

**THE IMPACT OF FEMALE GENITAL MUTILATION ON GIRL
CHILD EDUCATION
A CASE STUDY OF SOLAI ZONE NAKURU DISTRICT KENYA**

BY

**WILSON C.K TANUI
BED/14742/62/DF**


**A RESEARCH REPORT SUBMITTED TO THE INSTITUTE OF
OPEN AND DISTANCE LEARNING IN PARTIAL FULFILLMENT
OF THE REQUIREMENT FOR THE AWARD OF BACHELOR'S
DEGREE OF EDUCATION**

2010

DECLARATION

Wilson C.K Tanui declare that this research report is my original work and has never been submitted to any University for any award where the work of others have been cited, acknowledgements have been made.

Wilson C.K Tanui

Signature.....  Date *16-4-2010*
.....

APPROVAL

This research dissertation is presented to the institute of open and distance learning (ICDL), Kampala, and International University, through my approval

Supervisor

MS NAKATE SYLVIA

Signature:



Date:

16/9/2020

DEDICATION

I dedicate this research dissertation to my beloved wife Winnie Tanui. my beloved children, mother, brothers and sister who have helped throughout my course.

ACKNOWLEDGMENTS

I would like to extend my sincere gratitude to all those who helped me through the dissertation period despite of the challenges I have experienced.

I would like to thank my supervisor Ms Nakate Sylvia for her commitment in giving guidance and encouragement that enabled me complete this course.

I would also like to thank my lecturers at Kampala International University for their support and encouragement.

My sincere thanks also go to my wife Winnie Tanui for her encouragement and understanding when I was busy working on the project. I also extend my thanks to the staff of Ngendaptich primary school for granting permission to work on the project.

I also wish to thank the respondents who participated in giving relevant information to the questions presented to them.

Last but not least my gratitude goes to my family members for the financial support which enabled to complete the project on time.

MAY GOD BLESS YOU ALL.

TABLE OF CONTENT

| | |
|--|----------|
| TABLE OF CONTENT..... | v |
| CHAPTER ONE..... | 1 |
| INRODUCTION | 1 |
| 1.0 Background of the study..... | 1 |
| 1.2 Purpose of the study | 2 |
| 1.3 Statement of the problem..... | 2 |
| 1.4 Research objectives | 2 |
| 1.4 Research Questions | 3 |
| 1.5 Significance of the study..... | 3 |
| 1.6 Justification | 3 |
| CHAPTER TWO..... | 4 |
| LITERATURE REVIEW | 4 |
| 2.0 Introduction..... | 4 |
| 2.1 Impact of FGM on academic performance of learners..... | 4 |
| 2.2 Strategies being used to stop FGM..... | 5 |
| CHAPTER THREE | 7 |
| RESEARCH METHODOLOGY..... | 7 |
| 3.0 Introduction..... | 7 |
| 3.1 Research Design | 7 |
| 3.2 Area of Study | 7 |
| 3.3 Study Population | 7 |
| 3.4 Sampling Design | 7 |
| 3.5 Data Collection Method..... | 7 |
| 3.6 Research Procedure | 8 |
| 3.7 Data Analysis and Presentation..... | 8 |
| 3.8 Limitation of the Study | 9 |

| | |
|-------------------|----|
| APPENDIX 1..... | 16 |
| TIME FRAME..... | 16 |
| APPENDIX 2..... | 17 |
| BUDGET..... | 17 |
| BIBLIOGRAPHY..... | 18 |

ABSTRACT

The purpose of the study was to examine the impact female genital mutilation and learner academic performance of learners. The objectives were to establish the relationship between FGM and academic performance of learners. The study also examined the strategies used to stop FGM.

The study used across –sectional survey design to analyze both quantitative and qualitative. The researcher collected data from 3 schools with a population of 200 respondents.

The researcher used a questionnaire instrument, observation and interview guide to collect data.

The findings indicated that majority of the learners are faced with the problem of FGM which greatly affected their academic performance. The findings also indicated that learners experiences FGM are emotionally affected, low commitment, poor attitude and poor academic.

