrated the themes arising from the data. This was followed by a descriptive reporting and discussion and analysis of the findings and conclusions were then drawn.

#### **4.7 LANGUAGE DESIGN**

Both of the research instruments were designed in the English language which is the official language of Kenya. However, because the research was conducted in Kajiado among the Maasai people, many of who do not have a formal school education, the instruments were translated into Swahili which is the national language. I conducted interviews in English for participants who preferred that language and with the help of my research assistants we conducted the rest of the in-depth interviews and the focus group discussions either in Swahili or in Maa,

the local language, depending on the language the participants preferred. Only eight participants including the two health professionals preferred English and the rest preferred to use Swahili and Maa. The tendency for many was to unconsciously switch between the languages, especially Swahili and Maa which I believe enabled them to easily speak to the subject being studied, something that happens in normal conversation in attempts to make points we are making clear. I am not very fluent in Swahili and do not speak Maa so my research assistants who were fluent in all three languages helped to facilitate all the interviews in Maa and some of those in Swahili.

#### **4.8 LIMITATIONS OF THE STUDY**

Carrying out social science research has its own challenges. Right from the word go, I expected to encounter challenges in getting people willing to talk about FGC because it is considered a sensitive and controversial topic. On the contrary, the women did not seem to have any problem and in fact some were quite forthright in their support of the practice to our surprise. We could not, however, get as many men as I had scheduled to interview and I could not help but wonder if it was unwillingness on their part to speak on the topic or lack of time due to commitments to work. One of those I planned to interview was a chief and he kept sending messages to the women's leader I was dealing with in Kajiado South that he was going to come but he never did. Majority of the men we interviewed were in support of the campaign to end the practice and I suspect it was easy for

the women leaders to get them to participate in the interviews as opposed to other men, especially the older ones who are still in support of the practice.

#### **4.9 SUMMARY**

The chapter has given a detailed explanation of the methodology used in the study. The design of the study has been explained as well as the sampling, data collection, data analysis and data interpretation processes. The next chapter is a report and discussion of findings on how the Maasai construct notions of womanhood.

## **CHAPTER FIVE**

### **CONSTRUCTION OF WOMANHOOD IN MAASAI CULTURE**

#### **5.0 Introduction**

It is impossible to talk about FGC without engaging with notions of womanhood. The research therefore sought to interrogate how the Maasai of Kajiado, Kenya, construct womanhood and how they locate notions of womanhood in FGC discourses. A cursory look at the interview transcripts shows a common thread running through the views of the research respondents with the common refrain “according to the Maasai culture” illustrating the strong impact their culture has had in their knowledge construction despite their exposure to modern life. The main thrust of this chapter, therefore, is on how the Maasai of Kajiado construct womanhood. To do this, the chapter appraises the different aspects that speak to womanhood construction among the Maasai. These include what constitutes becoming a woman, roles they are expected to play, their status, aspirations and challenges. In addition, the chapter also discusses issues of women’s agency in relation to FGC and in the community in general.

#### **5.1 Becoming a woman**

In a general sense, a female who attains the accepted maturity age is referred to as a woman. In talking with both the men and women in the interviews and focus group discussions, however, it was clear that being born a female and attaining

adult age in Maasai culture do not qualify one to be regarded as a woman. In that community, becoming a woman was described as a well calculated process consisting of rituals that every female has to undergo at stipulated times rather than it being a mere physical transition. It can also be looked at as conditions one needs to fulfil in order to be considered a woman in Maasai culture. In the Maasai culture, womanhood is a status formally conferred on a female by the culture after she has gone through the culturally stipulated rituals.

All the research respondents identified significant physical changes on the female's body as critical signals which showed that her process of becoming a woman had commenced. These views were well captured by an FGD respondent who pointed out that "When a girl grows breasts and her body begins to expand, her hips and body size increases. When her breasts develop, this is when I will start talking to my daughter that now she can get pregnant if she messes with boys" (FGD 1). According to a middle-aged woman (IR25), the discovery that a girl is "developing breasts and keeping the company of the young men called morans" is a signal that she is already venturing into a lifestyle of adults and therefore has to be prepared for it in the culturally prescribed manner.

In the Maasai culture, young girls and boys have occasions to mingle with each other and the culture does not frown upon their engaging in sexual activities before puberty. However, the Maasai frown upon pregnancy of girls who have not

been officially initiated into womanhood and it is considered taboo. To ensure that the girl does not bring shame to herself and her family through pregnancy, she has to be initiated into womanhood. A young educated woman (IR29) noted that “If a girl gets a child before she is circumcised, she is looked down upon and can become an outcast.” A traditional midwife (IR11) further explained that there is no way she can help such a girl deliver as it is the cultural belief that she “would get sick by touching the blood of an uncut woman which is considered unclean.” For the traditional Maasai community then, puberty is considered to be the signal that girls are ready to be initiated into womanhood. According to the respondents, the onset of puberty can start as early as age nine although most of them mentioned age 15. According to an elderly female respondent (IR16) once the physical changes are noticed, the mother starts to talk to the girl and gauges her level of understanding after which she then informs the girl that she is ready for the cut.

The first major step in the process of becoming a woman is the initiation rite of FGC. One cannot talk about womanhood in Maasai culture separately from FGC, a view that was corroborated by all the respondents without exception. A middle-aged businesswoman (IR33) captured it well in the following words, “In Maasai culture, a girl would come to be known as a woman after she went through FGC. She would now be recognized as a grown up person, one who was mature enough to take responsibilities.” Another middle-aged woman (IR13) was categorical in her observation that the tradition of the Maasai demands that “girls must be cut to

become women.” It was the view of all the respondents that in the Maasai culture, a female is considered a child until she has undergone the female genital cutting ritual to signal the tangible transition from girlhood (*endito*) to womanhood (*esipoloi*). A middle-aged female respondent (IR15) said, “I have never heard of an uncut Maasai woman. I cannot marry off my girls before they are cut because our tradition demands that girls must be cut to become women.”

Participants in the FGDs noted that in between the cut and the next stage in the process of becoming a woman, the ear lobes of the fresh initiates are elaborately pierced to make large holes on which beautiful ornaments are hang. They also change their dressing from dark coloured cloth (traditionally called *shukas*) to brightly coloured cloth and are adorned with beautiful beads around their necks, arms and ankles. The piercing, change of clothes and adornment with beads serve to physically distinguish women from girls in the culture and between a Maasai woman and women from other communities (See Fig.1). The clothing is changing and becoming more elaborate to the point other women are buying and wearing it on cultural occasions but despite the change, the distinctiveness is still very clear when they wear it as shown in Image 3 below.

The next critical step in the process of becoming a woman is marriage. Marriage is taken for granted after the girl heals from the cut and it does not matter what

**Image 3: Modern adornment of a Maasai woman**



Photo credit: Taken for researcher at one of the research sites in April 2017.

age she is so long as she has attained puberty stage and had been cut. The girls do not make a choice of the man they will get married to and they cannot refuse to go with the spouses the fathers have chosen for them. This is how one female respondent (IR10) explained it, “The girl is informed of her husband and this is the first time she would be meeting him. Her dad tells her that he has received

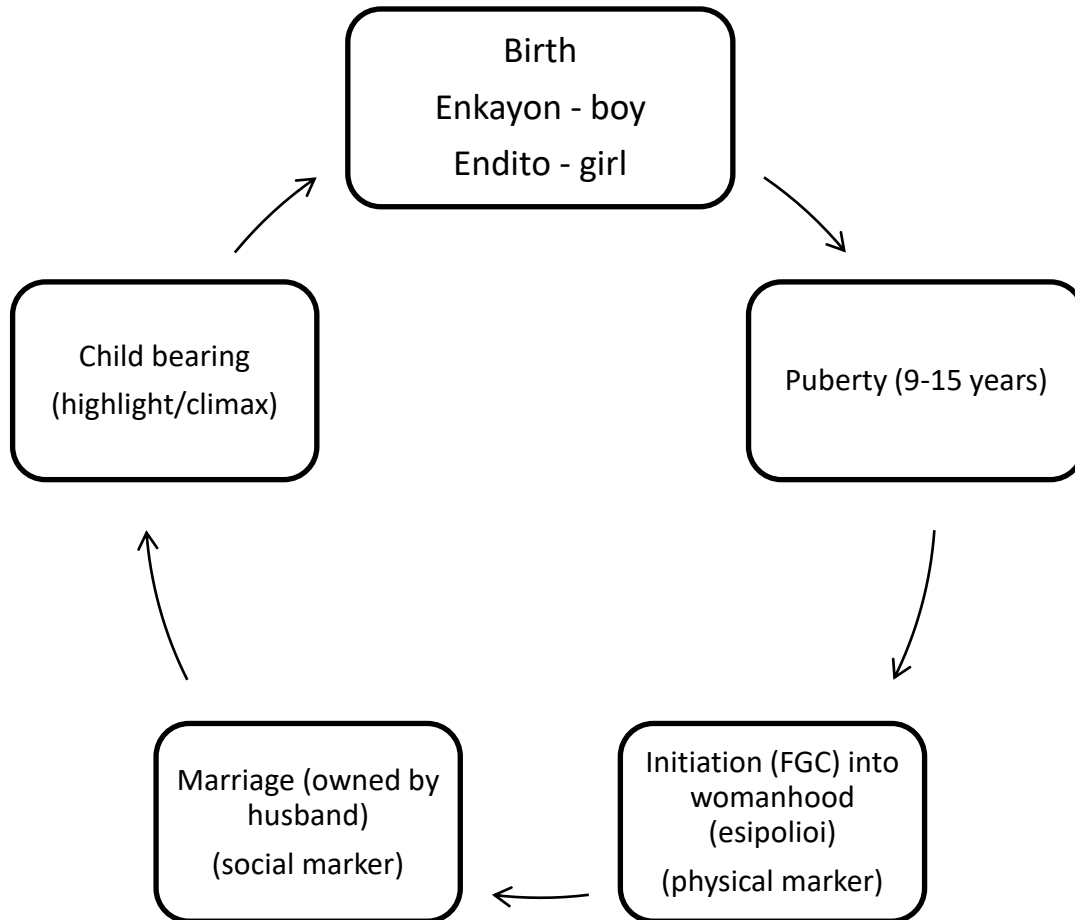
dowry so she has no choice but to marry this stranger. All this time, the girl would be crying because she did not like the marriage arrangement.” According to another female respondent (IR14), if the initiate was betrothed to a moran for marriage, the moran would provide the bull to be slaughtered for the initiation ceremony. A male respondent (IR21) argued that “one is recognized as a woman once she is married and fulfils the roles of a woman, but ordinarily she will not be looked at as a *bona fide* woman if she does not have a husband, in fact, she is referred to in derogatory terms.” One FGD participant summed up what seemed a consensus among the FGD members thus, “My mind thinks of a woman as one who is married or ready for marriage, as it is wrong to be called a woman if you are not yet married with your own family.” This illustrates the point that marriage is not only a step in the process of becoming a woman but also a condition for one to be called a woman as well.

Giving birth is considered as the final stage into womanhood. The three stages are interconnected in that the Maasai culture does not allow a girl who is not cut to get married or give birth to a child. A pastor (IR17) summed this up well. “First, for one to be well recognized as a woman in Maasai culture, she must have been cut and then bear children, that is how the Maasai are able to say that one has become a woman in that home.” Here again, giving birth is not just a step but a condition for a Maasai to be considered as a woman. Becoming a wife and mother are not stages that are unique to Maasai women. Central to theories of female development is the assertion, directly or otherwise, that motherhood is necessary

for all women and that their identity is completed by a husband and children. In the words of Gillespie (2000: 225), nurturing of children has been seen the world over as what healthy and normal women do, a task that is considered to give them identity and status in the community they belong to. This was the posture taken by the female respondents in this study and not a single one of them challenged that cultural prescription of wife and mother. The argument by Gillespie and the findings of this study concur with findings of a 2006 study by Swai in which Maasai women from Tanzania were found to assume such prescriptions socially regarded as women's calling as a way of affirming their womanhood. Swai concluded that within the historical and social cultural context in which the women in her study operated, their construction of womanhood ideology was not to achieve individual goals but rather social and cultural goals. Gillespie further observes that "motherhood discourses can be seen to be drawn from, and enmeshed in powerful, hegemonic ideological doctrines", doctrines that are not unique to Maasai culture but are expectations of women the world over. Not every woman, however, goes by these expectations because there are those who according to Burkett (2000) are unhappy with the social prescription that child bearing and rearing are women's natural vocation. For the Maasai, though, childbearing is seen as a given as it is through it that the tribe is propagated. It was not surprising, therefore, to encounter women in the study sample in particular and the population in general who had children but were not married. The ones I interacted with had an appreciable education and some form of independent

livelihood from which they were taking care of the children. Figure 6 below illustrates the general cycle of womanhood among the Maasai.

**Figure 3: Conceptualization of womanhood cycle among the Maasai**



Giving birth was seen by the respondents to be both the final stage of becoming a woman and a role that she played. The next section focuses on the roles played by Maasai women.

## 5. 2 Roles of Women

The discussion on womanhood is incomplete without looking at the roles the woman is expected to play by the community she belongs to. Roles a woman plays situate her in her social cultural environment in relation to the other members of that society. It is important to note from the onset that unlike in the modern life where a big chunk of a girl's formative years are spent in formal education, in the culture of the Maasai, the formative years of a girl are spent preparing her for her adult roles. This is a task that is performed by the mother in an informal manner. This is still happening in the rural Maasai setting. In the words of one middle-aged female respondent (IR27), preparation for the roles a girl would play as a woman starts in early childhood.

A young Maasai girl keeps the company of her mother and that way, she starts learning what her roles will be in adulthood. A lot of times you see that a girl wants to sweep, go and fetch water, or she joins the mother to go and collect firewood. When the mother takes her needles to sow, the girl also wants to do the same, when the mother is washing dishes, she is there. The mother continues to observe her until the stage where she sees that when she goes to bath, the girl does the same, when she is changing clothes, the girl follows suit, the mother works on her hair, the girl does the same.

Although this perfectly describes the informal training process in a rural setting where children do not go to school, it nonetheless applies also to those who go to school because when they are not in school, the girls spend their time helping the mother with household chores. Also, around the time of the initiation ceremony and currently at the ARP ceremonies, the older women get the female initiates together and advise them on what is expected of them as women of the tribe.

Upon getting to her matrimonial home, the bride, no matter how young she is, knows what is expected of her. From the research participant responses, one could tell that the knowledge concerning the roles of Maasai women is well ingrained in the culture and it is perfectly understood by community members, both male and female.

It is widely known that in communities like that of the Maasai which are largely rural, lives of women do not go beyond wifehood and motherhood. According to Chodorow (1999), self in such communities develops in a relational manner within the community where the girl is socialized in preparation for her to act her role of a wife and mother in her life-long social drama. That then becomes her ultimate life goal. These social prescriptions of womanhood roles were recited by the research respondents as though they were reading from a common script.

Explaining the genesis of the social prescription of gender roles in the Maasai culture, a community elder (IR19) observed that:

After somebody is born, the day a woman gives birth, other women ask her questions. They will ask “Who has been born?” They will be told if it is a boy or a girl. The Maasai name for boy (*enkayion*) signifies one who will move about outside the homestead, while that of girl (*entito*) signifies one who will watch over the homestead. So at birth, it is known that a girl has been born and more or less what her responsibilities will be when she grows up.

This social prescription on gendered roles of women is not unique to women in the third world. In a working paper series on family and societies, Oláh et al

(2014: 31) highlight interesting findings on gender roles in the home in the developed world:

Studies done in the developed world suggest that regardless of their work arrangement, women still do the bulk of housework (see Grunow et al., 2012; Zabel & Heintz-Martin, 2012; Bianchi et al., 2000). There is no uniform evidence that full-time working women have a more egalitarian division of household duties than part-time working women do (Wengler, Trappe & Schmitt, 2008; Keddi & Zerle-Elsäßer, 2012), nor is there consistent evidence that breadwinning women refuse to follow a traditional role segregation with regard to household tasks (Klenner, Menke & Pfahl, 2012; Klammer, Neukirch & Weßler-Poßberg, 2012).

As has already been noted, the second step in the process of one becoming a woman is for her to get married and start her own home. Upon getting into her matrimonial homestead, a woman's first responsibility is to build her own house. A typical Maasai homestead referred to as '*boma*' has a number of traditional huts in it known as '*manyatta*' which belong to the different wives of a man because traditionally, Maasai men are polygamous. The process of putting up one's own house is a time consuming one as is explained here by a middle-aged college educated housewife (IR30)

While the men construct the *boma*, it is the woman's duty to construct her house. I go and collect the cow dung and small sticks I will use for constructing my house from the forest plus the big one for the pillars for the inside of the house. Then I also cut grass or thatch for roofing the house. Every morning I collect the cow dung to enable me to cement all the walls of the house, inside and outside. Even if I have other duties, I make sure every day I collect the cow dung till the construction of the house is finished and any other time the hut needs to be repaired or patched up. When I take the cows to the watering places I make sure I collect strings or tree barks for joining the sticks that make the house.

The woman makes arrangements with other women in the neighbourhood to help her in the work of building the house. The FGDs views on this task of building a house could be summarized in the words of one of the respondents who noted that “A home is called a home when there is a woman in it” (FGD 2). This view was elaborated by a community elder (IR19) as follows:

A homestead that has no woman is like something great is missing because if you go during the day you find that the woman is not there. The man will not ask where the men are but rather where the owner of the home is and the response will be that the mother of the home is not there, she has either gone to fetch water or firewood or gone to the market. The first person people ask for when they get to a homestead is the woman, not her husband.

