# EFFICAY OF *ASIL PO POKOT* RADIO PROGRAMME IN ANTI-FEMALE-CIRCUMCISION CAMPAIGN AMONG WOMEN IN KIPKOMO SUB-COUNTY, KENYA

BY

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# **DECLARATION**

I declare that this research project, is my original work that has not been submitted in whole or in
part to any other university for the award of a Masters of Arts degree in Communication and
Media Studies.
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This project was submitted for review with my permission as University Supervisor.
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## **DEDICATION**

This study was in memory of my late father Richard K. Daimoi a former exemplary hardworking teacher, who had a good focus on education excellence, academic standards and dreams for all his children.

I equally dedicate this study to my children Cheporiot, Ptoo, Cherotich and Chepkorir, who are personalities of the true self.

#### **ACKNOWLEDGEMENT**

I thank my family members sacrificed their modest finances to see me through my study. I am eternally grateful.

For this effort, I also thank my family, especially my wife, Rusina Daimoi, who holds a special place in my heart. When I was financially strained on multiple times, she stepped in to help me pay my bills.

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I'm also grateful to my coworkers and friends for putting up with me throughout this trying time by providing encouragement and support in developing this research project.

#### **ABSTRACT**

This study focuses on efficacy Pokot FM's Asil po Pokot radio programme as used in the communication campaign to end the practice of female circumcision in Kipkomo Sub- County, West Pokot County. Female circumcision is a tradition that is observed and practiced among the Pokot of Kenya. The current female circumcision prevalent rate in the County stands at 44% (KDHS, 2019) from 74% (KDHS, 2014). This has been occasioned by rhe efforts the Kenyan government together with other non state players. Despite the reduction in the prevalence rate of the "cut," it is still being practiced in many areas in the county due to traditional significance attached to it. Asil po Pokot radio is a cultural programme that aired by Pokot FM as part of an antifemale circumcision campaign, The study sought to establish the efficacyprogramme in ending female circumcision. The objectives of the study were to examine the efficay of Asil po Pokotradio programme in creating awareness of the implications of female circumcision among women in Kipkomo Sub-County; to determine the efficacy of Asil po Pokotradio programme in changing beliefs and attitudes against female circumcision among women in Kipkomo Sub-County, and to evaluate the effication of Asil po Pokot radio programme in eradicating female circumcision among women in Kipkomo Sub-County. The two theories that informed this research were Agenda Setting byMcCombs &Shaw (1972) and the Knowledge Atitude and Practice Model by Schwartz (1976). To collect data, a household-based systematic random walk sampling method was employed, with a sample size of 391 women. Data collection involved the use of questionnaires, Key informant interviews (KII) and Focus Group Discussion (FGDs). Both quantitative and qualitative data were analysed. The significance of this study contributes to communication, media, and health, particularly in terms of new policies, research scholarships, and treatments. The findings indicated that agood number of women found satisfaction in the anti-female circumcision campaign as they provided valuable insights into the the practice by ending of the 'cut' in favour of the "Alternative rite of passage", which aligns with the objectives of the stud. Thestudy recommends utilizing the Asil po Pokot radio programme and other existing forums such as; government NGOs, CBOs, Churches to providefree education to girls so that by the age of 18 years they are aware of their issues thus they can tmake informed decisions. The study shows that 87 % of the respondents are aware of female circumcision as a harmful practice, while 93% believed that 'cut' makes a woman complete or proud and 86% indicated willingness to subject their daughters to "Alternative rite of passage."

## TABLE OF CONTENTS

DECLARATIONii
DEDICATIONiii
ACKNOWLEDGEMENTS=iv
ABSTRACTv
ABBREVIATIONSix
LIST OF TABLESx
LIST OF FIGURES xi
CHAPTER ON: INTRODUCTION1
1.1 Background of the
1.1.1 FGM/Femalecircumcision
1.1.2 Pokot FMradio
1.1.3 Asil po Pokot radio programme
1.2 Statement of the Problem,,,,,,,9
1.3 Research questions
.1.4 Objectives of the Study
1.4.1 Overall objective
1.4.2 Specific Objectives
1.5 Significance of the Study
1.6 Theoretical Framework   11
1.6.1Agenda Setting Theory
1.6.2The KAP Model (Knowledge, Attitudes, and Practices)
CHAPTER TWO: LITERARATURE REVIEW14
Introduction14
2.1Efficacy of Radio in Creating Awareness of the Implications of Female Circumcision 14