The study recommended the government of Kenya to encourage sensitize of the people on the dangers FGM through education and training . The government should also encourage cultural leaders to participate in the fight against FGM

CHAPTER ONE

INTRODUCTION

1.0 Background of the study

Globally at least two million girls are at risk of female Circumcision / female Genital Mutilated (FC/FGM) and approximately 6,000 girls a day (Anika Rahma and Nahid Toubia). Nearly 85 – 144 million girls and women are genitally mutilated. This is happening mostly in Africa, a few in Asia and increasingly, there are more women in Europe, Canada and USA who suffer Female Genital Mutilation (FGM). (Anika and Toubia)

They experience pain, trauma and frequently severe physical complications such as bleeding, infection or even death. In African countries like Egypt, Sudan, Somalia, Uganda and Kenya practice FC/FGM. It has primarily been used as a rite of passage from childhood to womanhood.

In Kenya, most communities practice FC/FGM like the Masai, Kalenjin, Abaluhya, and Kuria among others. It involves women from social roles that is to say, it relates to superstition, religion, local customs, health practice, child bearing and sexual fulfillments (Anika and Toubia). FGM must be understood within an economic and social framework. The effort to stop it must concentrate on individuals and social identity on changing women's consciousness. Funding programs for the stop of FC/FGM must be similar to other campaigns such as malaria, polio, tuberculosis, HIV/AIDS and others. Each one of us should be part of this campaign to stop FC/FGM sine it is a violation of the women human rights and their sexuality (IAC, 1984)

In Shoal Zone Nakuru District, the story is no difficult. FC/FGM is the talks of the day come December of any year with a good harvest. It is popularly referred to as 'Cherugole'

meaning the dance performed during this occasion. It goes as far as bringing back who were married without undergoing the rite to do so, so as to qualify for woman hood.

The outcry for its stop can be back to the 20th century documented (Anika and Nahid). It has been received by the general human race with mixed reaction. For example, a bill in the Kenyan Parliament in 1996 was defeated which was to outlaw FC/FGM in Kenya.

FC/FGM is performed by traditional practitioner to meet her financial needs. However, the UN agencies succeeded to put the FC/FGM on the health human right agenda. In Africa, there has been formed IAC1984.

In Kenya even though the goal was defeated in 1996, political and church leaders are heard all over the country condemning the practice. The laws of Kenya support this in section 4 and other sections which criminalize grievous bodily harm.

1.2 Purpose of the study

The study seeks to examine the impact of FGM on girl's academic performance.

1.3 Statement of the problem

Female circumcision (FGM) is a violation of the women health human rights. Most of the girls who experience female genital mutilations are left traumatized which affects their academic performance.

1.4 Research objectives

1. To examine the impact of FGM on girl child academic performance.
2. Establish strategies that can help to stop FC/FGM on our girl/women.
3. To find out the opinions of girls/women on FC/FGM.
- 4.

1.4 Research Questions

1. What is the impact of FC/FGM on girl child academic performance
2. *What are the opinions of girls/women on FC/FGM?*
3. What are the strategies that can help in to stop this practice?

1.5 Significance of the study

The study will have the following significances

The study will help local leaders including church leaders have joined hands in condemning the same violation.

The study will help the government to address the issue of FGM and advocate towards stop.

This study is meant to establish the truth about the indirect impact on the practice in shaping the girls self image.

It is hoped that the findings made known to the residents of this area will help in changing peoples' feelings on the FC/FGM popularly referred to as "Soe" by the Turgen Kalenjin.

The study will also enable other scholars to get knowledge on FGM and its impact on academic performance of the learners .

1.6 Justification

FGM/FC is a violation of women health which is a human right and also a violation on the ir sexuality, apart from good name given to it as a rite of passage from girlhood to womanhood. Girls from Solai Zone Nakuru District are victims of this violation. This makes the drop out of school; others develop complication and at times die. The study therefore is vital as a step of establishing strategies to help the misinformed girls /women.

1.7 Scope of the study

Geographical Scope

The study was carried out in solai zone in Nakuru District

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

This chapter deals with review of literature related to Female genital Mutilation (FC/FGM).

2.1 Impact of FGM on academic performance of learners

Girls/women who undergo FC/FGM, experience pain; trauma; and severe physical complications such as *bleeding, infection and at times death* Long term physical complications are numerous and there appear to substantial psychological effects on women image and sexual lives (Nahid and Toubia, 1993)

FC/FGM is done to reduce women's sexual demands on her husband, to protect marital fidelity in the interest of the male sexuality. Therefore, FC/FGM comes from social pressure, fear if community judgment that is to say, men's refusal to marry uncircumcised girls (Anika and Toubia, 1993)