After marriage, a woman is expected to give birth and nurture the children. A middle-aged businesswoman (IR1) elaborated on this saying, “First and foremost, a woman is required to be married and have children. A woman would have a child after every two years. We did not use any method of birth control.” The nurturing role is the primary role of a Maasai woman and it is carried out alongside all the other roles she does. The children the woman gives birth to are considered the property of the husband and she has to take care of them for him. The domestic roles of a Maasai woman in the cultural setting was summed up by a newly married woman who is a university graduate thus:

After marriage, one is expected to start giving birth and take care of the husband and her children. Then there are the usual roles like going long distances to fetch water and firewood because she is not going to school. Sometimes, they even go out to take care of the livestock. Once married, the woman is expected to construct her own house. In the morning, the woman wakes up, milks the cows (goats as well), prepares breakfast for the family and then if she is not the one going to take care of the animals,

she treks the long distance to fetch water as well as wash any dirty clothes early morning because it is cooler than in the afternoon. She waits for the clothes to dry and goes back to take the water home. She could also go to the wild to fetch firewood and once she gets back home and it is evening, she milks the animals again. She then cooks dinner, ensures the family is fed and dishes cleaned. She is also expected to perform her conjugal duties although where there are multiple wives, the man chooses who to sleep with. On market days which is usually once a week, she is also expected to go to do the purchases for her home. When she is home in the afternoon, she does the weaving and beadwork. (IR29)

In answer to the question concerning how they felt about Maasai women having to play the culturally prescribed roles, the respondents expressed varied views. On the one hand, some of the respondents specifically said that they were not in support of the task of building houses arguing that it is a very difficult activity that should be done by the men. A middle-aged businesswoman (IR24) sums it up well by saying:

It is very difficult, it is very difficult because we build the houses and have to do it again. You know a house, it is like that bird over there building its nest. Tomorrow it relocates. So a woman lives building a house year after year. The husband has no concern and can decide the family is moving any time in search of pasture for the animals. Therefore, that is one challenge we have suffered.

There were other respondents who likened the culturally prescribed roles of women to imprisonment. They argued that women's confinement to domestic chores results in their missing a lot of opportunities that would otherwise improve their lot in life. A middle-aged women's leader with a college education noted that a woman in the Maassai traditional setting is:

imprisoned and cannot therefore progress in life and is restrained such that she cannot open her mind to new ideas. If she goes out, she will obviously

see things that are different or things that can change her views but now she is in one place, just there in the home. The only place she will see is her homestead or the forest where she goes to herd the animals, there is no one she is seeing to talk to, just animals. Consequently, her thoughts are dormant, she cannot progress and that is not good.

On the other hand, there were some of the women, the older ones in particular, who felt that the roles are okay for the women. A middle-aged businesswoman (IR25) with no education had no problem with women's roles in the culture because according to her, "Being happy will earn me respect that goes with my age and the roles I am playing. I would not want to give people reason not to respect me as a woman." A female respondent with a university education (IR29) shed light on why some women would have no problem with the culturally prescribed roles by noting that "the women don't know any better so when you go and tell them it is unfair, they don't understand . . . that is the norm for them, that is their life. They don't see anything bad about it and if you try to change it, they are resistant because that is their culture, that is their way of doing things."

Other respondents were of the view that in the olden days, roles given to women were okay and in-keeping with the circumstances that pertained then. They argued that in those days, men had the more difficult responsibility of protecting the community against raiders and wild animals as well as looking for resources to take care of their families' needs. According to a moran (IR6), the duties given to women like taking care of the children, livestock, and the homesteads were lighter than those of the men and that everything women did was within their ability.

Now that modernization has brought about changes in the circumstances and livelihoods of the Maasai, these respondents argued that women's roles need to change. A middle-aged community elder who is also a church elder (IR 19) sums up this thought well.

So the responsibilities are quite in place because Masaai women did not have a lot else they were doing. Their work was to look after what the man brought home. But these days of enlightenment, you will find a woman saying she has a lot of things to take care of. She could be a teacher, a doctor, a businesswoman, so main roles of women are different from what they used to be in the olden days. Women now have their own commitments and can implement their tasks in different ways.

This elder recognizes that the conditions of Maasai women have changed with modernization of societies and that their main roles are different from what pertained in the traditional set-up. The import of this assertion was corroborated by a women's leader (IR22) who runs her own small business, "These days the cows Maasais used to be proud of and depend on are no longer there. Maasai people these days sell tomatoes and firewood to get food for feeding the children." But some respondents felt that although circumstances have changed, conditions for Maasai women have not changed. According to an anti-FGM male activist (IR3), "The economy today demands that both spouses work to contribute to the family's income but often, it is the women who bear the large burden." Buttressing this point, a middle-aged businesswoman said that since she started her beadwork shop at the market, her husband does not give her any money to buy food for the family. She asserted that she buys food for the family, educates her children and if any child gets sick, she has to cater for that as well. Once in a

while, she borrows money to cater for these needs because the business does not bring enough money but she does not know what the husband does with his money. According to her, this is the reality other women are confronted with. A middle-aged woman who is a civil servant (IR4) observed that although it is difficult in the modern era to confine women to domestic chores, “. . . unfortunately, many of us still do them all in addition to income-generating activities which is a lot of work.” Whereas these modern Maasai women look at their gender specific roles as exhausting, confining and restricting, those in Swai’s study (2006), confronted by challenges similar to those of the Maasai of Kajiado, constructed the roles as a necessary way of affirming their womanhood. Involvement in paid jobs or small businesses for those women in Swai’s study was a way of improving their chances of being taken as ideal women by their families and the wider community.

### **5.3 Status of Maasai Women**

The study also interrogated whether Maasai women held any status in the traditional setting or even in the modern setting given all the roles they are expected to perform. The status people hold in society speaks volumes about their ability or inability to contribute to decision-making that would result in change in their individual or communal life circumstances. Status is tied to a person’s agency. A Swahili phrase that kept recurring in the interviews and FGDs concerning the place of women in Maasai culture was “Wamenyanyaswa sana”

which translated into English literary means “They are greatly oppressed.” All the respondents strongly held the view that traditionally, Maasai women hold no status in the community. According to them, men are the only ones with recognized authority in the culture hence all decisions in the community are made by them. Women were considered on the same level with the children. As noted earlier, everything in a homestead, including the wife, children, livestock and even the house the woman builds are considered to be the property of the man.

This is captured well by a community elder (IR19) when he says,

When a man marries a woman, she is merely a helper but everything is for the man. Even when it comes to giving away a daughter, selling cows, or moving from one location to another, it is all the man's decision and all that the woman does is to go along with the decisions without question. She has no freedom to do or make any decisions.

A middle-aged businesswoman (IR24) graphically illustrates the plight of the indigenous Maasai woman to buttress the point that the woman has no status and can therefore not voice her concerns on any issue.

There is no status or freedom that a Maasai woman enjoys. There is none because even those cows that she labours so hard to take care of, as a woman you cannot sell it to take care of your needs. That homestead you take so much time to put up and maintain is not yours. The day you will be told to leave, you will leave with nothing including even the children. And even if you go and get married in another homestead and you get children, they will be taking the children and returning them where you got married first.

Being treated as the property of the husband not only demeans the woman but also exposes her to vagaries of culture. Elaborating this point, a middle-aged

housewife (IR30) observed that in the culture of the Maasai, women “belong to the age group of the husband, whether young or old. Any man from the husband’s age group can sleep with her.” This has been an accepted custom among the indigenous Maasai. Once such a man visits a homestead of his age mate and feels like having sex with the age-mate’s wife in the absence of her husband, all he needs to do is to plant his spear outside the woman’s house before entering her house to sleep with her and if the woman’s husband comes home and finds the spear, he will know what is happening inside and cannot say anything. It was surprising that this information was relayed by just one of the respondents who did not even pass any value judgment on the practice as if it was a taken for granted part of the Maasai culture. This seems to agree with Hosken’s (1979) argument about the gendered oppression in tribal societies that is characterized by oppressive patriarchal systems with women and children as voiceless victims.

At the community level, too, the women have no say on issues pertaining to the community. A college-educated housewife (IR30) made the observation that when community meetings are held the women are not invited for they cannot sit in the same meeting with the men. Among the women folk, however, some pecking order akin to status is realized. A middle-aged female civil servant (IR4) noted that among the womenfolk, the midwives and traditional cutters are treated with more respect. The researcher observed that in the community, the younger women deferred to the older ones in their interactions. In the FGDs, the older women were often the ones who talked first and even where there was a good

discussion with good participation of all the group members, the last word on an issue being discussed often came from the older women. In the third FGD for example, an old lady joined later than the rest and immediately one of the younger women ran to a nearby homestead and got a chair for her to sit on while everybody else sat on the grass. Whenever a question was asked, the group members would look in her direction to motion her to say something. A number of the respondents, however, noted that things are changing in the community because of education. A women's leader (IR 22) took pride in the fact that she is held in high esteem by everyone in the community for not only does she represent the women at the district level of the County but also pushes for budget lines for community projects at that level. She disclosed that whenever the politicians want to hold meetings in her community, they consult her to rally the community together and this gives her status and recognition. A young employed male (IR12) acknowledged that although women have no rank in the culture, ". . . today's society has given so much power to the women so they occupy big positions even in government and politics." But a young female civil servant (IR31) argued that getting political office and the requisite status is a big challenge for women even when they qualify for it. "I am running for the post of member of the Municipal County Assembly (MCA) and they look down on me or treat me with contempt, you see?"

From the findings, it is clear that the women in Maasai culture are confined to the domestic spaces and even in those spaces they are not able to exercise power

because exercise of power is directly related to resources a person has. Because they are owned by their husbands, the women are property and hence status-less. As a follow-up question, the study sought to find out if the Maasai women aspire for change concerning their lives and those of their daughters.

#### **5.4. Aspirations of Maasai women**

It was the view of all the respondents that Maasai women have dreams and aspirations just like every other human being to see their lives improved. They highlighted three main things that Maasai women desire to happen for their lives and those of their families to be improved. The one thing that was mentioned by all the respondents directly or indirectly was the women's desire for freedom to get into income-generating activities, something that the culture has previously not allowed them to do. There was a consensus among the respondents that alternative livelihoods are a necessary option in the present-day Maasai community given the fact that the cows they used to be proud of and depend on for their livelihoods have dwindled tremendously. A middle-aged businesswoman (IR24) captured the aspiration as follows:

As Maasai women, our prayer is that God would make a way for us and that he would open the eyes of our husbands for them to know which way we are going or how we will be able to make our homes to stand strong. We would love to agree to share responsibilities or to help each other with those husbands of ours. This is because what was giving us challenges is that the man does not agree for us to work, he does not agree for us to have our resources or personal livelihoods that he did not provide for us. But now if they agree, and we as women get our income-generating activities, our families will stand. So our wish is that those husbands of

ours would be educated on how we will bring our 10 while they bring their 20.

The other thing that was mentioned as being of importance to women and which was related to freedom to get into income-generating activities is the desire of women to send their girls to school so they can get an education just like the boys. In the words of a middle-aged housewife (IR13), “Women are oppressed; they are not given room to grow economically or socially. But when a girl is educated she is able to assist her mother. It is girls who are building modern houses for their mothers.” An observation was made that the younger women dream of being educated and getting jobs while the older ones aspire to learn skills that would help them get into or improve their income-generating activities.

The third and equally important aspiration of Maasai women is to have the freedom to make decisions on matters that concern them, their families and their community in general. Throughout the interviews, there was the recurring view that women have no say at all even over their own lives so it comes as no surprise that they would aspire to have the freedom to make decisions. According to a young married woman with a university education (IR29), however, the Maasai women in the rural areas do not have the aspiration to get the freedom to make decisions because they are conditioned to know that decision-making is a man’s job. In her view that aspiration relates to the modern woman who is being empowered through education to seek leadership positions in different fields.

What is interesting about these submissions is that there was no direct mention of aspiration for freedom from cultural practices or roles. According to the women, one of their desires to get income from small-scale businesses was so that they could send their daughters to school to get an education. It was their view that giving their daughters an education will expose them to a better life and hence remove the need for the culture of FGC. The next section looks at what prevents Maasai women from achieving their dreams and aspirations.

### **5.5 Challenges Maasai women face**

The respondents mentioned several things that hinder Maasai women from realizing their dreams and aspirations. It was the view of most of them that cultural beliefs are the greatest hindrance to the empowerment of Maasai women. According to the respondents, those beliefs confine women to traditional roles where they are subjugated to men's authority with no freedom to make decisions that concern them or their families. Some phrases captured in the responses such as 'opinions and choices dictated by their husbands', 'women have to obey their husbands' orders', 'being lorded over by the men' among others go to illustrate the subordination the women feel they are subjected to by their husbands. This was elaborated on by a middle-aged businesswoman (IR33), "Maybe their main problem is being treated with contempt by men in the community because there is a Maasai saying to the effect that the neck cannot pass the head. In this case, the neck is the woman while the head is the man so they are put down all the time."

This was used to explain the reason why women have no decision making role in the culture of the Maasai because as necks, their role is believed to be merely that of supporting whatever the head decides. It was noted that this subordination of women is not just in the home setting but is ingrained in the culture. A young employed female (IR28) expressed her frustration with culture saying that whether a woman is educated or not, culture stipulates what a woman can or cannot do. Using herself as an example, she highlighted the contempt with which a woman seeking public office is treated. “Like now when I say I want to be an MCA, they think there is nothing important I am saying, they do not listen to us.”

Lack of formal education was highlighted as the other major challenge confronting the Maasai women and stopping them from realizing their full potential. Several respondents argued that formal education and skills are necessary for the development of women and their livelihoods. The majority of Maasai women were said to be lacking in formal education and skills to enhance their livelihoods and this was reported to have resulted in their marginalization. A young unemployed moran (IR6) summed it up well saying that lack of education meant that, “Maasai women are left out in leadership, business and development.” A middle-aged housewife with a college education (IR30) blamed some husbands for the lack of education of their wives by noting that, “Some women who have started going for adult education classes get beaten by their husbands because the men think that once a woman is educated, she will know a lot and will leave her husband.” A young anti-FGM activist (IR23) argued that education makes a big

difference in that it gives knowledge to a woman on what is good for her. Comparing herself with the women in her community, she said that she is different from them because she has gone to school and now she is able to decide what to do given the skills she has acquired without being fixated to some culturally prescribed roles.

Related to the two challenges discussed above is the problem of economic restrictions the women face. Although lack of resources and skills necessary to operate income-generating activities were mentioned as hindrances to women's economic empowerment, the greatest hindrance was said to be lack of support from their husbands. A middle-aged pastor (IR17) went to great length to elaborate on this challenge:

Men will say that if a woman goes out a lot, like in business, she will become a harlot. Other men say that a woman doing business can boss them around so you see that they do not want that to happen. They do not want to give the permission for women to be involved in business activities so that she does not become independent. . . . They also say that when a woman goes to do business, if she gets a lot of money, she will run away or start bossing her husband around. Even today, if a man sees his wife has gotten money, he can take it away from her through cunning methods. He could deceive her to give it to him to meet a need with a promise to give it back to her but go out and spend it anyhow and not give it back to her, all the while his aim being that the woman should not get a lot of money. But these days, things have changed a little. In many families women have been allowed to do business but among the Maasai, even if the woman is doing business, they do not want the woman to come home at night. A Maasai man cannot allow that and if it happens he will insinuate that she has become a harlot. Many have allowed women to be involved in business activities but there are also many who are still stuck to their traditions where women are still confined to their traditional roles.

These sentiments were shared by other respondents. A middle-aged businesswoman (IR24) complained that it is very difficult for Maasai men to agree for their wives to work, have their own resources or personal livelihoods that they did not provide for them. She pointed out that the men keep restraining the wives from going out to have their eyes opened to opportunities. In the words of another businesswoman (IR25), such a husband will ask "Is she the one who has married me or I am the one who has married her?" to mean that the woman should stay at home doing domestic chores while waiting for the man to provide. A leader of one of the women's groups (IR22) pointed out that by coming together and forming groups which are locally known as *chamas*, women are giving each other a lot of support to accomplish the group and individual projects. She, however, complained that even this is often hard to realize because they have to please the men by telling them what agenda they have before they can get the needed support from the husbands to participate in those groups.

According to the respondents, there are some men who allow their wives to go into income-generating activities but use that as a way of relieving themselves of their responsibility of providing for their families. A women's leader (IR27) noted that it takes time for the small businesses women own to start making profit and life is often hard for the woman and her children. This is how she described the experience:

You will hear that there is no flour to cook for the children and the woman cannot refuse with money like the men. The man can have money in the

pocket and the family will sleep hungry because he will not buy the flour needed to cook a meal. When a child is sick or needs food, the mother will use the little money she has to attend to those needs up to the last coin.

These sentiments were shared by a male primary school teacher (IR21), “You see, a man can sell a cow for Ksh 10,000 and then buy another one for Ksh 8,000 or 9,000 and he may only give the woman Ksh 200 and surely, how much can she accomplish with such a little amount?” According to an unemployed moran (IR6), such men spend all their income on illicit brews and women are left to care for the family and educate their children, thereby increasing their burden and oppressing them further. This sentiment was shared by a participant in the FGD1.

In some cases women are taking up the bigger burden of educating girls as the father would rather they lacked the education and get married off so that he can earn more cows. He asks where the money will come from to educate the girls. As a woman if you are isolated you would not know where to seek for help, i.e. the CDF offices or where you can get bursary.

All the challenges faced by the Maasai women are directly or indirectly related to their culture which requires them to operate within the domestic space and be totally submissive and be absolutely dependent on their husbands. In a community that is getting increasingly exposed to modernization and experiencing changes in livelihoods, this cultural setting goes counter to the women’s aspirations as members of the community. It was, therefore, considered important given the aspirations women have and the challenges they face to interrogate how the Maasai community thinks the women can be empowered to fulfil their potential. That is the focus of the next section.

## 5.6 Agency of Maasai women

Ability to transform aspirations into desired outcomes has to do with agency at the individual or group level. Given the cultural and social structures within which the Maasai women operate, is it possible for them to attain the outcomes they desire for themselves and their families? In order to gauge the Maasai community's views concerning agency of their women, the respondents were asked to talk about how they thought the women could rise above their current circumstances and make the desired changes for themselves and their families possible. Despite the many challenges confronting Maasai women, the respondents expressed a lot of optimism that change was on the horizon. A young female respondent (IR23) said that moving forward, exposure and education of women who have not gone to school will be critical to their empowerment. Following are excerpts of her submission which sum up what a lot of the respondents said.