2.2Efficacy of Radio in in Changing beliefsand Attitudes towards Female Circumcisio	17
2.3 Efficacy of Radio in Ending theFemale Circumcision.	20
CHAPTER THRE: RESEARCH METHODOLOGY	22
Introduction	22
3.1 Research Design	22
3.2 Area of Study	,23
3.3Study Population.	23
3.4 Sampling Procedure	24
3.4.1 Sample Size	24
3.4.2 Sampling Technique	25
3.5 Reliability and Validity	27
3.5.1 Reliability.	27
3.5.2 Validity	27
3.6 Data Collection Methods.	28
36.1 Questionnaire	28
3.6.2 Key Informant Interview (KII).	29
3.6.3 Focus Groups Discussion (FGDs)	30
3.7 Data Collection Instruments.	31
3.7.1 Questionnaire	31
3.7.2Interview Guide	32
3.7.3 Focus Group Discussion (FGDs)Guide	33
3.8 Data Analysis and Presentaion.	33
3.8.1 Quantitative Data	33
3.8.2 Qualitative Data	33
3.9 Ethical considerations	35
CHAPTER FOUR:RESULTS AND DISCUSSION	36
Introduction	36

4.1 Demographic Profile	36
4.1.1 Response Rate.	36
4.1.2 Respondents age	37
4.1.3 Respondents Educational Level	37
4.2 Anti-female Circumcision Messages in Creating Awareness	38
4.2.1 Listening toAsil po Pokot(Culture) Programme	40
4.2.2 Knowledge of Anti-Female Circumcision Messages	43
4.3 Attitudes and Beliefs towardsFemale Circumcision.	49
4.4 Ending of Female Circumcision Practic.	57
CHAPTER FIVE: SUMMARY, CONCLUSION AND RECOMMENDATION	63
Introduction.	,63
5.1 Summary to the findings	63
5.2 Conclusion.	64
5.3 Recommendations	65
5.4 Suggestions for Further Research.	66
REFERENCES	67
APPENDICES	70
APPENDIX 1: QUESTIONNAIRE	70
APPENDIX II: INTERVIEW GUIDE	74
APPENDIX III: FOCUS GROUP DISCUSSION GUIDE	75
ADDENDIY IV: NACOSTI DEDMIT	76

#### **ABBREVIATIONS**

AMARC - The World Association of Community Broadcasters (WACBC) is a non-profit organization committed to community radio and television.

CRAK - Kenya Community Radio Association

FGM - Female Genital Mutilation

FM - Modulation of Frequency

ICT - Information and Communication Technology

KDHS - Kenya Demographic and Health Survey

KII - Key informant Interview (KII)

KNBS - Kenya's National Bureau of Statistics.

KNCHR - Kenya's National Commission for Human Rights

NGOs - Non-Governmental Organizations

TPB - Theory of Planned Behaviour

UNESCO - United Nations for Education , Scientific and Cultural Organisation

UNFPA - United Nations For Population Activities

UNICEF - United Nations International Children's Education Fund

WHO - World Health Organisation

## LISTS OFTABLES

Table 3.1 Respondents Distribution by Location.	36
Table 4.1 Respondent age.	38
Table 4.2 Respondents Education Levels.	39
Table 4.3 Female circumcision is prohibited cultural practice	44
Table 4.4 Female circumcision is a harmful practice	46
Table 4.5 Female circumcision makes a woman complete or proud	48
Table 4.6 Female circumcision is outlawed by the government	49

## LIST OF FIGURES

Figure 4.1 Respondents listening to Asil po Pokot programme	41
Figure 4.2Female circumcision is prohibited cultural practice.	52
Figure 4.3 Female circumcision is a harmful practice.	53
Figure 4.4Female circumcision makes a woman complete or proud	55
Figure 4.5Female circumcision is outlawed by the government.	57
Figure 4.6 Willingness to subject a daughter to undergo female circumcision	59
Figure 4.7 Willingness to take a daughter to ''Alternative rite of passage''	61
Figure 4.8Willingness to end the female circumcision practice	63

#### **CHAPTER ONE**

#### INTRODUCTION

### 1.1 Background of the study

#### 1.1.1 FGM/Female circumcision

This study focuses *Asil po Pokot* radio programme of Pokot FM as part of a communication campaign tool to end the practice of female circumcision in Kipkomo Sub- County, West Pokot County. Female circumcision is a tradition that is observed and practiced among the Pokot of Kenya. Female circumcision worldwide, is commonly referred to as Female Genital Mutilation (FGM) and sometimes Female Genital Cutting (FGC) or modification depending on whether one lays their emphasis of its benefits mostly embedded in the rationale offered by the practicing communities or whether one is speaking about the demerits. Its reference to Female Genital Mutilation (FGM) has always taken the position due to the public health demerits. In regard to this, Female genital mutilation comprises all procedures involving partial or total removal of the external female genitalia or other injuries to the female genital organs for non-medical reasons (WHO, UNICEF, UNFPA, 1997).