FC/FGM is an initiation to womanhood and to the tribe. Uncircumcised women can not be married. *FC/FGM makes vaginal intercourse more desirable than clitoral stimulation.* FC/FGM improves fertility and prevents maternal and infant mortality (Anika & Toubia)

FC/FGM is a health human right violation (UN Agencies). FC/FGM is violence against women. Rhadika Coomerwamy special reporter on violence against women 1994

Section 4, Laws of Kenya: Any harm which amount to maim or dangerously harm or seriously or permanently injures health or which is likely to injure health or which extends to permanent disfigurement or any permanent or serious injury to any extent or internal organ, membrane or sense causes grievous harm which is referred to in Section 234 of the Kenyan law

Those have not undergone FC? FGM are isolated by their peers either in play in their community (Toubia 1993)

Female circumcision had contributed significantly to high illiteracy among women in the district. It is practiced for rite of passage, social acceptability, marriage prospects, good tradition, cleanliness and faithfulness in marriage (MoH/GTZ, 2001)

FC is performed by a traditional practitioner and is carried out in groups. 27% of men in Koibatek, 14% mothers, 12% boys and 6% girls still feel that there is a difference between circumcised and uncircumcised girls while 78% GIRLS 72% BOYS, 60% fathers and 70% mothers feel there is no difference in the two groups (MoH/GTZ 2001)

The conclusions of MoH /GTZ 2001

- i. Education and religion have significant contribution towards attitudinal change of the practice
- ii. The alternative rites of passage for the district is not necessary
- iii. The funding neglected the assumption that FC stifles girl child's education in the district
- iv. Young people are more willing to abandon the practice as and are supported by parents
- v. The findings confirmed the assumption that community leaders would play a vital role in eliminating the practice

2.2 Strategies being used to stop FGM

- Given that FC is basically insignificant, there is no need for intervention
- The role of the local administration, religious leaders and parents as the spear headers of messages against FC should be strengthened through various for a within the context of community development
- There is need to analyze the features within the community that have contributed to the decline of the practice for replication in other districts with higher prevalence

- Given that Koibatek lies within fairly high FC prevalence (62%) there is every opportunity for resurgence. Therefore, there is need for rapid check of the prevalence after about three years
- Exchange visits for group /communities that still practice and are working on mechanisms for change should be encouraged

CHAPTER THREE

RESEARCH METHODOLOGY

3.0 Introduction

This chapter presents and describes the methods and techniques that will be used to collect and analyze data. It explains the Research design, Area of study, Study population, Sampling design, Data collection method/ Instrument, research procedure, data analysis and presentation and research. Finally, it describes the data collection procedures and data analysis techniques.

3.1 Research Design

The researcher used both quantitative and qualitative methods of data collection.

3.2 Area of Study

The study was carried out at Solai Zone Nakuru District Kenya. Respondents were school going children and the local people in the community.

3.3 Study Population

The population under study was comprised of 200 Respondents and this sample were selected from different schools and market places.

3.4 Sampling Design

The researcher used simple random selection technique in that whether one on probation or confirmed will be put into consideration. Respondents were identified depending on their willingness and availability to take part in the study. A sample of 30 respondents was selected from a population of 200.

3.5 Data Collection Method

Data was collected using both primary and secondary modalities where the primary methods were involved. In collecting relevant data for the study and reviewing the work of different researchers that had been done before.

The method/instrument will range from observation; interview which will be used in data collection where the researcher will ask questions and respondents from the selected areas answer; and self-administered questionnaire with both open and closed questions will be used where respondents answer questions to the best of their knowledge;

- Observation: Information will be gathered by looking at or observing people in their natural environment and recording the behaviors and how they perform FC/FGM. The researcher will play a role of a participant observer.
- Interview: Here the researcher will carry out a face-to-face interview with the respondents and this will be used especially with the local, church and political leaders within Shoal Zone Nakuru District. He will explain to the respondents why the study will be carried out and get a chance to interact with the respondents and in turn respondents will be able to ask probing questions relevant to the study.
- Questionnaires: The researcher will use pre-formulated sets of questions to which the respondents will record their answers. The questionnaires will be self-administered to the target respondents by the researcher. For respondents who were geographically scattered, questionnaires will help in saving time.

3.6 Research Procedure

The researcher obtained an introduction letter from Institute of Open and Long Distance Learning of Kampala International University seeking permission to allow the researcher to conduct this study; participants were guided in the process of filling the questionnaires and the researcher was available to provide clarifications on issues respondents do not understand.