It is necessary to create a lot of awareness that, maybe because they have not gone to school, maybe they could be brought to some workshops and trainings. They can be trained on how to start some businesses, on the issue of maybe table banking – say for example a group of 20 women, if they could each bring a hundred shillings, that is almost 2000, maybe they can lend to one another . . . training them and creating awareness on a lot of issues, the health issues . . . they can be trained on issues to do with their rights. . . You can also bring them together and train them . . . about the law and government to know whom they can approach in case of any type of problem.

This view was echoed by a female civil servant (IR4) who went further to explain that “Education on health, hygiene and nutrition can help women live better lives

and be healthier. The community also needs to be educated on the effects of FGM.” This was an interesting finding because it was the only time FGC was mentioned as an issue that needs to be addressed in relation to women’s empowerment. It is interesting because in the dominant discourses on FGC, education of women on their anatomy and consequences of the practice of FGC are pitched as the key or gateway to freedom for women and hence their empowerment. It was pointed out that the current women’s representative in the County government has been holding seminars to train women on business skills and income generating activities. This, however, was noted to be but a drop in a bucket because the focus has mainly been on women around the towns in the County while those from the interior and who have not had any formal education are yet to reap the benefits of this kind of training.

Some of the women respondents already in small businesses of beadwork were of the view that the returns on their investments were small and slow in coming because their clientele, mainly the local folk, do not have the money to regularly purchase the items and this could jeopardize their livelihoods. It was on the basis of this that they and other respondents felt that help was needed in terms of training them on how to add value to their products and on ways to market those products. In addition to this, they could be shown or introduced to markets for their products where they could earn good profits.

The women's self-help groups in the different communities in the County were talked about with high regard by both the male and female respondents as a sure means of alleviating the economic plight of Maasai women and as an avenue of helping them to acquire agency. A middle-aged housewife (IR14) observed that:

The community has opened up to formation of self-help women's groups but not every woman is a member of these groups. Women need to be encouraged to embrace it. Women could also benefit from these self-help groups and through them be equipped with skills for business and gain exposure in business and other income generating projects.

Another housewife (IR10) said that the '*chamas*' had helped raise the status of women in the community. The reason given was that belonging to the groups enlightened the women to projects they could get involved in and also gave them access to capital through their little but regular contributions. In the first FGD, the respondents remarked that their small group had been instrumental in enabling them engage in projects through which they could educate their daughters. Some of those daughters had moved on into employment and used the proceeds from their employment to build permanent houses for their parents while some had even installed solar energy in those houses, consequently raising the status of their families in the community. The women respondents at the special Manyatta said that they have a self-help group where they meet on weekly basis to do table banking. Talking about the changes that have been brought into the community by the women's groups, a young employed woman with a college education (IR28) acknowledged, "Yes, there are changes especially in the fight to end FGM. These groups, including church-based ones have done a lot of education in the

community to end FGM and consequently, FGM is now ending.” As mentioned at the beginning of this chapter, it is difficult to isolate construction of womanhood from discourses of FGC. Here, we find the thrust of the FGC discourses namely, end FGC because it is a violation of women’s health and human rights, embedded in discourses of women’s agency through self-help groups. The point made here that women’s self-help groups have contributed in the fight against FGC supports the point made in the discussion earlier that Maasai women aspire to get income-generating activities and educate their daughters so FGC will cease to be attractive to them. These observations find support in Mackie and Le Jeune’s (2009) view that when practising communities begin to construct the practice of FGC as a problem, the communities will begin to see the uncut state of women as a better option to the cut one. The threshold, though, of those constructing FGC as a problem as seen in the next chapter is not good enough to realize the needed change. As a way forward in empowering women, a middle-aged businesswoman (IR33) suggested that more women can be encouraged to join women's groups in the community and be educated through those groups to know that they can also do anything they put their mind to. An old community elder (IR5) was of the view that “The community should give women more freedom as well as encourage them to form more women groups for empowerment. Women are genuine when they get money. They share it with the family unlike the man who can spend all his money on illicit brews and women.” It was the view of a male primary school teacher (IR21) that belonging to the small groups has greatly helped the women get out of darkness into the light because they can now carry out activities to help

them earn income rather than being confined to restrictive domestic roles and this for him represents their empowerment.

The church was also mentioned as a great avenue not only for women empowerment but also as an agent of change for the community. In the words of a moran (IR6), the church has helped to change the community's perspective on tradition and more men are empowering their wives to start businesses and farm projects. This view was echoed by a pastor of one of the churches who further suggested that for women's agency to become a reality, more needs to be done in roping in everybody in the community for more sustainable change.

Maybe the women can be helped through education, educating them to know their rights but men too need to be educated. These days, the men in the church, because we have been trying to educate them, those are the ones you see have opened their eyes to these things. So educating people especially through the church using the word of God is important. You know there are many who have not yet known that this is how things are. You see if you teach ten people, even if those others outside have not caught what you have taught, four people will have caught it and slowly but surely, the message will spread and retrogressive traditions will be faced out. And then education for the young generation, these are the ones who will bring an end to these traditions slowly because they are the ones getting enlightened. Many of them belong to the church and many are educated. For something like curses, they do not understand how they can be affected and again God does not allow those things. So education is very good but it is also good to mix even if women are being taught on their own and men on their own but later, they should be taught together. (IR17)

Elaborating on what the pastor had said, a community elder who is also a church elder (IR19) noted that when people become Christians and join the church they

are taught from the Word of God that all people are equal before God and they can all enjoy their rights as human beings and pursue their aspirations. According to him, the church is another way of putting people in the right place as human beings. Another community elder who is an anti-FGM activist (IR3) remarked that the church, through its teaching, has helped in changing the community's perspective on women's place in decision-making. It was his view that men who have embraced Christianity are now consulting their wives and working together to care for the family.

Some respondents were of the view that empowerment of Maasai women to acquire agency is a process that will take long to be realized. For these respondents, the education of both the boys and girls in the community was championed as the solution to the cultural problems that have led to the marginalization of women for generations. It was observed that because of education, the young people are getting enlightened and exposed thereby preparing them as the agents of social and cultural change. Acknowledging that one cannot force Maasai men to change their way of doing things which is deeply entrenched in their culture, a male primary school teacher (IR21) asserted that the only way of realizing real change in the culture is through education.

Before you know it, the father has fallen in line without necessarily having planned to by allowing his children to go to school and through it we are preparing agents of the change that we want. As teachers, we quietly invite the children to embrace change and we ask of their views and often, you will hear them say that it is true change is needed. When the women come to the realization that their rights have been denied them, education will

deal with it because a girl who is educated is different from those our women from the Manyatta. Education will help but slowly. It is education of both the boy and girl child. You see, a man who is educated is different from one who is not. A girl who is educated will be able to see how her mother is being treated and will work to change her own circumstances. It takes time but if things are not rushed or pushed, the men will come to realize things they had rejected taking shape and come into reality. They may see their neighbour's daughter bringing change there, say installing solar and bringing other changes and that way their worldview slowly begins to change and embracing change becomes easier.

It was the view of a number of the respondents that educating girls gives them the opportunity to realize their potential as well as bring change in the community.

Buttressing this point, a young educated moran (IR12) was of the view that the community needs to accept the fact that women too have rights and a potential to impact development in the society. He further remarked that he and other new age morans who understand the importance of education had built a school in the Manyatta to ensure that the young Maasai girls and boys living in the Manyatta with their mothers do not miss out on formal education. Whereas the culture expects girls to be initiated into womanhood, get married, have children and take care of the family, a young university educated female respondent (IR29) was of the view that this trajectory of the Maasai women's lives has to change. To achieve this, "Put girls in school, let them finish primary, go to high school, get the right skills after high school. That is the only way because even if my society, I mean even if no one wants to marry me from that community, I can always get a job and get married to anyone else I want." Her life attests to this in that she got married to a man of her choice, an engineer from another community, and started her own NGO to address some challenges of Maasai girls. A respondent from one

of the FGDs summed up the views of the rest by noting that “For women to rise to their full potential, FGC must end. We have witnessed how in other communities, women are more educated and more involved in business. The girls who are not cut seem to have vibrant lives, they excel in their education and their confidence is high.” In general, it was the hope of the respondents that the community will give equal access for education to Maasai boys and girls.

Women respondents who have had an education expressed the view that they are the best placed people to empower the women in their communities because they understand the culture and some said that they are already doing that. According to a middle-aged housewife with a college education (IR30):

For us now who have seen the light, we can go back to the community and we assist them. For those who are trying to be entrepreneurs, we show them how to do it better and also to know their rights. They are oppressed but may not know that they are protected against oppressive actions by men.

The dominant discourses on FGC focus on gendered oppression of women in Africa and advocate for freedom of women from oppressive cultural practices. The findings from this study show a different focus in that the main concern of the Maasai women today is economic empowerment through income-generating activities so that they can improve their lives and give their children, especially their daughters, an education. According to the respondents, formal education of both girls and boys is what will turn around the fortunes of the Maasai women for

better in the long run and bring about true cultural change and not the other way around of trying to change their culture.

The other concern that was raised had to do with the fact that in the Maasai culture, the women continue to be at the periphery of decision making and often rely on decisions made by men regarding their lives. Whereas the dominant discourses advocate for gender equality where women get equal opportunities in decision-making at all levels, it was felt that the Maasai women face an uphill task in seeking to attain recognizable status in the community. It was the view of the respondents that Maasai women are getting empowered but on a small scale because empowerment seems to be restricted to a few who have appreciable formal education and those who belong to the women's self-help groups in the community. There is hope, though, that because the empowerment of the Maasai women is being engineered by women from the community who understand the culture and needs of the women, it will bear fruit and be sustained.

In the definition of agency given at the beginning of this section, exercise of agency has to do with ability to transform aspirations into desired outcomes. Not highlighted in the discussion on agency so far is the aspiration the women have to sustain their cultural identity and how they are exercising agency towards that. In the dominant discourses on FGC, women from practising communities are constructed as docile victims of the cultural practice of FGC and patriarchal

domination (Hosken, 1979, Idowu, 2008). They and the communities they come from are constructed as lacking the agency to evaluate their cultural practices. The reality on the ground, however, shows women and girls making the deliberate choice to continue with the practice despite their knowledge of it having been criminalized. The BBC Focus on Africa report highlighted in the earlier chapters of this work is a good example of women making a public statement in defence of the practice when thousands of them came together to register their defiance of government with regard to the anti-FGM law that had been passed. They even went as far as daring their men to contradict them. Their argument was that government has no right to legislate against a cultural practice without due regard to and consultation with the community. The in-depth interviews too recorded incidences of some of the older women saying they would only stop after all their daughters were cut and reports of young girls who despite having had good exposure to the anti-FGC campaign messages had put pressure on their parents to be cut. These are women and girls with aspirations to be recognized as Maasai women and who were willing to do whatever it takes to realize those aspirations. In her study of womanhood construction among Maasai women in Tanzania, Swai (2006) found that the women assumed cultural prescriptions of womanhood not as victims of cultural dictates but as their individual way of affirming their womanhood, and in so doing empowering themselves. Mahmood (2005) came to a similar conclusion in her study of wearing of the veil among Moslem women in Egypt. According to her, the argument that Moslem women are helpless victims of subordination or oppression from a patriarchal or religious compulsion is

highly misleading and so is the idea that those who veil simply act out of deference to tradition or antiquated cultural codes by default or lack of choice. In her interaction with the women in her study, she found that the women who decided to wear the veil did so as an ethical practice and as a tool for emancipation. That to Swai is a good indicator of women exercising agency which she defines as “the ability to have understandings of relationships (between self and context, others in context, institutions, etc. (2006:21). Looked at from the perspective of these two studies, the action by the Maasai women and the girls can be said to be an exercise of agency, the goal being to keep their cultural distinctiveness and ensure proper integration as members of the Maasai community.

### **5.7 Women in decision-making on FGC**

In the dominant discourses on FGC, it is argued that women are totally subservient, passive, and voiceless victims of abuse in a discriminatory and oppressive gender system that is governed by absolute patriarchy bent on controlling their sexuality at all cost (Hosken 1979, Abusharaf 2001, Rahman and Toubia 2001). Those who do the cutting are viewed in those discourses as woefully ignorant, torturers of their own kind (Hosken 1979, Daly in Walley 1997, Idowu 2008). This is to say that FGC is carried out by ignorant women at the behest of men who are the custodians and enforcers of culture. The study

specifically asked the respondents what role women play in decision-making on FGC.

According to the respondents, the decision to cut is not dependent on individuals but is rather embedded in the culture. In other words, it is required by the culture that all girls undergo the cut once they attain puberty. The Maasai live in a web of relationships within which it is very difficult if not impossible for one to make personal decisions contrary to the cultural dictates. It was, however, the view of most of the respondents that the decision to cut is made by the father of the girl mainly because women do not make any important decisions in the culture. This view was clearly articulated by a young female respondent (IR29).

In Maasai culture, it is the men who make all the decisions but it is the wife who tells the husband that their daughter is now of age to be circumcised. There is no way a girl who has grown up in her father's *boma* can decide with her mother that she will not be circumcised. If they ever think of such a thing, they will both be chased out of that homestead. If men have no decision to make on FGM, you would just be targeting women, call them in a room somewhere, drill and drill and drill them about how FGM is bad but they still have the men who decide.

A male respondent (IR2) noted that it is the father of the girl who announces the day of the ceremony and women gather on that day at the home to cook and celebrate. According to a female respondent (IR22), "The man will then sell a bull to get money for shopping for the ceremony and the girl will be cut. So, the woman reports and the man makes the decision by selling the bull for purchases." It was the women who gather the things needed for the celebration.

As much as decision making on the practice is said to depend on the men, the push factor is said to come from the women. According to a women's leader (IR22), "The women will say that they cannot live with a girl who is not cut when they themselves have been cut. They say that is unfair . . ." So, the women put pressure to ensure the girls were cut. Lest it be assumed that women are not happy about what is done to them and hence the reason for putting pressure to have the girls cut, a female respondent (IR30) pointed out that "The women in the homestead will be happy that the girl is going to be done what has been done to them and thereby become a woman." Their joy is in the fact that the young girls are finally becoming women in their community. Peer pressure by the girls' mates was said to be another factor that influences decision-making on FGC. A pastor (IR17) illustrated this point with an example from his own home.

Children are giving us problems because I started by saying that traditions have a lot of power. You will find that girls are coming to ask each other, "Now you will remain a girl till when? You will remain a child till when?" You see, these children have been taught in school and at meetings and they agree with their mouths but many times you find that they go and agree to be cut because of pressure they exact on each other. Like now, my daughter is also in the church and one day, she told me she wanted to be cut. I have taught about this practice in church and I have allowed her to go for meetings organized by AMREF and other groups and yet, she brings up the issue of FGC. All I could do was tell her, "Do this, wait till when you attain age 18, the laws of Kenya will allow you to choose for yourself." I had to really try and sweet talk her out of it and I know a point will reach when she will change her mind.

The example clearly shows a man who has clearly made a decision against FGC but with a daughter trying to put pressure on him to change his mind. It could be argued that in the girl's mind it is her father who can make such a decision but

this example of a girl making the decision that she wants to be cut is not an isolated case. A female respondent (IR24) disclosed, “I have cut two of my older girls. This is because they insisted that they must be cut because of the intense pressure they were receiving from their peers so I was left with no choice but to get a nurse to cut them.” These are girls who are attending school, have listened to the anti-FGC campaign messages and yet decided they want to be cut despite objections from parents. A question that could be asked is how come these girls appear more conservative than their parents where culture is involved. Is it that they are just succumbing to the peer pressure without thought? Swai’s (2006) study of women in Tanzania found women with a good education and earning a good salary still keenly observing their culturally prescribed roles and her conclusion was that the action of these women was a way of exercising agency to affirm their womanhood identity. It was something they consciously thought through and not a mindless adherence to cultural dictates. Looking at the actions of the girls in this study from Swai’s perspective, they cannot be said to be voiceless victims of FGC but rather as people exercising agency by making a conscious decision to defy the anti- FGC campaign, their parent’s standpoint and the church’s teaching on the matter and ask to have the cut done because they have a goal in mind, to integrate well in the society rather than face isolation.

There were some respondents who were of the view that decision making on FGC in the Maasai culture is based on the economic structure of the community. This view was well captured by a female respondent (IR24) who noted that:

Traditionally, it is the men who make the decision about the cutting of their daughters because they get to receive bride price when they give them away to be married. At times, they will give away their very young daughters to old men – even their age-mates because of the livestock they can bring as bride price.

An elderly male respondent (IR7) was of the view that it was not so much about who makes the decision on the practice as about the outcome of it. According to him:

FGC is more like a girls', women and morans' celebration. The girls celebrate one of them transitioning into womanhood while women welcome the girl to be one of them. The morans celebrate that a girl is now ready to be married by one of them and the girl's father earns a higher rank in the society.

This means that everybody in the community has a stake in or a reason to celebrate the event. There was, however, a strong view to the effect that FGC is a women's affair. Clarifying this, a moran (IR6) observed that "FGC is a domain of the women as men are not allowed to see the girl's private parts or come close to where a girl is being cut." Once the men (father to the girl) set the day and provide the resources needed to prepare food for the event, the women take over the entire ceremony and the accompanying celebrations. The men have no clue what actually happens during FGC except for the exposure they get from the campaigns as elaborated here by a women's leader (IR22) who is part of the anti-FGC campaign team.

. . . when they come, we teach them, we show them the model of the woman's body and what bad things FGC does. Once men catch it, it is

easy for them to stop the practice of cutting their girls because they do not actually know what is done during the cutting, it is women who know but if you explain to the men what is done to the girls, some even cry and say that practice is bad. So if they are trained using videos, they will stop it.