From the public health point of view, FGM/female circumcision has no known health benefits and brings harm and grave pain to girls and women; It damages normal female genital tissues and interferes with its natural functioning. FGM/female circumcision is reported to be at 27.2% in Kenya and 44% in West Pokot County (KDHS, 2019). According to KDHS (2008-2009) the female circumcision prevalent rate in the County was at 96% and went down to 74% KDHS (2014). Some of the factors that have attributed to the decrease of this prevalence is due to the concerted efforts by the *Asil po Pokot* radio programme and other agencies to discourage the practice that is thought to be deeply rooted in Pokotculture as a rite of passage for the females and also a sense of community belonging, leading to its persistence.

FGM, also known as female circumcision, is a global socio-cultural concern that impacts various societies. As per the UNFPA-UNICEF (2020) report, approximately 432 million girls worldwide are in danger of experiencing FGM. Statistics indicate that there could be up to 2 million instances of FGM, carried out by both traditional practitioners and healthcare providers, highlighting a disturbing pattern of female circumcision.

Nevertheless, over 200 million girls and women currently living have undergone FGM in 30 nations across Africa, the Middle East, and Asia where this practice is prevalentFGM/female circumcision, is practiced on girls and women from infancy up to the age of 15. It is a clear violation of the human rights of females. The cost of treating health complications resulting from female genital mutilation is estimated to be around US\$ 1.4 billion annually for health systems, a figure that is likely to increase unless immediate action is taken to eradicate this practice. Various African countries where female genital mutilation is prevalent include Kenya, Benin, Burkina Faso, Cameroon, Central African Republic, Chad, Cote d'Ivoire, Democratic Republic of Congo, Djibouti, Egypt, Eritrea, Ethiopia, Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Malawi, Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone, Somalia, South Africa, South Sudan, Sudan, Tanzania, Togo, Uganda, Zambia, and Zimbabwe (WHO, 2016).

In Kenya, recent reports from KDHS (2014) and UNICEF (2016) indicate that the prevalence of female circumcision/FGM among Kenyan women aged 12-49 stands at 21%..FGM/female circumcision omprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. The practice has no health benefits for girls and women and cause severe bleeding and problems urinating, and later cysts, infections, as well as complications in childbirth and increased risk of newborn deaths. (UNFPA-UNICEF, 2020),

FGM/female circumcision is widely acknowledged as a violation of the human rights of girls and women on an international level. It represents a deeply ingrained inequality between genders and serves as an extreme form of discrimination against females. Typically, this practice is conducted by traditional practitioners on underage individuals, thereby infringing upon the rights of children. Moreover, it infringes upon an individual's rights to health, security, and physical well-being. It also violates the right to be free from torture and cruel, inhuman, or degrading treatment, and in cases where the procedure leads to death, it encroaches upon the right to life(UNFPA-UNICEF, 2020),

In certain contexts, there is evidence indicating an increased involvement of healthcare providers in performing FGM/female circumcision due to the misguided belief that medicalizing the procedure makes it safer. The (WHO, 2016) strongly urges healthcare providers to refrain from carrying out FGM/female circumcision and has developed a comprehensive global strategy and specific resources to assist healthcare providers in combating medicalization (WHO, 2016),

#### **1.1.2 Pokot FM**

Pokot FM is a public (State) owned by the government of Kenya that was launched in 1989 in Kisumu town to serve the people of West Pokot County. The radio uses the Pokot language and it's main agenda is to inform, educate and entertain the members of society. The radio station airs its programmes on Mondays to Fridays as from 6.am to 10am each week. Among the programmes aired by Pokot FM focus on: culture, health, Agriculture, women empowerment, children, youth, businesss, drugs among others. The use of the first language of the population is crucial. Public radio stations have gained popularity across Kenya and Africa due to their ability to connect emotionally with listeners in a way that other stations cannot. By communicating in the listeners' own language and reflecting their culture, these stations have become effective tools in addressing important issues such as the fight against female circumcision, especially when community meetings are not possible. (Media Council of Kenya, 2011).