3.7 Data Analysis and Presentation

Qualitative data was analyzed using the content analysis technique. Analysis of the qualitative data will be achieved through coding and editing of the responses into themes. Descriptive statistics such as mean, frequency, standard deviation and percentages were used in analyzing quantitative data that would then be presented in graphs and tables.

3.8 Limitation of the Study

The researcher is likely to be faced with the following limitations;

- a) *Inadequate information as a result of confidentiality; some respondents may have the tendency of not willing to give out information due to lack of trust on the side of the researcher or even failing to articulate issues.*
- b) Again limited source of information may come in away that people who had researched on specifically this area were few.
- c) Time; The fact that most of local people, church and political leaders are too busy this means that they might not have time for the researcher and his questions. The time frame set for submission of the report would not allow further review of other literature.
- d) Financial constraints; some responds may want to be paid in turn of their time and information they give to the researcher. Secondly, the study require financial resources to meet costs like; typing, printing, transport costs looking for information from the case study and different libraries, air time at internet cafes plus coordinating with the supervisor, among others and being a student these resources may not be readily available at the researcher's disposal.

CHAPTER FOUR
PRESENTATION AND ANALYSIS OF DATA

4.0 Introduction

This chapter was about the presentation and analysis of data related to the effects of *school drop out on academic performance of learners*.

A total of 30 respondents was selected which included both male and female from different departments of the district.

Table 1: Age of Respondents

| Age Group | Frequency (f_0) | Percentage (%) |
|-----------|---------------------|----------------|
| Above 20 | 6 | 20 |
| 20-15 | 5 | 17 |
| 15-10 | 15 | 50 |
| Below 10 | 4 | 13 |
| Total | 30 | 100 |

The data shows that the majority of the respondents studied were aged 15-10 with 50%. This implies learners majority of the learners are between upper and lower classes.

Table 2: Sex of Respondents

| Sex | Frequency (f_0) | Percentage (%) |
|--------|---------------------|----------------|
| Male | 20 | 80 |
| Female | 10 | 20 |
| Total | 30 | 100 |

The above table indicates that shows that majority of the respondents were males with 80% and males were (20%) which implies that due to FGM a few girls join schools hence affecting academic performance of the learners

Table 4: Class of learners

| Class education | Frequency (f_0) | Percentage (%) |
|-----------------|---------------------|----------------|
| Lower | 10 | 40% |
| Upper class | 20 | 60% |

Source; primary data from the field

The results in the table 4 revealed that the majority of the learners are in lower class with 40% and upper class with 60%. This implies that majority of the learners tend to drop out as they go to upper class mainly due to age factor.

Table 5. Duration in the school

| | Frequency (f_0) | Percentage (%) |
|--------------|---------------------|----------------|
| 1-2 | 4 | 15 |
| 3-5 | 6 | 18 |
| 6-7 | 5 | 17 |
| 8-10 | 15 | 50 |
| 11 and above | 0 | 0 |
| Total | 30 | 100% |

Source; primary data from the field

The findings indicate that majority of the learners have stayed between 8-10 years in school with 50% and other 3-5 with 18%. This implies that learners who join late are more like to spend a lot of time in school as compare to those who join early.

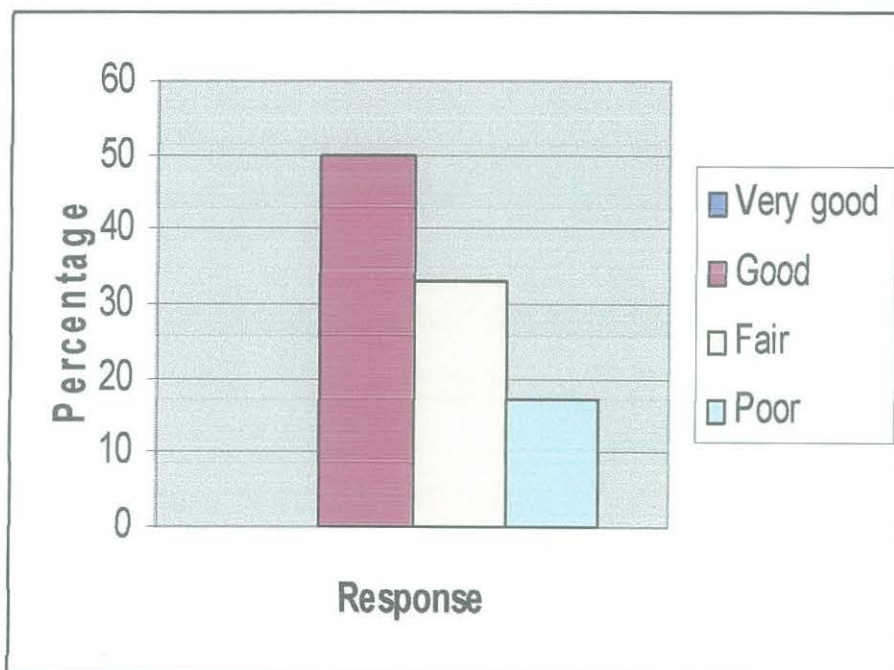
Table 6. Relationship between FGM and academic performance of learners