Other respondents corroborated this view. Based on these findings, it is clear that the man decided on the day for the cutting and provided for the festivities but the actual decision on where to cut is made by the women. The joint (Government of Kenya, UNFPA and UNICEF) baseline survey for Samburu and Baringo districts (2008) found that among the Samburu, the girl takes a greater role in deciding on FGC than the mother or the father alone. However, the survey showed that decisions on FGC are mainly made by both mother and father of the girl. Among the Kalenjin of Baringo, it was the father who decided more than the girl and mother alone but as in the Samburu case, it is a combined decision of father and mother. In both communities the mother's role in decision-making is much less significant. It is clear in these communities that the girl is given the opportunity to decide on whether she will be cut or not but in the traditional Maasai setting, the girl has no say.

Because of the anti-FGM campaign, there are many members of the community, especially women, who have made the decision not to cut their daughters. A young female respondent (IR23) pointed out that "Today, there are women who tell their daughters that they should run away so that they should not be cut." This assumes a situation where the father of the girl is in support of the practice and the

mother is not. Although Maasai women do not make any important decisions in the traditional setting, the anti-FGM campaign and the law seem to be giving those in support of the campaign the latitude to stand up against culture and shield their daughters from the cut. These are examples of women taking advantage of situations they find themselves in to exercise agency. On the flipside of this are situations where women may be in support of the practice because they do not see anything wrong with it but their husbands are not in support of the practice because they have bought into the campaign messages. This was the point made by another female respondent (IR24) when she disclosed that:

Today, you will find the woman making the arrangements for the circumcision of her daughter. She can decide at night and will not talk to anybody to bring the doctor to perform the rite and finish with it if she wants but if she does not want she refuses for it to be done.

Such decisions made by women to have their daughters cut in secret without the knowledge of their husbands have also been reported among the Somali communities of Kenya. These actions by Maasai women to decide on FGC, though, are often private and executed in secret. There, however, have been cases of open defiance to the status quo characterized by women taking a public stand on FGC. A case in point is one that has been mentioned earlier reported on BBC Focus on Africa (2012) where Maasai women in Kajiado were said to have publicly declared their decision to continue with FGC in contravention of the new anti-FGM law whether their husbands liked it or not. They argued that the government had not sought their views before coming up with the law hence they

would not oblige. Daring the government and their husbands in that manner is a sign of agency on their part but with reference to that incidence, a university educated female respondent (IR29) was of the view that typical Maasai men are powerful and there is no way women can dictate to or contradict them.

A typical Maasai woman would not even give her husband an ultimatum. So, sometimes what happens in these forums, there are people who want to push their agenda and they use other people to push their agenda but a typical Maasai woman, I don't know if you have met any, they wouldn't do such a thing as threaten their husbands. Men really are powerful. I always say that the luckiest men in this world are Maasai men. But then there is the aspect of engagement in the creation of laws. Maybe that is the message they were trying to pass but if you try to investigate well, you are likely to find that there were some men somewhere who were passing the message that the community was in support of the practice but using the women.

This could be the status quo in the rural setting where it is culture dictating social relationships. The reality on the ground as described by some respondents, however, puts to question the view of this young educated woman about Maasai women's ability to contradict their husbands or men in the community in general. A good example which runs counter to the argument made by this respondent that a Maasai woman cannot contradict a Maasai man is highlighted here from a women's leader (IR22) who is involved in the ant-FGC campaigns.

The men know that we are the women who do not want girls to be cut. . . It was difficult for us at the beginning because they used to say we are those who are saying girls should not be cut. One day they marched and said they would dress in blue to come and curse us because we were saying girls should not be cut yet it is our culture but we told them that cutting of girls must be stopped. Cutting of girls is yet to stop although they do it secretly without ceremony like they used to do with a lot of singing. For a person without courage, the threat to curse can cause one to chicken out of the campaign and go back to the retrogressive cultural

practices. But for us, we made up our minds to carry on and we told them to do what they wanted but we would prepare the government so that if they came, we would face them and then we announced it in a public meeting. We told the chief and he called a meeting and announced that whoever will be caught going to curse those women who are saying that girls should not be cut will be arrested because they are not the ones who have said but it is the law of Kenya so they feared.

This is a clear example of women exercising agency to support the anti-FGC campaign in defiance of culture and traditional power structures. This women's leader is part of a 'chama' of women who have said 'no' to FGC. To practically show how serious they are about this, they have pooled their meagre resources and helped each other to start small-scale businesses from which they are regularly making contributions to a revolving fund used to support members meet their financial needs especially educating their daughters. This ensures that the girls would not have to be confined to cultural expectations of being cut, getting married and bearing children but would be empowered to seek livelihoods outside the home and make informed choices concerning their lives.

## **5.8 SUMMARY**

This chapter has described how the Maasai people of Kajiado, Kenya construct womanhood. In the discussion, the chapter has clearly shown that construction of womanhood among the Maasai is a complex concept which comprises conditions stipulated by the community for one to attain the status woman and roles she is expected to perform. The conditions one has to fulfil to become a woman which

include undergoing FGC, getting married and bearing a child in that order clearly show that womanhood and FGC are intricately intertwined and embedded in the Maasai cultural beliefs, values and norms. The findings show that FGC and marriage position the woman fully under the control of her husband and in that position she is entirely dependent on him for her livelihood. Traditionally, she is confined to domestic roles, without status, and denied the opportunity to make decisions, her main role being to take care of her husband's property which includes his children and other property. She does not own anything and is not allowed to seek alternative livelihood outside of the home. There was consensus that traditional roles women have to play are too demanding and somewhat oppressive. This finding corroborates findings of a study by Macharia (2014) which found that it is difficult for Maasai women from Kajiado South to engage in income-generating activities. The patriarchal nature of the society was listed as a major factor inhibiting women from getting into business activities. Over 50% of the respondents in his study cited refusal by husbands to engage in income-generating activities as a major hindrance. Others said that Maasai women are supposed to give to their husbands any money they get or borrow from outside the home because men are the only ones who have the power to make decisions about resources and expenditure. Over 60% of the respondents in Macharia's study said that majority of women in the Sub-county could not take part in income-generating activities because they have to undertake enormous duties that range from farm work, herding cattle, fetching water and firewood, and taking care of the household on daily basis.

The findings of this study have clearly showed that although the culture of the Maasai restricts the women in terms of status and roles and denies them the opportunity to make decisions, there are indications that they are not necessarily helpless victims of that patriarchal structure and without hope unless their sisters from the developed world come to their aid as the dominant discourses construct them. Majority of the female respondents expressed aspirations to see their lives change and many of them have actually exercised agency on different fronts by defying cultural and traditional expectations to attain their aspirations. There are those who have joined self-help groups through which they are raising capital to invest in small-scale businesses, educate their children especially the girl child and make improvements on their homes. The groups are at the forefront of the campaign to end FGC. Two of the in-depth interview female respondents whose education had been curtailed early in life because of FGC and early marriage had later enrolled as mature students and graduated with a certificate and diploma and they proudly displayed these in their homes. One is a women's leader while the other is actively involved in teaching in her church in an urban setting and both mentor other Maasai women and girls. There are a few of the educated ones who are trying getting into politics at the national or county level and currently, they have the first Maasai woman as a Member of Parliament. These are but a few examples which show that progressively, Maasai women are exercising agency in curving out a life for themselves that is distinct from that constructed for them by the Maasai culture.

The study has also shown that women have progressively been exercising agency by making individual or group decisions to carry on with the practice in an attempt to uphold and perpetuate their culture or challenge the cultural practice which they consider a harmful impediment to their wellbeing. Those who challenge FGC and those who support it are in agreement that education, skills training for small scale businesses and access to resources are critical to enhancing Maasai women's agency in their quest to live a better life.

The next chapter looks at how the Maasai construct discourses on FGC.

## CHAPTER SIX

# FEMALE GENITAL CUTTING DISCOURSES AMONG THE MAASAI

### 6.0 Introduction

The study also sought to examine what discourses have been constructed on female genital cutting by the Maasai people from Kajiado, Kenya. This was done with the view to understanding how the people make sense of the practice establishing whether those discourses align with or are alternatives to the dominant discourses on FGC. Although culture was constantly mentioned as the main source of the Maasai discourses on FGC, it was clear that the dominant discourses on FGC have diffused into the community through the anti-FGC campaigns resulting in contemporary FGC discourses. The constant use of the phrase “they said” or “they say” by the respondents in reference to the government or the NGOs working in the community is a clear indication that what these institutions have said about the practice was becoming ingrained in the community conversations. In total, there were ten FGC discourses discerned from the data collected, five in support of the practice and five challenging it.

The following categories emerged from the respondent data and constituted the main themes for analysis:

- ❖ Cultural FGC discourses;

- ❖ Contemporary FGC discourses
- ❖ FGC discourses and Maasai perceptions toward FGC;

## **6.1 Cultural FGC discourses**

The findings of this study show that the practice of FGC is intricately rooted in the socio-cultural milieu of the Maasai people. Overall, FGC is constructed as a necessary rite or a cultural norm that all Maasai girls must undergo. In more specific terms, the study identified supernatural, social transition, sexual morality, economic and social integration discourses which are discussed below in detail.

### **6.1.1 Supernatural discourse**

This is an indigenous discourse also referred to as magical discourse that constructs FGC as a healthy practice adherence to which results in life but transgression of which incurs the displeasure of the gods and ancestors and ultimately leads to death and other calamities. The cause-and-effect inferences to FGC that the Maasai culture makes are what cause the discourse to be seen as magical. The dominant discourses consider such inferences to be superstitious (Hoske, 1979) because they do not see any application of logic but the Maasai community hold strongly to the beliefs resulting from those inferences, hence legitimizing the practice. The mention of life in that discourse in relation to the practice of FGC is a critical starting point in the discussions given that the dominant discourses on FGC construct it as barbaric and a threat to the health and

life of women and girls who go through it (Hosken, 1979; Rahman & Toubia, 2001; WHO, 2008). According to an old community elder (IR7), the Maasai do not see FGC as just a physical act of cutting a part of the female genitals but rather as a practice that embodies culture and is “engraved in the community belief system.” Explaining how traditional beliefs contribute to entrenchment of the practice in the culture, a young uneducated female respondent (IR26) observed that there is a common belief among the Maasai that “failure to cut a girl can cause her mother to die”. Similar views were expressed by other respondents. According to a middle-aged women’s leader (IR27), the Maasai:

believe that a girl who is not cut is a curse to the family, that even her brothers will not prosper and they will be dying just like that. They will say that the homestead will disintegrate because that girl is not cut and she, if she makes a mistake to get pregnant and give birth, the child who will be born and the mother are cursed.

Cutting of the girl is therefore believed to ensure life and blessing to the family while warding off curses from some ancestors who instituted the practice. Traditionally, the Maasai fear curses or misfortunes befalling them or their families from their ancestors. This strong belief in curses has made them adhere strongly to traditions like FGC even in modern times further legitimizing the practice. According to a pastor of one of the local churches (IR17),

Nowadays . . . Maasai people . . . believe in curses. . . That is a great hindrance and it is embedded strongly in the Maasai culture because even children, there are things they fear least the elders rise up and invoke a curse on them. So you see that among the Maasai, they tread rather slowly because you know traditions are difficult and they are strong. . .

Similar views were expressed by a young educated female respondent who introduced herself as a survivor of the FGC practice (IR23). She argued that the Maasai were blindly carrying on with a practice that has been observed by their forefathers for generations even when it is not really serving any useful purpose especially for the women and girls.

### **6.1.2 Social transition discourse**

The Maasai construct FGC as a rite that is critical in helping the initiates grow up and mature to take responsibilities in the community. They believe that childhood is characterized by foolishness and going through the cut helps the girl child to grow up mentally just like it does for the boy child (the initiation process for the young males is discussed in Chapter Three). It is believed that the intelligence of an uncut female, no matter how old she becomes, is the same as that of a child. According to a middle-aged educated women's leader (IR27), "It is said that when one is cut, the practice removes foolishness and one becomes enlightened. . . They think failure to cut the girl results in a mental shortfall for her because they believe that the mental capacity of an uncut girl is suspect." This view was corroborated by one of the young male respondents (IR18) who said that "There is a belief that goes, 'if you pass into FGC, your behaviour will change because if you have already been initiated, you will no longer behave like a child but will behave like an adult'." The rite of FGC is, therefore, what marks the transition

from childhood to womanhood. In the words of a middle-aged educated housewife (IR30):

If a female is not circumcised, she cannot be referred to as a woman. . . You see, the education system, you have to graduate through certain stages and similarly in the Maasai culture, one is promoted from the stage of childhood to adulthood through the cut – this marks the change.

Just before the initiation ceremony, the girls go through counselling by the older women concerning what the cutting involves, its meaning and the community expectations of the initiates after they are cut. The mind of the girl is therefore prepared for her new role as an adult in the community but the cut is a physical sign that distinguishes her from one who has not been cut and it is a constant reminder to her that she is no longer a child. In the past, it was unheard of for a Maasai girl not to go through the rite.

Drawing from the social transition discourse, adult roles of a woman can be performed only by those who have transitioned from childhood through FGC. Marriage and motherhood are considered the realm of adults hence the practice of FGC was viewed by all the respondents as the transition into marriage and motherhood for Maasai women, a construction that further legitimizes the practice of FGC. In the past, there was no formal education to occupy the girls and prepare them for roles outside the home. This is still the reality today in some of the rural communities in Maasailand. Puberty for such girls creates the opportunity for them to transition into their next phase of life and in Maasai culture FGC is the

stipulated way for girls to transition into womanhood. In the Maasai culture, the primary goal for a girl has been, and still is, to become a wife and mother.

Although the Maasai culture is now embracing formal education for girls and some of the girls are getting jobs or starting small-scale businesses which they could not do before, becoming a wife and mother have been and are still considered key identifiers and milestones for women in the community.

According to the respondents, FGC is an essential prerequisite for marriage and motherhood in the Maasai culture. A young male respondent (IR18) remarked, “Of course, if a girl is not cut, someone will not marry her because they say that if a girl has not been cut, she is a child and how can you marry a child?” A moran (IR6) buttressed this point saying, “Morans are not allowed to marry uncut girls.”

This cultural expectation for girls to be cut before marriage is still adhered to in many parts of the Maasai community. A young female respondent (IR 32) disclosed that, “In communities not well reached by the anti-FGC message, they are still carrying on with the FGC practices and enjoying them very much because it is the only way into marriage for the girls there.” After the girl is cut and she gets married, she then builds her own house and that brings respect to her and her parents. In the traditional Maasai setting, a girl who is not cut is not allowed to build her own house but continues to live in her mother’s house, bringing shame and disrespect to herself and her family.

Further, the culture clearly stipulates that one cannot become a mother if she is not cut. In the earlier discussion on womanhood, it was noted that the onset of

puberty shows that the girl's body is ready for pregnancy and because the culture frowns on girls getting pregnant, the girls will, upon reaching puberty, be made to transition into womanhood through the culturally accepted way of FGC.

Explaining how seriously the Maasai take FGC and motherhood, a middle-aged housewife (IR15) pointed out that “It is a bad taboo for a girl to give birth before she is cut and if this happens, she has to be cut during childbirth but it is acceptable for girls who are cut and not married to sire children.”

It is clear from the findings so far that FGC is intricately tied to processes of becoming a woman among the Maasai.

### **6.1.3 Sexual morality discourse**

The sexual morality discourse is used by the Maasai culture to legitimize FGC as a way of ensuring that women stay chaste. In the past, it was possible for husbands to be absent from home for periods of time tending livestock or looking for livelihoods and they considered it necessary to control the sexual urges of their wives hence legitimizing FGC. Although the tradition of men spending long periods of time away from the homesteads is no longer common, the discourse on sexual morality has been sustained. In reference to this discourse, a young educated moran (IR12) argued that “Maasai men believe that FGC can reduce prostitution within the community because once the clitoris is removed, the women will have no desire to sleep with men.” The argument advanced is that

since the cut removes the clitoris which is believed to play a big role in sexual arousal, the interest for sex will be reduced. From the interviews, there were indications that despite Maasai women being cut, their husbands do not trust them to be able to control their sexual urges which is a contradiction given that FGC is believed to reduce the sexual urges:

Men will say that if a woman goes out a lot, like in business, she will become a harlot. . . even if the woman is doing business, they do not want the woman to come home at night. . . A Maasai man cannot allow that and if it happens he will insinuate that she has become a harlot. (IR17)

This sexual morality discourse seems to fly in the face of the Maasai tradition in which men in a given age-set (see explanation of this in Chapter Three) share a lot of things with each other, including their wives. Any man from that age-set can visit a fellow age-set member's homestead in his absence and if he so desires sleep with the wife and even if the woman's husband returns and finds his friend in the house, he cannot complain because the Maasai age-set convention stipulates that the members share whatever they have. For wives to be expected to stay chaste in such a setting sounds contradictory.

#### **6.1.4 Economic benefit discourse**

The practice of FGC was also said to serve an economic purpose among the Maasai. Several accounts given showed marriageability and the transfer of bride wealth that goes with it as a rationale for the practice of FGC. A middle aged primary school teacher (IR8) observed that there is a perception in the community

that “when a girl is circumcised and married off, she can benefit the community by bringing cows to the home as a form of dowry.” In the traditional setting, families look at their female children as capital waiting to be unlocked as the words of a women’s leader (IR27) clearly illustrate: “In fact, even if a certain homestead does not have a single cow but has five girls, that homestead is very rich.”

The same woman also observed that having daughters cut and marrying them off has been a way of protecting them from poverty and ensuring their survival. She argued that since there was no formal education in the traditional set-up as well as in today’s rural communities, “As soon as the girl was cut, there was a husband ready for her.” A local pastor (IR17) added that when a woman is being given away in marriage after recovering from the cut, there is a cow that must be given to the mother but once it gets to the homestead, it is the man who decides what to do with it since the animals, children and women in a homestead are considered as properties of the man. The newly married woman also receives gifts which could include cows and these become additions to the husband’s wealth.