According to UNFPA-UNICEF (2020)report on radio, there are more than 20,000 radio stations in the world amd more than 2 billion radio receivers, unlike television or print media and other sophisticated technology, radio is in constant expansion. It's waves reachalmost every corner of the planet. It is the prime electronic medium of the poor because it leaps the barriers of isolation and illetracy and is most affordable electronic medium for broadcasts. **Communications Authority of Kenya** (CA) shows that Kenya has 227 radio stations; One State radio, Kenya Broadcasting Corporation (KBC) with 19 radio FM branches 172 commercial stations, 55 community stations. This is an increase of more than 100% compared to a decade ago, and certainly an incommensurable.

Public radio stations like Pokot FM serve as both entertainment outlets and platforms for promoting cultural values and ideologies through their content. The radio programmes that are broadcasted are deemed to have a positive efficacy and influence on their communities and the nation as a whole. (Media Council of Kenya, 2011).

The researcher purposively sampled the Pokot FM station in Kenya to serve as a platform to air and propagate issues of anti-female circumcision in Kipkomo Sub-County which was also purposively selected due to prevalence of the practice of female circumcision. The FM also airs various programmes such as culture, health, agriculture, business, and religion which are aired as from Monday to Friday between 6am to 10am. *Asil po Pokot* programme is a cultural programme that is aired on every Tuesday as from 8,45am to 9.00am.

It focuses mailny on Pokot cultures and traditions, however, in this circumstances it addresses issues related to cultures which are seen and observed by the community as retrogressive such as; female circumcision, cattle rustling and provides a space for public discourse. The themes that the These programmes are interactive and it encourages audience participation through call-ins, SMS, and social media platforms like Facebook, Twitter. Some of these programmes are recorded for future references (Media Council of Kenya, 2011).

According to the Media Council of Kenya (2011), public radio has expanded the democratic space and the freedoms enjoyed by the masses. It is now being utilized as an advocacy and campaign tool to shape public opinion. Radio is considered a powerful medium for disseminating information and raising awareness, as exemplified by programs aimed at preventing female circumcision. These initiatives have the potential to influence social norms, public perception, and behaviour, thereby exerting indirect pressure on local community leaders and legislators to combat the practice. Consequently, radio holds the capacity to iinfluence decision-makers.

## 1.1.3 Asil po Pokot radio programme

Asil po Pokot radio programme is part of a cultural programme that is designed to propagate, to inform, educate and impart knowledge to Pokot community on the concerns of female circumcision which been consired by scholars and the elites as a harmful practice that has no health benefits to the victims who are girls and women. The study sought to establish the efficacy of Asil po Pokot programme in ending female circumcision.

It is aired by Pokot FM which also plays a significant role in creating awareness, shaping and modifying baeliefs and attitudes regarding certain practices and norms in the community as its persuasive in nature. It also forms positive opinion sthrough discouraging practices which are retrogressive tsuch as; FGM/female circumcision and cattle rustling among others. *Asil po Pokot* radio programme through Pokot FMserves as an advocacy platform thatinform and educate the Pokot community about issues female circumcisionespecially onit's effects, implications and consequences which include excessive bleeding leading to potential fatalities, childbirth and labour complications, infections like HIV/AIDS, and sexual difficulties. By encouraging individuals to refrain from this practice, the programme aims to address these issues. Despite resistance from traditional male-dominated cultural norms, efforts are being made to combat female circumcision within the community (UNICEF, 2017).

Asil po Pokot radio programme engages the public on female circumcision as aharmful cultural practice and outlawed by government. It also promotes "alternative rite of passage" as a strategy to end the harmful "cut". The programme enables and empowers the women and the community, to make informed decisions infostering a strong sense of self-determination. This is also achieved by leveraging oral traditions, such as impactful songs addressing the consequences of female circumcision, which deeply resonate with people. Moreover, listening to the radio is a communal activity that encourages post-broadcast discussions on various topics, including health talks,, education, agriculture, religious and more.