| Relationship between later entry and academic performance of learners. | Good | Fair | Poor | Total |
|--|------|------|------|-------|
| Frequency (f_0) | 15 | 10 | 5 | 30 |
| Percentage (%) | 50 | 33 | 17 | 100 |

Source: Field Survey.

The findings indicated that there is a positive relationship between FGM and academic performance. Majority of the respondents agreed that when learners drop out of school it can affect their concentration hence poor academic performance

Relationship between FGM and academic performance of learners



Source: Field Survey

Table 7 : The impact of FGM on academic performance of learners

| | Frequency | Total percentage |
|-----------------------|-----------|------------------|
| Emotional trauma | 5 | 17% |
| Early marriage | 4 | 13% |
| School dropout | 15 | 50% |
| Absenteeism at school | 6 | 20% |
| Total | 30 | 100% |

Source: Field Survey.

The result implies that majority of the respondent dropout of schools due to FGM with 50%. This implies that most learners who under through FGM are emotionally traumatized and engage in early marriages hence impacting on their academic performance.

Table 8 : strategies used to stop FGM

| | Frequency | Total percentage |
|--|-----------|------------------|
| Sensitization the public | 15 | 50% |
| Educating the communities and training | 6 | 20% |
| Using culture leaders to stop the practice | 4 | 13% |
| Condemning the practice | 5 | 17% |
| Total | 30 | 100% |

Source: Field Survey.

The result imply that the most common strategy used in stopping FGM is sensitizing the public on the dangers of the act and its long term impacts on the girls with 50%.

CHAPTER FIVE

DISCUSSION, CONCLUSION AND RECOMMENDATIONS

5.0 Introduction

This chapter presents conclusions got from previous findings, purpose and objectives of the study. This chapter also involves recommendations.

5.1 Discussion.

The impact FGM on academic performance of learners

THE Findings indicate that learners who experience FGM have experienced a negative impact on their academic performance (Table 7). This implies that when learners experience FGM they drop out of school their academic performance can be affected greatly. The impacts include: indiscipline, early pregnancy and emotional traumas which hinder learner's academic performance Schwartz (2003) also concur with the finding that FGM has a negative impact on learner's academic performance

Relationship between FGM and academic performance learners

The study found out that there is a strong relationship between school FGM and academic performance (Table 6) this implies that the more learners' dropout of school due to FGM which academic performance is affected. Schwart (2003) concur with the findings that there is positive correlation between FGM and learners academic performance . He argues that the more the students experience FGM the more performance is affected and the image of the school. He also urges that school FGM is associated with culture practice and society expectation on females

Strategies to stop FGM

The findings revealed that the major of the respondents argued the government to sensitize the public about the dangers of FGM and also educate the public through training

on ways of stopping FGM (Table, 8) this implies that majority of the people need to be argued to stop the practice including cultural leaders .

5.2 Recommendations.

Basing on the findings of the study, the following are recommended:

The government should sensitize the public on the dangers on FGM and its impact on the public.

The government to develop a curriculum to be taught at school.

The government should also encourage local leaders to participate in the fight against FGM in their communities.

The government to give workshops to sentize parents and teachers for behavioral change.

5.3 Conclusion.

The data collected by the researcher revealed school FGN has a major impact of academic performance of learners. These finding also revealed that young females have experienced FGM and found problems in school thus affecting academic performance of the learners

There was a positive correlation between FGM and academic performance of learners. *FGM affects self confidence and emotionally stability of the learners.*

Lastly, the major strategies used stop FGM includes sanitizing the public and educating on the dangerous of FGM including death of female, over breeding and discrimination in the society.

5.4 Areas for further studies

The study shall be widened to cover more on impact on female empowerment on academic performance of learners.