Another account that fed into the economic discourse regards payment made to the women who does the cutting and who get their livelihood from cutting. Because the practice has now been made illegal, the government through the Anti-FGM Board has been rounding up those women together with the tools of

their trade and training them for alternative livelihoods. The practice, however, continues to record high prevalence indicating that there are women still earning income from the cutting but the respondents did not speak directly about FGC as a source of livelihood. They, however, referred to compensation that has to be paid to a midwife if she has to assist an uncut girl to deliver. A traditional midwife (IR11) claimed that there is a traditional belief that “a midwife can go blind if she assists a person who is not cut to deliver hence the need for compensation.” A middle-aged businesswoman (IR25) shared a recent experience she had with a traditional mid-wife:

One of my sons is married, his wife is not cut. But what made things difficult, I did not know that the girl had not been cut because she is from the Kamba tribe. When it came time for her to deliver and she had to do it at home because we got late in going to the hospital, I called the traditional midwife to come and assist in the delivery. She told me the girl had not been cut and for that reason, I would have to pay Ksh 6,000 and a goat. Now that, I did not know. Once the girl gave birth, I made up my mind she would always give birth in the hospital and I would have nothing more to do with traditional birth attendants because I had seen for myself. Because the girl was not cut, the traditional birth attendant could not touch the baby, she cannot remove the baby. You know these birth attendants know how to remove the baby, even if the baby is there and having problems of coming out, they know what to do to remove it. But in this case, she could not remove the baby because according to Maasai customs, blood of an uncircumcised woman has a curse on it so she did not want to touch that blood and if she had to do so, she would have to charge for it and the goat she asked for was for cleansing her not to be affected by the curse of the blood of the uncircumcised woman. So I had no choice but decide to pay that fine.

The economic discourse needs to be understood in the context of the Maasai livelihoods discussed in Chapter Three. For a very long time, the Maasai have depended on their livestock for their livelihoods. The livestock have been their

source of food, currency for trade as well as for transactions like marriage.

Although changes related to modernization have occurred, the Maasai especially those in the rural areas are still known for their pastoralist activities and love for their cows.

### **6.1.5 Social integration discourse**

In the minds of research participants, the practice of FGC is an important tradition among the Maasai which is rooted in the beliefs of the community and one that holds them together. A sense of belonging is one that is a treasured resource for people in communal societies. Voestermans and Verheggen (2013) theorize that feelings of belonging to a particular group depend on the basis upon which those groups have been constituted. They further observe that cultural ties through common beliefs, values, norms and behavior heighten the feelings of belonging to the members. The Maasai people have been able to uphold their culture against the waves of modernization and in the rural areas, the feelings of belonging that members of the community experience are intense. They live in adherence to the dictates of their culture as they are enmeshed in a web of relationships making it difficult for individuals to make personal decisions about what to do with their lives as that would result in their isolation from the community.

The respondents explained that a girl who chooses to transgress the cultural norms and gets pregnant before she undergoes FGC gets to be sanctioned by the

community. She and her baby are ostracized from the community or they become social outcasts and no one in the society will want to associate with them. The mother and her child are considered accursed and she is not even welcome to participate in any community activity. Elaborating on this point, an uneducated middle-aged businesswoman (IR25) explained that when such a girl gives birth, “She will be called a derogatory term ‘*entaapai*’ which is not good. In fact if women are in a meeting, such a woman cannot be allowed to stand even if she has insights, she will be made to sit down and shamed through reference to that name.” Being isolated from the community is something members strongly guard against and in this regard, FGC could be said to serve a social purpose of integrating them into the community. The community is, however, slowly opening up to modern influences, beliefs and practices thereby opening cultural practices to scrutiny and change. This is in line with the explanation given in the social constructionist theory that meanings of social reality are not only created but also negotiated, sustained and modified (Schwandt, 2003). Uncut Maasai women who have had formal education and exposure to modern life often live in urban areas where they get opportunity to belong to different social circles and are able to make choices about careers, marriage and so on. This way, they do not suffer social isolation.

## **6.2 Contemporary FGC discourses**

It was clear that information the research respondents had gathered mainly from attending campaign or community meetings as well as the media characterized the contemporary discourses circulating on FGC. This could easily be detected in common references respondents made to the phrase “They have been saying” or variants of it. Overall the campaign messages have constructed FGC as an unnecessary practise which only has negative consequences for women and girls and therefore needs to be eradicated. In specific terms, five contemporary FGC discourses were identified namely: medical, modernistic, sexual fulfilment, bodily integrity, and illegality discourses which are analysed in details below.

### **6.2.1 Medical discourse**

The construction of FGC as a health risk that violates the general physical wellbeing of the initiates was what most respondents talked about. The discourse is considered medical because the violations mentioned are said to have medical manifestations or implications. The term medical also draws from the context where male genital cutting is being popularized as having medical benefits in contrast to FGC which is said to have no medical benefits. Over 60 per cent of the research respondents said they had heard that FGC is wrong because it has negative health effects on women and girls. This is how a middle aged women’s leader (IR27) captured these views:

We hear that there are dangers associated with circumcision. They say that you can cut a girl and she loses a lot of blood and even dies. They also say there is a high chance of getting sicknesses, losing a baby during delivery, or the lady gets fistula as a result of severe tears from the urethra to the vagina and rectum.

Three times in her response, she bases the messages concerning FGC on what others have said in meetings or seminars, not on cultural or personal knowledge. Some FGD 1 participants, though, did acknowledge having suffered excessive bleeding after they went through the cut. This is how one of them described her experience: “I also suffered from excessive bleeding. My mother came to check on us and found excessive blood on the cow hide we were lying on. She told my dad that ‘Your daughter is dying.’” This claim about excessive bleeding is corroborated by KDHS and FGC situational analysis reports which have shown that excessive bleeding is one of the FGC outcomes mentioned the most. The Joint Programme on FGM/C baseline survey report (2008) for Baringo and Samburu in Kenya showed excessive bleeding to be the most reported medical complication of FGC. Acknowledging that severe bleeding could occur after the cut, the older respondents, however, argued that it was not a normal occurrence in their community and whenever it occurred, there had to be an explanation and there were and still are traditional ways of stopping it. The participant of FGD 1 who is quoted above as having suffered excessive bleeding disclosed that once the father was informed of it, he came and tied a string on her wrist and the bleeding stopped. This was echoed by another participant who added, “My father brought the string and tied it on my wrist and some leaves were applied. He prayed and blessed me traditionally. The next day he slaughtered a goat and gave us fat to

drink and I fully recovered.” It was disclosed that the string would be from the father or brought by a moran who may have expressed an interest in the girl. The following explanation was given for the tying of the string and the invoking of a blessing on a girl experiencing severe bleeding by a participant of FGD 1:

There is something these women are not making clear. The reason for the morans to bring the string is to release the girl in case she had turned down a proposal to the moran, or she was rude to them. This way they bless the string to release her. It is believed that the excessive bleeding is as a result of the moran or a father’s anger and once they bless her, it releases her.

Death was mentioned above as one of the consequences of FGC. A young female anti-FGC activist (IR23) talked of having heard of a girl in the community who had died when she was being taken to the hospital after she had collapsed. Of the few cases of death cited, it had to do either with a woman or her baby at the time of giving birth resulting from complications. A community elder (IR19) reported that “There are three girls I have heard of who died when they were giving birth.”

Drawing from the campaign messages, a middle-aged male primary school teacher (IR21) tried to explain his understanding of why deaths of women or their babies occur:

Of late you hear of many girls going into labour at home and then you will hear that they have died in the different villages around. They will take long and by the time they are rushed to the hospital, they have bled too much because of the cutting. There are women who know how to cut well but when I tried to understand biology or anatomy of women and how the cutting is done, it was explained to me very well that they used to remove the (‘the’ is repeated 6 times) lining, they would remove the, they would remove (emphasis on the second part of the word) a portion and they go beyond and remove more, hurting the inside of the girl’s private parts. Now that cutting would leave a scar and by the time the woman is coming to give birth, the baby will be looking for the path to pass through and the

woman will incur injuries, she will be injured a second time. Now when I hear that a certain woman has died giving birth, I tell them it is nothing else but the cut.

This view was supported by a health worker (IR34) who opined that “it is rare for women who are not cut to get severe tears because the muscles of the vagina expand normally.” According to a World Health Organization fistula manual, obstetric fistula can be caused by pregnancy at an early age, failure to access maternity and obstetric care in a timely manner in addition to harmful traditional practices and because the Maasai community suffer the three conditions, it is understandable why complications would occur at child birth.

With regard to the claim that FGC can cause death, some respondents especially the older women were of the view that deaths that have been reported in the county were accidental and not the norm. According to a women’s leader (IR27), “When they are having the ceremony these days, sometimes the circumciser may erroneously cut too much and the girl ends up losing too much blood and she sometimes faints or dies.” This was echoed by an old housewife (IR16) who explained a death she had heard of in the community as having occurred “. . . because the woman cut the wrong place. Girls never died from the cut.” According to a middle-aged woman (IR25), “There are those women circumcisers of long ago who knew how to cut properly but nowadays, a woman can just decide she can do it and unfortunately cut the wrong place.” Some of the respondents were of the view that because FGC has been criminalized, the cutting

taking place nowadays is being done in secret and possibly by women who do not have the skills to cut hence the accidents being reported. An elderly traditional midwife (IR11) gave a different twist to what is likely to be causing deaths when girls are cut.

There were no risks associated with FGM in the past. All these have only happened in modern days when people started talking negatively about FGC. When a girl was cut she would be treated with milk and cow dung and if the bleeding persisted, the father would tie a sisal thread on her hand and this would stop the bleeding. Now I hear of girls dying after the cut, and women dying at childbirth and wonder why it never happened in my days. It's all because of all this talk; traditional things should not be mixed with modern things. It destroys lives.

This view was shared by a middle-aged housewife (IR10) who remarked that “Girls never died from FGC complications and women did not experience all the said effects, they led normal productive lives. But in every ritual when there is a curse involved then people will die.” According to her, the negative things that were being said about FGC in effect cursed the practice and led to the deaths. Beliefs are difficult to interrogate and constitute one of the most difficult aspects to change among a people. Claims about curses aside, the arguments by the older female respondents find support in earlier findings of Shell-Duncan, Obiero and Muruli (2000) who found that some of the health complications mentioned in the dominant discourses did not manifest with any significance among the Rendille women of Kenya who carry out FGC Type II (like some of the Maasai because some practice Type 1) but rather are consequences associated with infibulation.

General weakness after delivery of a baby was said to be another health challenge women who are cut face. A male respondent who is a pastor (IR17) said that from what he had heard, a woman who is cut loses a lot of blood when giving birth but the one who is not cut, even if she loses blood, it is not a lot and they tend to have more strength. This is how he illustrated his point.

You see among the Maasai, you hear that a woman has given birth and two months down the line she still does not have enough strength to work or move around. They will be complaining about their backs. But for those who are not cut, you will see that a week after they deliver, they are strong and able do their things around the house.

In response to this claim, a health worker (IR34) explained that bleeding is not the only thing that causes anaemia in cut women. According to her, anaemia “is mostly caused by improper diet during pregnancy. Maasai women are starved when they are pregnant so as to prevent the baby from growing big. This makes them weak throughout their pregnancy and giving birth makes them even weaker.”

Another construction of FGC that draws from the medical discourse is that it spreads infections. Some of the male respondents were highly critical of the conditions under which the cut was carried out arguing that hygiene is not observed, an argument that is in line with the dominant discourse inferiority frame as the following remarks by a male respondent (IR21) illustrate.

It can be that those women, you know those our women can be savages with their instruments. No one knows of or cares about cleanliness and the

girls being cut are grown up and because of their sexual activities with the morans, there is the likelihood that they have picked this or other sexually transmitted disease. The one cutting will use one knife from one girl to another and easily transmit the diseases. When we are talking to our students and children, we tell them that is bad because the instruments used can carry and transmit germs.

The use of the term savages in reference to the Maasai women who carry out FGC appears to mimic Western feminists patronizing view of these women as barbarians and murderers (Hosken, 1976 and Walker, 1994 cited in Wax, 2006). A question was put to some health workers as to whether women who have been cut present different health challenges at the health facilities than those who have not been cut. A recently retired nurse (IR34) said that the rate of infections especially for UTIs is higher among circumcised women. Another health worker (IR 35) gave a more elaborate list of health complications suffered by cut women which included “septicaemia, perianal tear (tear up and down); the circumcision tear which can lead to anal fistula, STIs and UTIs; excessive bleeding that leads to death; emotional trauma; and damage of the urethra.” Some respondents said that they had heard that FGC could cause HIV because if one girl had the virus, her blood could be transmitted to another girl by the use of the unsterilized knife used for cutting the different girls. Data on HIV prevalence in Kenya released by the National AIDS Control Council (2014) showed that HIV AIDS prevalence for Kajiado stood at 4.4 per cent against the country’s average prevalence of 6 per cent which makes the county HIV prevalence lower than the national one. A number of the respondents said that Maasai men have a reputation of engaging in extra-marital sexual activities with women of loose sexual behaviour when they

visit the urban centres to sell their animals. This was seen by some to be a more likely source of the STIs including HIV than FGC.

This construction of the medical discourse needs to be understood within the context of access to health delivery in the community. In the newly decentralized structure of governance in Kenya, there are concerted efforts by county governments to boost access to health services by all citizens but because of the slow process in the development of some of the counties like Kajiado, there are still a lot of Maasai people without this access and who only get to benefit from medical outreaches. A lot of the Maasai settlements are far dispersed and removed from urban centres where the few health facilities are located and access to the urban areas is limited by very poor road infrastructure where any exist. A lot of the places can only be accessed by motor cycles. Traditionally, the Maasai have depended on traditional healers known as *'laibon'* and in the case of women's birthing needs, traditional midwives have provided the service. In the absence of modern health facilities, the Maasai have effectively used traditional herbs as medicine. The profile on Kajiado and discussion on the negative health consequences frame in the literature highlighted the poor access to healthcare in the County. A lot of the standard health facilities are sited around the urban area and are patronized mostly by those who live there. During the data collection, I came across a lot of Maasai people in the markets and streets in the urban centres selling tree barks, dried herbs and powders made from the herbs and barks of trees. The herbalists selling the products would take time to give elaborate

explanations on the constitution of the items they were selling, what health conditions they are used for and the measurements to use in preparation for consumption. The health professionals and anti-FGM ambassadors disclosed that most Maasai people from the rural areas do not go to the modern hospitals but rely on the traditional medicine unless an emergency arises and they have to be rushed there. They further noted that the pregnant women from the rural communities hardly attend ante-natal clinics and do not like to deliver their babies in health centres but at home with the help of traditional midwives. They will often be rushed to a hospital on motor cycles, the only means of transport in a lot of the rural communities when complications arise and this can increase the risks. In the May 14, 2018 BBC Focus on Africa news, it was reported that in an effort to encourage Maasai women to deliver their babies in hospitals, Kajiado County had incorporated a *manyatta* into a modern maternity ward in Ng'atataek. The explanation given for low patronage of modern maternity facilities by Maasai women was that the hospital wards are cold and they are used to warm manyattas. The report further noted that older women are uncomfortable with young nurses attending to them as it is taboo for the young ones to see their nakedness. The BBC reporter ended with an observation that Maasai women who are now patronizing the manyatta wards are accompanied by their traditional midwives who stay with them and help the doctor in delivery and then work with trained nurses in post-delivery care. This is a clear indication that the role of the traditional midwives is recognized by the modern medical services. These

midwives have not had exposure to formal training for the work they do but they have successfully delivered majority of the Maasai babies.

### **6.2.2 Modernistic discourse**

The construction of FGC as a barrier to the progress of women and girls and their consequent marginalization draws from modern concepts of development and hence the reference to it as modernistic discourse. Respondents who have been exposed to the campaign messages said that FGC is retrogressive because it limits the Maasai girls' chances of continuing with their education because once a girl is cut, the natural progression for her life is to be married off. According to the campaign messages, cutting girls and marrying them off at a young age ends up ruining their life and future prospects. In the words of a community elder (IR19), once FGC is carried out,

a girl no longer wants to go back to school because she considers herself now as a woman and no longer a child. She will tell the father that she is staying at home and asks the father to get her a husband so that she can also start her own home but one who is not cut is still a girl, she is still a child until she shall finish school.

A male primary school teacher (IR21) confirmed this using the case of Kajiado County.

A lot of our girls have stopped going to school while others have become pregnant and dropped out of school. In many of our schools, you will find that in the lower primary school classes the girls are more than boys but getting to the higher classes, they are very few and it is because of FGM.

If we can eradicate it immediately, we could get positive index in education.

This finding is corroborated by the County education data found in Chapter Three which shows a drop in school attendance by girls in the higher primary school and the secondary school levels. Positive index in education is language used in development communication. Initiators of development consider education as the most critical driver of economic development and social progression while illiteracy is considered its greatest hindrance and it can therefore be understood why this respondent whose responsibility it is to teach would be concerned about ensuring attainment of positive index in education that includes girls. This is what the MDG 2 sought to achieve namely: universal primary education. In pursuance of this, the Kenya Government put in place a legal framework in 2013 to ensure that all children of school-going age including boys and girls attend school and at least complete primary school as that would instil in them reading, writing and basic mathematic skills necessary to understand and appreciate development. The Kenyan Constitution stipulates that all children have the right to a free and compulsory basic education. MDG 3 sought to promote gender equality and empower women and in pursuance of this, the Government put in place measures to eliminate disparities in access to primary, secondary and higher levels of education. These targets for education were not attained by the end of the MDGs period and consequently, quality education has been incorporated into the SGDs as Goal 4 with the understanding that it is access to quality education that will create sustainable development and ensure improvement in quality of life of the

citizens of developing countries. A female respondent who is a university graduate and who did not go through the rite also draws from the modernistic discourse to construct FGC as a hindrance to the attainment of the SDGs.

It makes girls drop out of school. Every child has a right to go to school and therefore cutting short any girl's right to go to school by having her circumcised is wrong and against the law. Your future is really bleak because you are denied education and all these other things. The few who go through FGM and still go to school are lucky.