Pokot FM is invaluable in promoting participation, facilitating the expression of opinions, and fostering the development of knowledge, skills, health and cultural awareness through the Asil po Pokot programme. They serve as a platform for expanding community engagement and addressing the specific needs.. The findings revealed divergent opinions. While some women favoured the practice, others opposed the government and NGOs' intervention measures. Interestingly, the study also highlighted that female circumcision continues to persist in secret, despite these interventions,. In light of these findings, the study recommends a collaborative approach between the Asil po Pokot radio programme, government and NGOs to design long-term interventions that are culturally sensitive to the Pokot community. This could involve utilizing Pokot FM radio existing forums like the elders barazas to provide free education to girls.

Additionally, establishing boarding schools in the region for girls, with a focus on delaying circumcision until the age of 18, would enable them to make informed decisions about the practice. By implementing these measures, it is hoped that the Pokot community can progress towards a more informed and empowered future. Various factors such as religious affiliations, ethnicity, employment status, level of education, and economic status contribute to **the** prevalence and type of FGM/female circumcision. Efforts to eradicate this practice in sub-Saharan Africa have a long history, dating back to colonial times. These initiatives have been driven by different motivations and have utilized a range of strategies, including human rights frameworks, health risk assessments, training health workers as advocates for change, and comprehensive social development approaches (UNICEF, 2017).

The initial efforts to combat female circumcision were led by Protestant Christian Missionaries, with other organizations like Maendeleo Ya Wanawake Organization (MYWO) later joining the cause through communication-based social change programmes Almost everywhere, female circumcisionis linked to fear and control of female sexuality. So many reasons are given; sometimes they hide behind culture, sometimes behind religion. It's all about controlling women. Female circumcision persists for various reasons, including cultural and economic factors that make it difficult for girls, women and communities to stop the practice. But it cannot forever withstand the voices of survivors mobilizing to change beliefs (KDHS, 2014).. According to UNICEF (2017), the Pokot community places great importance on the ritual of female circumcision, a tradition that has been ongoing for generations without questioning its origins or significance. The cultural practice is backstretched by men who prefer to marry circumcised women and elders who are custodian of the cultural practice and supporting the 'cut.'

The values and significance of this practice are said to range from the practice being a requirement for marriage, rite of passage from childhood to adulthood, equals to male circumcision, act as a mark of ethnic identification and making agirl become mature responsible woman who can be respected and listened to in the community among other values. further cited, marriage as one of the main reasons why girls and families of Pokot community still prefer female circumcision, saying that no one asks for a hand in marriage to a woman who has not undergone female circumcision (UNICEF, 2017).

It is a common belief among Pokot men that marrying circumcised women is preferable, as they view uncircumcised women as immature and lacking bravery for not enduring the pain of circumcision. Consequently, many families and girls continue to uphold this practice. According to a report by the Kiletat women group in 1991, the purpose of female genital cutting in the Pokot community is to ensure that a woman is accepted as a full-fledged member of the community and is seen as a mature woman rather than a child. The Pokot ethnic group also places great value on female circumcision as a rite of passage that signifies the transition from childhood to adulthood for girls (Kiletat Women group, 1991). They emphasize that until a woman undergoes female circumcision, regardless of her age, she will still be perceived as a child. Within the community, FGM/female circumcision is seen as a demonstration of bravery in a girl or woman, which is highly esteemed. Parents take great pride in their daughters who undergo the procedure without crying, as it reflects positively on their family (UNICEF, 2017).

In recognition of this achievement, initiates are often rewarded with gifts such as cows, goats, or money. FGM/female circumcision has a huge impact on girls and women social standing and identity. In particular, the girls and women are directed in this manner. The initiatives attempts to prioritize the needs and goals of mothers, daughters, dads, husbands, and other relatives in the community. Given the prominent role that FGM/female circumcision plays in the study community, one of the programmes primary success criteria is the development of culturally suitable alternative rites of passage. Despite the discomfort associated with female circumcision, some Pokot girls and women willingly undergo the procedure with the belief that it is a necessary preparation for the pain of childbirth. The cultural practice dictates that during the cutting process, the individual must remain silent to avoid bringing shame upon her family, particularly her father. (Abusharaf, 2006).

This act of silence is seen as a test of the girl's courage and ability to endure pain, which will then be applied during labor. Additionally, female circumcision is believed to decrease sexual desire, encourage virginity and fidelity in marriage, as stated by various African communities, including the Pokot (FORWARD UK, 2007).