In an age when education is said to be the door that opens opportunities for people, it is clear from these respondents that the continuation of the practice of FGC is denying the women and girls the right to access the opportunities and this results in their continued marginalization. The conclusion made by the female respondent in FGD 1 is that FGC “is highly retrogressive for women. It curtails the progress of women and girls and must be stopped.” The FGD group members were convinced that the Maasai community is behind other communities in development because of FGC. They reported in glowing terms that girls who have been allowed to go to school and progress to higher levels of education are the ones who are bringing development to their homes once they complete school and get jobs. Those women said they are doing all it takes through the ‘chamas’ to ensure they grow their small businesses to earn more money so that they can keep their daughters in school failure to do which could result in their husbands easily organizing for the girls to be cut and married off. Given the context of modernization of societies, it is clear from the messages circulating in the community that there is a concerted effort especially among the women to ensure

the Maasai girl child reaps the benefits of that modernization because if she does not, there is little option left for her than to be cut and married off because she cannot sit around at home doing nothing. Since education is constructed as a basic human right for every child in the development discourse, then denying the girl child an education because of FGC is a violation of their human rights. The focus of human rights violation in the dominant discourses is not on education but sexual rights and one can conclude from Schwandt's (2003) the meaning of human rights with regard to the practice of FGC has been modified.

The modernistic discourse cannot be understood in isolation of the cultural context because the girl child in question resides within a particular cultural context. Womanhood and FGC are so intricately connected that one cannot talk of one without thinking of the other. A girl who is cut becomes a woman and the main 'vocation' of a woman in such a community is to become a wife and mother, not to attend school which is constructed as an institution for children. One can appreciate the mental challenge of a girl who is cut and considers herself as a woman to consider the prospect of being a school child – that brings about cognitive dissonance. When confronted with such a dilemma, the attraction is great for a female member of the community to owe allegiance to the culture unless there are punitive measures by government to enforce school attendance.

### 6.2.3 Sexual fulfilment discourse

In the dominant discourses of FGC, the removal of the clitoris is said to destroy, annihilate or impair female sexuality (Hosken, 1994; WHO, 1997; Naussbaum, 1999; Rahman & Toubia, 2000). Because the clitoris is compared to the male penis in those discourses, its removal is likened to male castration and hence it is argued that women whose clitoris has been cut will not have normal sexual function. In the African culture, it is considered taboo to openly talk about sex (Kayode, 1986). It was therefore difficult to broach that topic but it somehow surfaced in the discussion about the consequences of FGC. Only a few of the research respondents talked about how the community constructs FGC in relation to sexual fulfilment or intimacy. A middle-aged educated housewife (IR30), however, did mention that, “One of the messages circulating is that FGC spoils one’s libido making it impossible for a woman to be sexually aroused and thereby negatively affecting one’s sexual life.” Asked what she thought about that argument she said:

But it was just like the men wanted to oppress the women. They would say that a woman who is not cut will love sex too much, so you see they knew that the clitoris helps but wanted to keep the woman from enjoying sex while the man could go out and sleep with anyone he wanted. So you see they knew this thing (clitoris) was important and it was utter deception of them to insist that it was for our good to have it cut. Then for the married women, they find that the husband craves sex outside the matrimonial home.

This respondent raises an important point about the gender inequality in sexual relations among the Maasai. In her view, this brings about oppression in the sense

that the decision is already made by patriarchy that women will not or should not enjoy sex as they want and should reserve their bodies only for the husband while men can get sexual satisfaction anywhere it can be found. From this respondent's submission and what others said, it is common knowledge that Maasai men go out looking for women from tribes that do not practice FGC. This is how a middle-aged businesswoman (IR25) put it: "I can be left and my husband goes to Wanjiru, he leaves me and goes to Pamela and so forth. He will say that I have been cut and I do not have the desire for a man." A male respondent (IR21) explained what he had recently heard from the media about why Maasai men sleep around with different women.

There is a lady who spoke on the local Maa language radio and she is the one who removed the gear for me. She said that a woman who is cut is like a motorcycle without a starter, so how can one go to buy a motorcycle that has no starter while there are those with a starter? And it is true because in this town of ours, you will see Maasai men who come to sell their cows in the market but after they have done so, they hang around having a good time with the Kamba women because it is understood that the Kamba women give sexual pleasure to men because they are not cut unlike their Maasai counterparts.

Looking at these respondents' submissions, talking about the violation of sexual fulfilment was in generalities rather than sharing from personal experience. This could either be as a result of what has been observed already – that talking about sex is a taboo among the Maasai or it could well be that they contest the argument that FGC violates sexual fulfilment. A middle-aged female respondent (IR33) actually chuckled at the idea that sex with a woman who is cut has no pleasure. She laughed and bluntly said "I do not think it is true." A young girl

who is a single parent and an FGM survivor remarked “I imagine that the clitoris helps one to enjoy sex more.” The use of the word ‘more’ suggests she enjoys sex although she is cut but from what she hears being said about the practice, she can only imagine what she misses because she was cut at a young age. When the question was thrown to the FGDs as to whether it is true that women who are cut do not enjoy sex, they answered ‘no’ in a chorus but it was difficult to pursue the issue because all they would do was laugh.

Interestingly, some of the young male respondents who are unfamiliar with the reality of FGC seem to have internalized the campaign messages wholesale and besides expressing the outraged repulsion felt by outsiders towards the alleged physical violations of FGC on women and girls also expressed their views on matters relating to sex. One of the questions asked the younger men who were yet to be married had to do with whether they would agree to marry a girl who is not cut. This question was deemed important because it is argued that FGC will cease to be attractive when the young men accept to marry girls who are not cut. All four of them answered in the affirmative. One of them (IR20) said, “I prefer a girl who is not cut because her clitoris is still intact the way God made her and she will be responsive sexually.” Those who have constructed FGC as a violation of the sexual rights of women (Hosken, 1994; Nussbaum, 1999 and Rahman & Toubia, 2000; WHO 1997, 2000 etc.) have influenced the campaign messages that such men have received. To them, the clitoris is the most sensitive part of the female genitalia the way the penis is to the male genitalia. From that premise, they

conclude that the removal of the clitoris is the same as castrating the male genitals and therefore destroying the ability of a woman to enjoy sex. Studies investigating this phenomenon have produced mixed results. There are those that have shown infibulated women to experience orgasm (Catanis et al, 2007; Dopico, 2007; Ahmadu, 2000; El-Dafrawi, 2001; Thabet & Thabet, 2003) even though not to the same degree as those who are not cut or who have experienced minor forms of the cut. Catanis et al (2007) argued that that even the most severe of FGC, infibulation, does not excise all erectile structures fundamental for orgasm and the other studies cited here support this argument. Obermeyer (1999, 2003) analysed studies done on the subject and concluded that the results of those studies were inconclusive to make a firm claim that FGC destroys the ability of women to enjoy sex and the few cited here support this conclusion.

Questions asked on the lack of sexual fulfilment in interactive counselling sessions in the media are a clear illustration that the loss or lack of sexual pleasure is not peculiar to a certain group of women but is experienced even by uncut women. It is clear then that the few who raised the discourse were reporting

#### **6.2.4 Bodily integrity discourse**

In dominant discourses of FGC, cutting of healthy body parts has been constructed as serving no medical or other reasonable purpose. Some of the respondents argued that FGC is a violation of the integrity of women's bodies.

They opined that each body part created to play a specific role in the body and should therefore be left intact. Elaborating on this, some of the younger respondents argued that by insisting that all girls must be, the Maasai culture is clearly lacking in respect for women's dignity if women are not considered important enough or capable of making decisions concerning their bodies. For these young members of the Maasai community, FGC is a violation of the physical integrity of women and girls. A young educated female respondent who is an anti-FGM activist (IR23) criticized the cultural practice of FGC saying that "it is just wrong to interfere with someone's body parts." She elaborated this further:

It is just that some part of my body has been removed with no any health benefits of it and even biblically according to the Bible, the only people who are supposed to be circumcised were the men and I am not seeing the importance of you just coming to cut any part of my body. In my opinion also, FGM is wrong because it is a violation of children and women's rights. It is the beginning of oppression when we deny the girls the right to own their bodies. In marriage, women are considered the property of the man so in short a woman owns nothing, not the children, not the cows or the land. It all begins with FGM where we take the right from a girl to own her body. A girl who is not cut is whole; there is no part of her body that is missing.

Looking at the issue from an aesthetics point of view, a young male (IR18) quipped, "Cutting girls destroys their natural beauty by leaving a scar in her reproductive organ." This stands in sharp contrast to views by some communities that consider women's external genitalia as ugly and in need of modification. Though not widespread in the community, the bodily integrity discourse is picking momentum and it could very well become a key campaign message

driven by the young generation using the social media. In more recent times, there have been campaigns by women in Kenya advocating against violence towards women. A case in point is the #MyBodyMyRightMyDressMyChoice# campaign where women demonstrated against harassment based on their dress choice. With more Maasai girls getting an education and with increased new media use and empowerment of girls, the Maasai girls may very well begin to advocate for the right to own and make decisions concerning their bodies.

#### **6.2.5 Illegality discourse**

The discourse draws its name from the legal approach to the campaign against the practice of FGC. The 2011 Prohibition of Female Genital Mutilation Act, Chapter 62B of Kenya (2012) considers it illegal for anyone to aid, abet, counsel on or procure FGC. These stipulations of the Act constitute part of the campaign messages that have been circulating in the country. Generally, the respondents observed that the practice of FGC is illegal. A good number of them said they had heard that the practice of FGC is unlawful and could lead to arrests and prosecution. A young female anti-FGM ambassador (IR23) said she knew that the government had come up with a law banning the practice and that there was an Anti-FGM Board formed by the government for the purpose of working toward the complete eradication of the practice. She did not elaborate on what that law says but speaking on the same issue, a young female civil servant (IR4) remarked that “The community also know the legal implications for FGC like being jailed

for life.” This respondent did not specify which specific offence warrants a life sentence but looking at the 2011 Act, being jailed for life is the penalty for a person who causes death through cutting while other people convicted under the Act are liable to imprisonment for a term of not less than three years or to a fine of not less than Ksh 200,000 (Approximately US\$ 2,000), or both. The community members are not in possession of this document but they said that the message about the Act is being circulated on different platforms which include the media, seminars organized by NGOs like AMREF, public gatherings organized by politicians and chiefs as well as church gatherings and schools. A male primary school teacher (IR21) observed that:

In churches, the pastors will tell the congregants to watch out against activities that can result in convictions. Then, the government with its officials like the chiefs will also talk about ending the practice . . . so there are many ways through which the message is being circulated.

The preamble to the Act states that it is meant to safeguard against violation of a person’s mental or physical integrity occasioned by FGC. Some respondents disclosed that people in the community are now afraid because the government says that FGC is illegal and is using the anti-FGC law to come down hard on those who violate it. A middle-aged housewife (IR13) disclosed that “Some of us we just fear being arrested or being sent to jail. For me, I have also decided to stop because when you get arrested you will lose more.” A local pastor (IR17) elaborated on this saying:

Many women who knew how to do the cutting have stopped because they are afraid of the law. Many had previously thought the law was a joke but

after seeing the government coming in and people being arrested like the woman I just mentioned, they have realized it is a serious matter and now they are afraid.

As already illustrated in Chapter Two, legal enforcement against the practice in and of itself has limited effectiveness in eradicating FGC (Ako & Akweongo, 2009; Kandala & Komba, 2015; Muthumbi et al, 2015; Odukogbe et al, 2017).

The study went further to assess how those notions held about FGC and womanhood are shaping the Maasai perceptions to the practice FGC.

### **6.3 Impact of discourses on Maasai perceptions towards practice of FGC**

The Maasai can be said to be at a crossroads that pits tradition against modernity. Although the Maasai are very proud of their culture and will do whatever it takes to defend it against change from the outside, forces of modernity have been sweeping across the community bringing about change. The cultural practice of FGC is one aspect of the Maasai culture that has continued to resist change as shown by low reduction in prevalence rates reported by the KDHS of less than 20 per cent in over two decades. The high prevalence in the practice suggests that it is still highly regarded by the Maasai community because if it was deemed not to serve any purpose in the community, it would cease to be practised. It was from

this background that this study sought to find out in what ways the FGC discourses among the Maasai are impacting their perceptions towards the practice.

The findings of this study show that perceptions of both men and women toward the practice of FGC are mixed just like the discourses are. Generally, the perceptions were found to depend mainly on whether the Maasai have formal education, have received training or exposure to the anti-FGC campaign messages, or belong to a church. Age was also found to be a factor influencing perception towards FGC as was membership to a self-help group in the case of women. Men and women manifesting these characteristics were found to adhere to one or a combination of the five contemporary FGC discourses and were consequently found to be in support of the campaign to end it. A phrase that kept recurring through the interviews was “Most of the women are in support of the campaign to stop the practice.” The phrase “most women” needs to be taken to mean those who have had exposure to the anti-FGC campaign and not Maasai women in general because as discussed earlier, majority of the Maasai people live in the rural areas some of which have had very little exposure to the campaign. Elaborating on this view, an elderly community elder (IR5) noted that “Women started their own groups and in these groups, they are educated on the negative effects of FGC. Some women are very strongly opposing the practice. They want girls to go to school.” The anti-FGM campaigns, especially the seminars were said to have played a key role in changing the women’s perceptions concerning

## CHAPTER SEVEN

### SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

#### 7.0 Introduction

This chapter starts with a summary of the key findings of the study which are based on the objectives of the study. The chapter then outlines the conclusions as well as the recommendations of the study with suggestions for further research. The study used the qualitative research method which included both in-depth interviews and focus group discussions to provide a comprehensive analysis of the research problem. This research looked at the constructions of FGC discourses and associated notions of womanhood by the Maasai people of Kajiado, Kenya. A total of 32 in-depth interviews and three focus group discussions were carried out.

#### 7.1 Summary

The main aim of the study was to interrogate how the Maasai of Kajiado construct FGC within the context where dominant discourses on FGC have been circulating for a number of years through the anti-FGC campaigns. Overall, this study revealed that there are as many arguments in support of FGC as there were against it. The pro-FGC arguments which are referred to in this study as cultural discourses were steeped in the cultural beliefs, norms, and practices of the Maasai. They include the fact that not cutting will incur the displeasure of the gods (supernatural discourse); that it serves as a marker of transition into

the practice. This is how a women's leader (IR22) who is heavily involved in the campaign explained it.

Today where we have reached, we as women who have been trained by AMREF and by the government's Anti-FGM Board, we are saying that if girls are cut, we as women are deceived because once she is cut she gets married off like me but if she is not cut she will go to school because no boy will steal her off and she will get a good chance to be educated until she goes to university. Those who have gone to university, no one can take advantage of them and by then, they will not agree to be cut because they have even passed the age for it. So our commitment is to make sure that girls get educated so that FGC can be eliminated but if they are not educated, FGC will not end because there is nothing else for uneducated girls but to cut them and marry them off and there is no moran saying he will marry a woman who is not cut. Now, we want to train the young men, the morans, to see if they can marry the girls who are not cut.

This respondent could confidently speak in support of the campaign because she has received sufficient training but has also been putting into practice what she has learnt and can see the fruit of it.

The girls I supported are now at Maasai Maara University . . . if they had been cut at class four or five, they would have been married off . . . I am so committed to this course that neither my daughter nor those I am helping or even my neighbours' girls will be cut unless they do it without my knowledge or they travel far to do it.

Her use of the phrase "I am so committed to this course" and the actions she has taken are a clear indication of her conviction that FGC is a problem for Maasai girls that needs to be addressed to save them. The efforts by the anti-FGC campaign and the women's groups were lauded by a number of the respondents. A male teacher (IR21) summed it up well noting that the efforts had resulted in

women changing their views about the practice and becoming supporters of the campaign.

Many agree that the outcomes of FGC are bad and that the campaign to end it is something that will save girls. Women have understood the negative effects of FGC and the percentage of women supporting the campaign is higher than that of men showing that they are in support of the campaign. If you go to the seminars, they are the ones attending in their numbers but for men, it is like we are being begged and enticed with gifts of blankets and such things. The women are the ones making noise about the practice and reporting cases of FGC to the authorities. The women are doing well and are leading us well in this campaign and I know that soon, things will change.

Those women supporting the end-FGC campaign are aware that they are going against their culture but they are willing to take the risk because the training they have received from the campaign seminars has enlightened them to the problems of the practice and they have concluded that ending FGC will benefit the girls and the community as a whole. The support they get from the government helps to enforce the campaign. This is how a women's leader (IR22) explained what has been happening.

Women who are educated or been trained have taken decisions. . . Women's groups like the one I belong to are doing this because we are trained to circulate the message. We go to the villages and tell the people there that we are saying that girls should not be cut. But in the reserve, even if they do not say it, they continue to cut. Others tell their girls not to attend the training because they will be cursed at the training meetings and if they attend and then get cut, they will die. We are very observant to see which school has failed to send their girls for training and we follow up. We realized that the more mature girls are not sent for the training but rather the very young ones who know nothing because if they send the older ones, they will understand and will refuse to be cut. So we agreed with the chief and the DO that the next training we organize, the older girls must attend and if they fail to do so, we will have the elder in charge of that area locked up because these older girls need to be taught. . . We

are committed to having the practice stopped so that our girls can be educated.

To show that she has acted on what she is urging others to do, this women's leader remarked that her daughter knows that she will not be cut and her husband knows it too. "When it gets to the time her age mates get cut around the time of doing class 8, I will also organize a party for her where I will invite other Maasais to come and celebrate her for completing class 8 without having to be cut." A male primary school teacher (IR21) hailed the actions of these women saying:

There are some women groups with women who do not fear the actions the community can take against them and they go all out against FGC. If you cut one girl and they get the stress signal about it, they come against you that very day without fear. The community looks at them badly and bad mouth them, but they are determined and they need all the support they can get because they should not be left to go on such missions on their own.

Exposure to the campaign message then was shown to have had some impact on the Maasai construction of FGC as a problem and the commitment by the respondents cited here illustrates personal ownership of that construction. The perceptions of the contemporary educated Maasai women seem to lean more on the modernistic discourse as illustrated by a young female university graduate (IR29) according to whom FGC exposes cut women to a bleak future devoid of opportunities for a good life. For these women, the culture of FGC is retrogressive for Maasai women and should be stopped.

There were some elderly women without formal education who had received some exposure to the campaign but the campaign did not seem to affect their perception of the practice or convince them to change behaviour where FGC is concerned. Such women actually challenged the medical and sexual fulfilment discourses of FGC and affirmed their commitment to it as a great tradition of their people. These women adhere strongly to the cultural FGC discourses and consequently hold the view that FGC should continue because it is their culture. These women have either not attended the anti-FGC seminars in person or have not embraced modernity hence their strong support of the cultural practice because that is what they know and they have not seen anything wrong with the practice. This is how a women's leader (IR27) described the views of this category of women.

If you look keenly it is like they are saying if somebody had her own problems, those problems should not be compared to those in my place so they have not yet believed that cutting girls leads to death or will cause them problems. They say that even if there is somebody who has experienced problems, that person has her own problems. The person had a curse or there was a problem associated with her own home or family.

These views were buttressed by a young woman (IR23) who observed that women from the villages cannot imagine how their girls can stay without being cut. According to her, the women argue that, "they were cut and they still lived that long and they did not die, they never had difficulties giving birth, and it is their culture. So when the government or the NGOs come and tell them that they should not do it, they are reluctant to change." According to an educated moran (IR12),

The women were not involved in setting the anti-FGM law. They feel that an important ceremony was taken away from them without being consulted. It was the only aspect of being a woman they could celebrate and have control over. They are not happy with that action and cannot support it.

In consonance with these views, a community elder (IR19) was of the view that “It was mainly the educated who embraced the campaign but if you go inside Masaailand proper, they do not agree with the campaign.” Three of the female respondents were forthright in their support of the practice and against the move by the government to outlaw it. One of them, a traditional midwife, (IR11) remarked:

Real Maasai women cannot support the actions. Today’s generation is backward. A Maasai man would never go for an uncut girl. . . Personally, I do not support the move to end FGC. It is okay for other communities to stay uncut but our Maasai beliefs do not allow a girl to have children if she is not cut. As a midwife, I cannot assist a Maasai woman who is not cut to have a baby as this will ruin my eyesight. However, I can assist her if she agrees to be cut right after childbirth.

Another of the three who is a middle-aged housewife (IR15) with no formal education expressed her personal stand on the matter saying, “My son cannot marry an uncut girl and if he makes that mistake, I will personally cut her.” In a matter of fact way, the third woman, an old housewife (IR 16), said, “I love my culture and therefore cannot accept the attempts to change what we have been doing all these years.” She disclosed that she would end FGC only after all her girls had been cut. For these women, their perception of FGC is that it is part of culture and therefore must continue to be done.

Although all the female respondents apart from the three just cited said they support the end-FGC campaign, it was acknowledged that there are a number of women in the community who claim to be in support of it but are not really genuine. Such women cannot be said to perceive FGC as a problem. A local pastor (IR17) explained how this happens.

You will find many women saying 'Let us leave FGM' but behind the scenes, they are practicing it. When a man agrees to stop, he has agreed, and when he disagrees, they often will not deceive but women can really deceive. I have come across women who will point out to somebody and say that she is in the group which is telling us that we should not cut but she is one of them who do it. . . You will find that if the woman is not in support of FGM, it will be easy for the man to change than the other way round. These days, the cutting that is taking place in secret, many times you will find that the man is not there, it is the woman. The women are strong to persuade the men, to persuade about things being done in the night.

It was the view of the respondents that old men who adhere to the contemporary FGC discourses and support the end-FGC campaign are in the minority. Majority of them perceive FGC as a necessary cultural practice that must be upheld. Some respondents were quick to point out that real (the terms 'true' and 'bona fide' were used interchangeably with 'real') Maasai men would never support the campaign to end the practice. Speaking on this, an old housewife (IR16) disclosed that "*Bona fide* Maasai men will uphold our culture but those who have been misled will support the campaigns." A male primary school teacher (IR21) emphasized that "men still steeped in culture want it to continue by all means." A middle-aged businesswoman without formal education (IR24) remarked with

emphasis that “the old men cannot marry girls who are not cut, they cannot, old men cannot.” According to a middle-aged female respondent (IR25), such men will insist on having their daughters cut and will “easily tell their wives to leave the homestead if they bring in ideas about not cutting their daughters because nothing there is yours including the children, everything there belongs to him.” Use of the term ‘bona fide’ or its equivalents was mostly used in reference to old Maasai men because they are the ones who are considered the custodians of culture. This was the point made by a middle-aged businesswoman (IR1) “For many men, especially the old ones, this is a tradition they inherited from their fathers that they are obliged to keep and pass on to the next generation.” Some respondents, however, were of the view that this holding onto the Maasai culture has more to do with ensuring that the status quo of women’s position in culture is sustained. Unfortunately, this perception and adherence to culture is not just with the old, uneducated men but with some educated ones as well, thereby strengthening the foothold the practice continues to have in the Maasai culture. This was the point made by a middle-aged housewife with a college education (IR30) in her observation that,

Some still hold strongly to the culture and are yet to be delivered from their blind adherence to it. There are some educated ones who still insist that women should be cut. These are the stumbling blocks to change because when the uneducated see the educated ones sticking to culture, they then conclude that it must be the right thing to do.

There is a general feeling in the community that older men are saying they support the campaign not because they are perceive it as a problem and are

convinced that it should end but because of the fear of the punitive law against the practice like having to sell their priced cattle to pay hefty fines if they are caught

The economic benefit associated with FGC still holds sway in the rural communities because keeping of livestock is still the main source of livelihood for many Maasai people there. According to a community elder (IR8), “Some men still hold firmly to the practice with the belief that when a girl is circumcised and married she can benefit the community by bringing cows to the home as a form of dowry.” The findings of the Joint Programme on FGM/C baseline survey report for Samburu and Baringo districts (2008), communities that are similar in many ways with the Maasai revealed that for most of the people in those communities, FGC is a tradition or culture that must be observed by the community members.

There was a general observation that there are several young men who are now getting formal education and getting exposed to the campaign messages. A number of them are becoming adherents of the contemporary FGC discourses and are supporting the campaign because they have understood from education what the implications of cutting girls are. More specifically, such young men though few in number are progressively getting to agree that the practice needs to end and are willing to marry uncut girls. The young respondents in this study said that they had come to realize that cutting is not a requirement for a girl to become a

woman because her body naturally matures to carry out her roles as a woman.

One of the young men (IR18) elaborated on this saying:

There was this thing they used to say those days that a woman who is not cut is bad because she is loose but these days they have changed their thoughts because these days they are saying that a girl who is cut does not know love but the one who is not cut knows love so young men are changing their minds and they are saying it is better not to cut.

Whereas adherents of culture perceive FGC as a way to prevent sexual immorality, these young men perceive it as an impediment to their enjoying married love. This position being taken by young Maasai men on FGC is crucial for the abandonment of the practice given that the culture considers cutting of girls a critical requirement for marriage and motherhood. The threshold of those taking such a position, however, is small and needs to rise for the impact to be felt.

It is clear from these findings that a good number of the educated Maasai people of Kajiado exposed to the campaign want the practice of FGC to end because they have come to understand its negative consequences and also because of the anti-FGM law that has been enacted by the government. Many of the respondents said that they want it stopped because they do not see the benefits cutting adds to the lives of the girls. There are, however, a number of them, especially the older uneducated ones and those from the hinterlands who still hold strongly to their

culture and want the practice to continue. Majority of these ones have, however, not had significant exposure to the anti-FGC campaign messages.

Almost all the respondents were positive that FGC will come to an end. In fact, a few of them thought it has ended. Others felt that it was a matter of time and the practice would be a thing of the past. A male anti-FGM ambassador said that he was convinced “it will end soon because the community has embraced the end FGC messages.” Other reasons given why respondents thought it would end soon were that young girls were now refusing to get cut; the law is catching up with those caught cutting or abetting it; men were having discussions and coming to the conclusion that cutting of girls has no meaning and some of them, especially the younger ones, are now accepting to marry uncut girls.

This optimism was not shared by all the respondents. Some of them who are heavily involved in the campaign think there is still a long way to go before FGC is eradicated as captured below in the words of a women’s leader (IR22).

I see that FGC will reduce by a small percentage but if we accelerate training it can end or reduce drastically. But it is difficult because culture is strongly embraced and for one to let go is very difficult. But they will also get to embrace change and when Maasai embrace something, they embrace it the way they have done it with the word of God and they were late in doing so but they did it, so it is about education. We were being supported by AMREF but it is like they have pulled out of here. We need all the support we can get to help step up the campaign because we do not want it to lose momentum and then some people here think that it has been abandoned and so they go back to the practice. Still, it is a part of culture and for culture to change, it will take many years but what I can say is that

it is changing though at a very small percentage because some people are so much reluctant but it is changing.

A male teacher (IR21) was hopeful, however, that “If all the groups including government, churches, NGOs, community- based groups and schools join hands, it will come to an end. The prevalence is not what it was earlier. It has reduced by a great percentage.” It is believed that formal education is what will bring FGC to an end but Kajiado is yet to achieve universal primary education. According to a community elder (IR19):

It is possible to see many families that do not have a single member who is educated. You see, there is a lot of poverty around and cutting a girl is the first step after which she can be given away in marriage thereby bringing in wealth to her father through the dowry even if she is not educated. So you see, without education, it is difficult to end it.

The findings have showed that whereas there is ample evidence in the community of knowledge about and some acceptance of contemporary discourses (curled from the dominant discourses) that construct FGC as a problem, there is other evidence of cultural resistance from the same community of the arguments in the campaigns messages and actions. This kind of divergence in the construction of FGC in the Maasai community is in line with explanations given in social constructionism that reality is socially constructed through people’s engagement with the social realities in their day-to-day interactions (Berger and Luckmann, 1991; Schwandt, 2003). The perspective further posits that social reality is never conceived as a problem until the people who experience that reality define it as a problem. Clearly, the dominant discourses have constructed the practice of FGC

as a problem saying that it violates the health and human rights of women and girls. That focus on FGC violations is monolithic in nature because it fails to appreciate social-cultural nuances of the practice implied in the theorization of social reality.

The findings show that the Maasai people of Kajiado have a variety of ways they construct discourses around the practice of FGC, some of them using cultural lenses while the others use 'alternative' modern concepts . The interactions with them revealed that the Maasai people, though all residents of Kajiado County, are operating in different social-cultural contexts and this explains the diversity in the constructions of the discourses. Exposure to the anti-FGC interventions, education, age, religious affiliation and for women, membership to small self-help groups are factors that made the difference in perception towards the practice of FGC. What is also clear is that the community members are actively engaging the one cultural norm, FGC, in light of the contexts they find themselves in resulting in a shifting of priorities or overlap in relation to what discourse(s) they choose to inform their actions on FGC. For instance, a mother will accent to the medical construction of FGC through an understanding that cutting of the daughter's genitals can result to short-term or long-term complications but she could be confronted with issues that challenge her to make a decision as to whether to act based on that understanding or otherwise. There were reported cases of school-going girls asking their parents to organize for them to be cut to enable them to socially integrate among their peers. In one of the cases, the mother complied

after the daughters applied a lot of pressure on her showing a shift to align with the cultural discourse on social integration but in order to protect the girls from negative health complications she organized for a mild medical procedure which was carried out by a health professional in a clean environment. The dilemma - such a parent faces is real because she could refuse to comply with the girls' request and the girls end up going for the cut anyway in unsafe conditions which could compromise their health. The action of this parent was also an alignment with the modernistic discourse because by having the girls cut in secret, she avoided exposing them to cultural norms like early marriage so they could still continue with their education. Such a parent can be said to be exercising agency in making a decision that she perceives to be for the good of the daughters. Her construction of FGC is mediated by a combination of factors which she actively reasons through to arrive at a decision. On the other hand, there were others like a local pastor who resisted the pressure and took the time to reason with his daughter against the practice encouraging the girl to wait till she attained the age of 18 to decide for herself. Such a parent would be said to be transferring agency for deciding on FGC to the daughter.

These examples illustrate the complexity involved in the construction of social reality even where just one cultural norm and one people group are concerned. That complexity has generated multiple narratives among one people further illustrating that there is no generic FGC practicing community or in this case, no generic Maasai. For the mainly rural, uneducated and older folk, FGC is not a

health or human rights violation but a highly regarded cultural norm that must continue but for the mainly educated, young, church members in the urban areas and women in self-help groups FGC is a retrogressive, unnecessary and harmful practice which should end soon. Decision to cut or not is mediated by the context the people in question find themselves in and the findings show that it could be a combination of a number of factors.

## **6.5. SUMMARY**

This chapter has examined the ways in which the Maasai of Kajiado construct the practice of FGC. It identified ten types of discourses associated with the practice. Five of those discourses were found to be steeped in Maasai culture and were therefore termed cultural discourses while the other five were shown to be influenced by the anti-FGM campaigns running in the community and other modern 'alternative' concepts and therefore referred to as contemporary discourses. The next chapter will present the summary, recommendations and conclusions of the study.

adulthood (social transition discourse); that it reduces a woman's sexual desire and therefore curbs sexual immorality from them (sexual morality discourse); that it enhances marriageability of girls and transfer of bride wealth that goes with it (economic benefit discourse); and that it ensures integration of the girls into the larger community (social integration discourse). Although all the research respondents showed a good knowledge of the cultural discourses, it was mainly the older men and women without a formal education, a strong church affiliation or to the campaign messages and who reside in rural communities who showed a strong alignment to it. The anti-FGC discourses which are referred to in this study as contemporary discourses were influenced by the anti-FGC campaign messages and modern 'alternative' concepts. They include the fact that FGC has negative health consequence (medical discourses); it is retrogressive (modernistic discourse); it prevents women from enjoying sex (sexual fulfilment discourse); it violates the idea that each body part has a unique function to play and should therefore be kept intact (bodily integrity discourse); and finally, that the practice has been criminalized (illegality discourse). Overall, it was the young, educated and church members of the community who showed a strong alignment to the dominant discourse on FGC as a retrogressive, unnecessary and harmful practice. To a large extent, these respondents also tended to be the ones with a good exposure to the anti-FGC campaign messages and these also included old respondents as well as uneducated women who are members of the small self-help groups. All the respondents, though, expressed a familiarity with the anti-FGC

campaign messages but the regular reference to them using phrases such as “they say” indicates lack of ownership of those discourses.

The second objective sought to explore the linkages between the practice of FGC and cultural notions of womanhood among the Maasai. Findings from the study revealed that FGC is very closely tied to notions of womanhood. For the Maasai, a female qualifies to be called a proper woman only after she takes the cut, gets married and begins to bear children in that order. No matter how old a female gets, she is considered a girl until she takes the cut. Despite attaining this status, the Maasai woman is totally dependent on her husband and has no say on decisions concerning her, the children or property because all these put together constitute properties of the husband. Among other Maasai women, however, she can make her voice heard but if she is not cut, she is isolated and stigmatized because she is considered to be a child.

The third objective sought to assess how notions held about FGC and womanhood shape the practice of FGC. Strong adherents of the Maasai culture and the attendant FGC discourses perceive FGC as part and parcel of culture and are convinced that it must be sustained at all cost. Some of them like the older women have had some exposure to the campaign messages and can clearly cite those messages but contest the claims that FGC violates the health and right to sexual fulfilment or that it leads to birthing complications and death, a clear indication

that exposure to messages in the campaign does not necessarily convince. Because of fear of the punitive effects of the anti-FGM law, some of them have decided that they will not have their daughters cut while others, especially the older women, have made it clear that they will not stop cutting their daughters, the law and its consequences notwithstanding, a finding that corroborates the declaration made by a larger group of women in Kajiado in July 2014 mentioned in Chapter One. Some of the respondents claimed that FGC is being carried out in secret to avoid the hand of the law. The KDHS data has consistently shown that FGC is still highly prevalent among the Maasai which suggests that there is still a sizeable part of the population that has not imbibed the anti-FGC campaign messages and that cultural constructions of FGC and womanhood are still prevalent among the Maasai.

Adherents of the contemporary FGC discourses, on the other hand, are determined to have FGC eradicated because they deem it retrogressive to the development and wellbeing of women and the girl child. They consider education as a basic human right for boys and girls and hence counter any attempt to deny girls the opportunity to get education by having them undergo FGC. This is the point made by Claude Ake (1987) when he argues that all human beings are entitled to basic human rights to ensure their quality of life is not compromised. The adherents of contemporary FGC discourses see education of both the boy and girl child as the key to eradicating the practice of FGC

Because the threshold of adherents of Maasai culture is higher than of those who adhere to modern concepts with regard to FGC and womanhood, the respondents are convinced that it will take a long time to eradicate the practice of FGC. It reveals the complexities of cultural change that go far beyond the conventional modernization or human rights narratives in the dominant discourses.

The fourth objective draws from the second and sought to examine if Maasai women have the agency to make decisions that impact their lives for the better. In the cultural setting of the Maasai, the woman is said to have no agency because she owns nothing and hence cannot make decisions about anything. However, the contemporary Maasai society is getting more and more impacted by modernization, and there were a lot of instances that were cited that clearly illustrate agency of Maasai women. Formal education, self-help groups, skills training and the consequent entry of women into paid employment or small-scale businesses were said to be giving Maasai women agency to make decisions that improve their lives and those of their families which they could not do before. Maasai girls who have had quality education are now able to make informed decisions on anything including marriage, involvement in development projects in the community as well as politics at the local and county level. A number of them through membership in the self-help women's groups are part of the teams that are campaigning against FGC in a context where culture still demands the practice. Several respondents including the men expressed the wish for the formation of more women's groups so that more women in the rural areas can

benefit. It is noteworthy, however, to point out that the assumed equivalence of agency of women with rejection of FGC is undermined by the fact that young educated women as well as the old ones are not automatically renouncing FGC. Some young ones are actually demanding it.