This is also an opportunity to commend them for their courage during the initiation process, as they displayed no signs of distress or vocalized any complaints, thus demonstrating their bravery. Pokot community regards female circumcision as a significant event in a girl or woman's life, and the entire family recognizes it as a cultural identifier. Female circumcision is believed to enhance a woman's facial beauty and attractiveness to her husband, while also bringing about good health and feminine elegance. It is seen as a means to maintain a strong bond between a couple, as it diminishes women's sexual desires, which is perceived as a positive outcome by proponents of the practice(FORWARD UK, 2007).

Additionally, it is believed that female circumcision prevents girls and women from engaging in immoral behavior, promoting virtuousness. It is commonly held that girls who do not undergo this procedure are considered "impure" and possess a lower social status, consequently reducing their chances of marriage (UNICEF, 2017).

Kenya Children's Act of 2001 passed legislation that prohibits FGM/female circumcision as illegal in Kenya. The Act of Parliament in 2011, known as the FGM/female circumcision Act, was established to prohibit the harmful practice of FGM/female circumcision and protect individuals from any violation of their mental or physical well-being.

The Kenyan government first took steps to eliminate FGM/female circumcision back in 1983 when the President issued a decree against it. This Act criminalizes the practice of FGM/female circumcision and stipulates that anyone found guilty of causing death through this practice will face life imprisonment. Additionally, the Act prohibits taking someone for FGM/female circumcision, as well as aiding or abetting in the act.

Despite these laws, enforcement has been lacking, resulting in only a few arrests of those who continue to violate them. Due to a lack of enforcement, however, these restrictions have only resulted in a few arrests of persons who continue to violate them(Kenyan Laws, 2001). Over the years, a number of international, national, and community-based organizations and their projects have worked to eradicate female circumcision. For example, World Vision, by their slogan ''Kick out FGM of Pokot Land'' (''ketyara mutate tipin ompo korenyo'') and Maendeleo Ya Wanawake slogan, ('ketegha rotwo'') embraced an ''Alternative rite of passage'' among the girls (GTZ, 2009).

As per the Constitution of Kenya (2010), the Bill of Rights prohibits violence against women and harmful practices, including FGM/female circumcision. The FGM/female circumcision Act of 2011 operationalizes and institutionalizes non-discrimination in relation to this harmful practice. In 2015, the National policy urged the government to take concrete actions to encourage the abandonment of FGM/female circumcision through legislation, public education, and media campaigns, among other initiatives by anti-FGM/female circumcision organizations to raise awareness about the dangers and negative effects of FGM/female circumcision in Kenya (Kenyan Laws, 2001).

Asil po Pokot radio programmethrough Pokot FMaddressed on several concerns issuesof the effects, consequences and implications of female circumcision by engaging exeperts from NGOs such as; World Vision, Red Cross Kenya, and faith-based organizations like the Evangelical Lutheran Churches of Kenya and Anglican Churches of Keny and Kiletat Women Groupwho have been forefront to eradicate the practice in Pokot community.iDespite these interventions, progress in reducing the practice still the female circumcisionis practised. However, there has been some change in creating awareness, beliefs and attitudes among the girls who have willingly embraced the ''Alternative rite ofpassage'', thanks to the introduction of media, particularly the Pokot FM radio, which has aired campaigns against female circumcision.

As a result of these initiatives, the harmful effects of female circumcision are now widely recognized The findings also indicated that agood number of women found satisfaction in the anti-female circumcision campaign programmes, as they provided valuable insights into the consequences of the practice. There is hope that over time, these programmes may contribute to the ending of female circumcision in favour of the "Alternative rite of passage", which aligns with the objectives of the study. The significance of this study is geared at promoting the health of the Pokot women and girls. This is because the results from this study can be used to design Pokot culture-friendly orculture-sensitive interventions that could reduce the practice of female circumcision and health promotion strategies that put into consideration the Pokot culture and bring about the desired behaviour change to reduce the prevalence of female circumcision in West Pokot County. It also highlights the potential benefits of media use that guide the development of evidence-based guidelines in the community (UNICEF, 2017). The study recommends utilizing the *Asil po Pokot* radio programme and other existing forums such as; government NGOs, CBOs, Churches to provide free education to girls so that by the age of 18 years they are aware of theissues affecting them so they can tmake informed decisions.