## **7.2 CONCLUSION**

A few vital conclusions have been drawn from this study. The key conclusion is that knowledge construction on the cultural practice of FGC among the Maasai of Kajiado, Kenya goes far beyond the conventional or dominant narratives of that practice. Conventionally, FGC has been constructed as a violation of the health and human rights of women and girls but the findings portray more nuanced ways that the Maasai people construct that social reality which fall into two categories namely the cultural and the contemporary discourses. Although the Maasai are one people group that has over the years sought to uphold its cultural distinctiveness, as people they are divided on their perception of their cultural practice of FGC with some of them legitimizing it while others challenge it. The multiplicity of and discordance in their discourses on FGC is mediated by their competing commitments to their culture and modernity, a reality that corroborates social constructionist's theorizing of construction of reality as multifaceted and context based (Burningham & Cooper, 1999; Chouliaraki and Fairclough's, 1999; Crotty, 1998; Niemeyer, 1993; Guba & Lincoln, 1985; Pêcheux, 1982). Schwandt's (2003) observation that discourses are created, negotiated, sustained

and modified suggests that with time, discourses on FGC among the Maasai will continue to be modified as the community opens up to modern influences.

Another key conclusion of this study is that the anti-FGM campaign messages have widely permeated the community conversations. This is in line with the observation made by Burr (2003) that the powerful (in this case the international community, NGOs, and national and county governments) are often most successful in having their versions predominate the construction of social reality and according to Hilgartner and Bosk (1998), they have been able through the campaigns to cast the FGC issues in dramatic and persuasive terms using vivid, emotional rhetoric to ensure their problem definition of FGC receives attention and influences action to be taken on the practice. However, familiarity with the campaign messages was not shown to translate into ownership of the discourses used to construct them. The constant use by the respondents of phrases such as “they said”, “we hear” in reference to the campaign messages and the rejection of the claims of violations made in the campaign messages by the older women suggests that the Maasai have not been convinced by these messages and rather consider them foreign. It is the view of constructionists that an issue is not a problem until claim makers construct it as such (Johnsdotter, 2010; Burningham & Cooper, 1999; Best, 1989) and it is clear that we have a good number of the Maasai people reached by the campaign messages who do not believe there is a problem with FGC. Because there is still a big threshold of the Maasai people strongly legitimizing cultural FGC discourses and discounting the contemporary

discourses, reduction in FGC prevalence will continue to be low. This seems to be the view propounded by Idang (2015: 107) when he says:

A change which calls for the replacement or total abandonment of pre-established and originally preferred modes of behavior is less likely to be accepted than one . . . which either provides other alternatives and or extends the culture by merely adding new things to it. . . Force has its own limits in bringing about change as it is impossible to spell out every bit of a people's way of life and formulate legislations to cover them. This is actually where the problem of adjustment to externally induced change has arisen. Most Africans find it difficult to adjust between their primitive beliefs in certain aspects of their culture and the supposedly modern mode of accepted behavior.

Whereas the international community and allied institutions working at the national and local level are convinced that FGC is the grave problem for the Maasai women and girls and must be eradicated quickly, the Maasai community is of the view that lack of livelihoods for women and quality education for the girl child are the key issues for them and they are already addressing these using the limited resources available to them. The self-help women's groups were highly praised for the role they are playing in this regard. This is in line with the explanation given by Dutta and Pal (2011) to the effect that outsiders should not construct problems and proffer solutions for a community because such constructions appraise experiences of the community members in contexts foreign to them (Mukabela, 2005) and such constructions end up misrepresenting the people's cultural realities (Mulemi, 2011).

This is an indication that FGC is still playing a useful function in the society and the Maasai people find themselves navigating the wide terrain of FGC discourses to make decisions that will be to their benefit but which may be considered a transgression of the law. Until the society decides that the functions FGC plays among them have become obsolete because they have found alternatives, it is clear from the study findings that FGC will continue to be legitimized.

Another important conclusion is that despite the many challenges and limitations confronting Maasai women, they can no longer be described in generalities as ignorant, passive victims of gendered oppression in an oppressive patriarchal system. Rather, they are clearly prioritizing increasing their agency through the raising of independent incomes, education and skills training which ensure that they are not passively subservient to the dictates of their husbands and culture in general. Access to independent incomes comes through joining local women's self-help groups popularly known as '*chamas*' they pool their limited resources which they invest or share out to enable members to get into small-scale businesses. Through that, a number of the women have become the breadwinners for their families and others have gone back to school and acquired certificates and diplomas. A few are holding leadership roles at community, county and national levels. The Maasai now have their first female MP, an indication that status stereotypes are being challenged. By their actions, these women are actively taking part in the reconstruction of womanhood discourses.

It is safe to conclude from the findings of this study that to a large extent, the discourses on FGC among the Maasai of Kajiado, Kenya are alternatives to the dominant discourses. Although the dominant discourses on FGC have been popularized among the Maasai of Kajiado through the anti-FGC campaigns, they have not been widely accepted and owned by the community to bring about significant behavior change with regard to FGC.

### **7.3 Recommendations for change interventions**

This study provides ways of understanding how people construct knowledge of their realities. The study specifically focused on how the Maasai of Kajiado, Kenya construct FGC and related womanhood discourses in the context of campaigns to eradicate the practice driven by dominant discourses. It would be expected that the information dissemination in those campaigns and the enactment of the law against FGC would result in knowledge acquisition, change in perception and behavior but there is little on the ground to show this. Findings from the study reveal complexities of cultural change that go far beyond the conventional modernization or human rights narratives propounded by the dominant discourses.

Lessons learnt in this study can assist groups seeking to introduce cultural change to appreciate the complexities involved in doing so. It is clear from the study that widespread familiarity with the anti-FGC arguments in the campaigns have not

resulted in ownership and neither has this together with punitive legislation resulted in sustained behavior change. Rejection especially by the older women of the anti-FGC claims about the health and human rights violations of FGC shows that those arguments do not necessarily convince the recipients of the campaign messages. Understanding of targets of social change and the complexities of their culture is a crucial starting point but again, it is not enough to bring about change. Duttal and Pal (2010) have argued that agencies external to a community must never construct problems and solutions for a community without listening to the community they target for change. The history and successes of the women's self-help groups not just in Kajiado but in other parts of Kenya demonstrate that when a group is involved in naming its problems and is empowered to come up with solutions to their problems, chances are high that their efforts will yield sustained change. According to Jones, Holmes and Espey (2010), women are powerful agents of social change especially in rural communities that are targeted by development efforts yet as Gallagher (2010) observes, they are normally not given a role in decision-making at that level. Interventionists would do well to pay particular attention to communities like the Maasai and see them as key partners in the change efforts so they can equip them with skills necessary for them to identify and name their problems and then come up with their own solutions to their problems. It was clear from the findings that the women aspire to earn incomes from which they can educate their daughters. They further expressed interest in skills training to improve on their small scale businesses and to add value to the products they make. In addition, they aspired to be introduced to good

markets for their products. This suggests that change agents will do well to direct their efforts into empowering the women through their naturally occurring groups with the necessary resources, skills training, basic financial literacy skills and exposure to markets because doing so has clear signs of bringing about the change anticipated. Working with community leaders, churches and other groups that are accepted in the community to showcase the work and output of well performing women's groups to settlements where none exist will also go a long way in encouraging women in those communities to start their own and for such groups to get acceptance in those communities.

The respondents expressed great optimism in quality education of boys and girls as the key solution to ending the practice and change agents would do well to work with them to realize their aspirations. A deprived community like Kajiado requires more funds put into education of boys and girls to ensure that no children will drop out of school before they have acquired skills necessary for them to earn a livelihood. Churches were also said to be playing a great contribution in terms of helping the community re-examine their cultural beliefs. Churches are often not well resourced to carry out effective outreaches to the difficult to reach communities like those in rural Kajiado. Change agents would therefore do well to work with institutions such as these that are already operating in the community.

#### **7.4 Recommendations for further research**

I limited this research to only include respondents aged 18 years and above. In the interview and FGD interactions, a consensus seemed to emerge that it is the young educated people who will bring the practice of FGC to an end. Further research should therefore be done to interrogate how school-going Maasai youth construct womanhood and FGC discourses and their views concerning the future of the practice. A claim was made that FGC will continue for a long time because there is no moran saying that he will marry an uncut girl. A future study should incorporate this group as well to establish if their worldview is changing. I learned that there are attempts to persuade them to accept girls who are not cut as brides. It would be worth interrogating how this effort is being received.

Due to logistical and time constraints, I could only reach the rural Maasai communities that are closer to the urban centers and a few people from the hinterland who visited the markets. According to the research respondents, those communities are still carrying out FGC. Some of the research respondents complained that Maasai women were not consulted when the lawmakers were crafting the anti-FGM law. Further research needs to be carried out there to interrogate how people in unreached rural communities construct the realities of their culture. Community conversations might be a better approach to getting the people to name their problems as well as brainstorm ways of dealing with the problems.

Scholarly literature on FGC can be greatly enriched by the inclusion of personal narratives on FGC as this would help in contextualizing the alleged nature and consequences of FGC and give the study an emic view. Personal narratives have a way of capturing details about a person's life that helps to better contextualize the person's life and experiences. A narrative study is recommended for this to include women of different age groups and from communities practicing different types of FGC. This may help to avoid imposing hegemonic and monolithic identities on communities with different cultural experiences as is often done in dominant discourses.

Knowledge construction and communication among the Maasai has largely been oral. It is further recommended that a search and analysis be made of Maa FGC songs and other general songs, proverbs and stories to interrogate the Maa discourses on womanhood and FGC to boost the literature on the subject.

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## APPENDIX 1

### Standardized Open-ended Interview Questions for Women in Kajiado County

**Thesis Title: ‘Alternative’ female genital cutting discourses? A study of the Maasai of Kajiado, Kenya.**

#### Introduction

Welcome interviewee to the interview. Explain to her the purpose and significance of the study and why it is important for her to give honest opinions. Explain the protocol consent form to her and if she gives consent to take part in the interview, proceed to ask questions with the help of the questions provided below.

(Bio-data about age, family, education, occupation, marriage, religion can be reserved for end of interview if it does not naturally come in the course of the interview.)

1. What are the stages through which one comes to be regarded as a woman among the Maasai?
2. What are the roles Maasai women are expected to play in the traditional set-up?
3. How do you feel about playing those roles?
4. What position do women occupy in Maasai culture?
5. What things do Maasai women aspire to be and do?
6. What prevents them from realizing those aspirations?
7. In what ways can the Maasai community help women realize their potential?
8. What messages is your community receiving about FGC these days?
9. How are these messages being circulated?
10. In traditional Maasai culture, what did the community say about FGC?
11. How was this local knowledge on FGC circulated?
12. What are the views of Maasai women on FGC today?

13. Are you supportive of those views? Explain.
14. What do you think are the views of men on FGC?
15. In what ways have women been involved in making decisions about FGC in Maasai culture?
16. What problems do you know of that women and girls who have undergone FGC are likely to experience?
17. In what way(s) did you come to learn of those problems?
18. What actions do you know of that have been taken against FGC in the community?
19. In what way(s), if at all, were Maasai women involved in the making of those decision(s) against FGC?
20. What have been the reactions of women to those actions against FGC?
21. Would you allow your son to marry a woman who is not cut? Why?
22. In your opinion, what is the future of FGC in Maasai culture?

## APPENDIX II

### Standardized Open-ended Interview Questions for Men in Kajiado County

**Thesis Title: ‘Alternative’ female genital cutting discourses? A study of the Maasai of Kajiado, Kenya.**

#### Introduction

Welcome interviewee to the interview. Explain to him the purpose and significance of the study and why it is important for him to give honest opinions. Explain the protocol consent form to him and if he gives consent to take part in the interview, proceed to ask questions with the help of the questions provided below.

(Bio-data about age, family, education, occupation, marriage, religion can be reserved for end of interview if it does not naturally come in the course of the interview.)

1. What are the stages through which one comes to be regarded as a woman among the Maasai?
2. What are the roles Maasai women are expected to play in the traditional set-up?
3. What are your views about women having to play those roles?
4. What position do women occupy in Maasai culture?
5. What things do Maasai women aspire to be and do?
6. What prevents them from realizing those aspirations?
7. What help can the community offer them to realize their potential?
8. What messages is your community receiving about FGC these days?
9. How are these messages being circulated?
10. In traditional Maasai culture, what did the community say about FGC?
11. How was this local knowledge on FGC circulated?
12. What are the views of Maasai men on FGC today?

13. Are you supportive of those views? Explain.
14. What do you think are the views of Maasai women on FGC?
15. In what ways have women been involved in making decisions about FGC in Maasai culture?
16. What problems do you know of that women and girls who have undergone FGC are likely to experience?
17. In what way(s) did you come to learn of those problems?
18. What actions do you know of that have been taken against FGC in the community?
19. In what way(s), if at all, were Maasai women involved in the making of those decision(s) against FGC?
20. What have been the reactions of women to those actions against FGC?
21. Would you allow your son to marry a woman who is not cut? Why?
22. In your opinion, what is the future of FGC in Maasai culture?

### APPENDIX III

#### **Standardized Open-ended Interview for Health Professionals in Kajiado County**

This interview is being conducted to help me understand womanhood and the practice of female genital cutting in Maasailand. Thank you for agreeing to take part in this discussion. To make sure that I do not forget anything you tell me, this interview will be recorded but only with your permission.

Position:

Title:

Length of time in the facility:

1. What are the common gynecological complications women and girls present at your health facility?
2. Do women who have undergone FGC present different health challenges at your facilities than those who have not?
3. What programs/materials does your health facility have for educating the community about negative health consequences of FGC?
4. What has been the impact of using those programs/materials?
5. Describe the type of FGC commonly carried out in your community?

## APPENDIX IV

### FOCUS GROUP DISCUSSION GUIDE

**Thesis Title: ‘Alternative’ female genital cutting discourses? A study  
of the Maasai of Kajiado, Kenya**

#### **Introduction**

Welcome participants and after a warm up activity, review for them the purpose and significance of the study explained during the recruitment. Remind them of the need for them to give honest views and opinions. Remind them of the details of the protocol consent form and reconfirm their willingness to participate. Ask for their permission to record the discussion and assure them that confidentiality will be maintained. Begin the discussion using the following questions as a guide:

1. Could you please share with the group what comes to mind when the word “woman” is mentioned. (Allow the women to exhaust their ideas and write down their responses.)
2. Which of those ideas describe a Maasai woman?
3. How would you describe a Maasai woman?
4. Are you satisfied with being the woman we have described or do you wish that your life as women was different? If yes, in what ways?
5. What would make it difficult for you to a different woman from the one you are today?

6. What do the Maasai say about FGC?
7. What other messages have you heard about FGC?
8. Do you think FGC should be stopped? Why or why not?

## APPENDIX V

### Participant Information Sheet

My name is Rosemary Kimani. I am a student in African Studies at the University of Ghana. I am inviting you to take part in a research study. Before you make a decision, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully. If there is anything that is not clear please feel free to ask. Take time to decide whether or not you wish to take part.

**What is the purpose of the study?** There has been a lot of material written concerning the negative effects of the practice of female genital cutting (FGC). A lot of effort has been put in trying to eliminate the practice but it is still going on. Not enough effort has been put into trying to get those from practicing communities give their perspectives on it. This study looks at how the Maasai community constructs womanhood and FGC. In one-to-one interviews, participants will be asked to talk about their perspectives on these two topics. The study is part of my PhD research work at the University.

**Why have I been chosen?** As a member of the Maasai community, your experiences of or encounter with womanhood processes and FGC make you well placed to talk about them.

**Do I have to take part?** No - taking part is voluntary. It is up to you to decide whether or not to take part. If you decide not to take part you do not have to give a reason. If you do decide to take part I will ask you to sign or thumbprint a consent form and give you a copy to keep. If you decide to take part, and then change your mind you are still free to withdraw at any time. You can contact me on the number below if you change your mind.

**What will I be asked to do if I take part?** If you agree to take part, I will arrange an appointment with you for an “interview”. The interview is likely to last for about 1 hours. This will depend on how much you feel you have to talk about and is likely to be different for different people. The interviews will be arranged to take place at a time and in a place that is most convenient for you. I can visit you at home if you wish, or we can arrange to meet in another place that suits you better. With your permission these interviews will be audio-recorded.

**Are there possible disadvantages or risks of taking part?** No disadvantages or risks are anticipated.

**What will be done to ensure that my involvement in this interview is kept confidential?** Your name will not be used in the material corrected from this interview. Also, any information written out will be made anonymous by removing material which might identify you. All recordings made of the interviews will only be listened to by me, the researcher and my assistant for purposes of typing them out and translation into English if the interview is carried out in a language other than English.

I may use quotations from interviews in documents and publications about the study and these also will be made anonymous so that you cannot be identified. None of the information that you give in the interviews will be fed back to anyone.

**What will happen to the results of the research study?** The final results of this study will be reported in my academic thesis as well as articles in women's academic journals and conferences so that the best possible use can be made from the research in advancing the course of women, but you will not be identifiable in any way.

**Who is funding the research?** This study is being personally funded by this researcher but funding is being sought for the writing of the research and further publication.

**Who has reviewed the study?** The study has been approved by the Kenya National Commission for Science, Technology and Innovation as well as the Ethics Committee of the University of Ghana.

If you have any questions or concerns about the research you can contact me, Rosemary Kimani, on 0790545546. If you have a complaint about the conduct of the research, you can contact the YWCA Kajiado office on (get the line).

**What happens now?** I once again ask you to consider taking part in this research. We will meet in a few days when you can ask any questions you have. For those who make the decision to participate in the research interview, I will give them the participant consent form to sign/thumbprint after which we will proceed with the interview.

**APPENDIX VI**  
**Participant Consent Form**

**Name of Researcher:** Rosemary Kimani

Please put a tick in the box:

1. I confirm that I have read and understood the information given in the sheet for the study.
2. I understand that my participation is voluntary and that I am free to withdraw at any time.
3. I understand that my responses will remain confidential.
4. I understand that information I give may be reproduced in publications, but that my comments will be anonymous.
5. I give permission for the interview to be audio-recorded.
6. I agree to take part in the above study.

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Signature of participant

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Date

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Signature of researcher

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Date