#### 1.2 Statement of the Problem

Asil po Pokot radioprogrammeof Pokot FM playsa crucial role in anti-femalecircumcision camaaign in creating awareness, shaping beliefs and attitudes, and fostering relationships by influencing behaviour change. The programme is seen as a valuable tool for increasing public awareness, promoting participation and idea-sharing, and enhancing cultural and social knowledge. The Asil po Pokot programme is an exemplary initiative in the fight against female circumcision. It discourages girls and women from practicing therite, which has been widely condemned by scholars and human rights activists for violating and discriminating against their rights. Despite earlier interventions by government, NGOs, CBOs, and Faith-based organizations efforts to eradicate ifemale circumcision, the practice is still practiced in the study areadue to the belief of community's deeply rooted culture which is seen by the community as a symbol of community identity and belonging. Consequently, this study aims to asses the efficacy of the Asil po Pokotradio programme on the anti-female circumcision campaign among women in Kipkomo Sub-County. The Pokot FM's Asil po pokot programme and Kipkomo Sub-County in West Pokot were picked for this study because no other concrete studies have been so far undertakenon such a cultural programme and FGM among women populacein the study area.

## 1.3 Research questions

- **i.** What is the efficacy of *Asil po Pokot* radio programme in creating awareness on the implications of female circumcision?
- **ii.** What is the efficacy of *Asil po Pokot* programme in changing beliefs and attitudes against female circumcision?
- **iii.** What is the efficacy of *Asil po Pokot* programme in ending the female circumcision?

## 1.4 Objectives of the Study

## 1.4.1 Overall objective

To establish the efficacy of *Asil po Pokot* radioprogramme in anti-female circumcision campaign among women in Kipkomo Sub-County

## 1.4.2 Specific Objectives

- i. To examine the efficacy of *Asil po Pokot* programme in creating awareness of the implications of female circumcision among women in Kipkomo Sub County.
- ii. To determine the efficacy of *Asil po Pokot* programme in changing beliefs and attitudes against female circumcisionamong women in Kipkomo Sub County.
- iii. To evaluate the efficacy of *Asil po Pokot* programme in ending female circumcision among women in Kipkomo Sub County.

## 1.5 Significance of the Study

The research contributes knowledge in the fields of communication, media, and health by demonstrating how radio can effectively address deeply ingrained cultural beliefs and practices, such as female circumcision, which pose health risksto girls and women. The study aims to connform to policies, scholarships, and interventions that promote healthy behaviour among the general public by government agencies and non-governmental organizations (NGOs).

Additionally, this study explores the factors that moderate the relationship between social media use and health by increasing the availability of healthcare data and utilizing advanced machine learning algorithms, this research has the potential to revolutionize the healthcare industry, improving diagnosis, treatment, and patient outcomes. The significance of this study is geared at promoting the health of the Pokot women and girls. This is because the results from this study can be used to design Pokot culture-friendly orculture-sensitive interventions that could reduce the practice of female genital cutting in WestPokot County.

Again, the results obtained from this study may be used to design health promotion strategies that put into consideration the Pokot culture and bring about the desired behaviour change to reduce the prevalence of female circumcision. It also highlights the potential benefits of media use that guide the development of evidence-based guidelines in the community. It also enhances the applicability of communication and healthcare techniques, such as Universal Health Care data, which can have broader applications in other industries or fields of research

#### 1.6 Theoretical Framework

## 1.6. 1 Agenda Setting Theory

Agenda setting is the idea that the media shapes public perceptions to determine the importance of topics on the public agenda. McCombs and Shaw introduced this concept in 1972. News plays a crucial role in moulding political reality. The news media aims to raise public awareness and emphasize important issues by setting the agenda. Agenda-setting also involves the media's efforts to influence viewers and control the news. Mass communication is presenting information to large segments of the population through various media channels. Agenda-setting theory is one aspect of mass communication that determines what news is important and deemed worthy of public attention. The concept of Agenda setting is that the media influences public perceptions to establish the importance of topics on the public agenda. McCombs and Shaw first introduced this idea in 1972. News plays a critical role in shaping political reality. The news media strives to boost public awareness and highlight important matters by setting the agenda. Agenda-setting also encompasses the media's attempts to sway viewers and manage the news.

One of the primary strengths of the agenda-setting theory is its recognition of the media's power to shape public opinion. By choosing which stories to cover and how to present them, media outlets can emphasize specific issues, influencing what the audience perceives as significant and relevant.

This insight highlights the vital role of media in democratic societies and sparks discussions about media responsibility. However, critics argue that the agenda-setting theory oversimplifies the media's influence on public opinion. While the theory emphasizes the media's role in shaping what people think about, it may downplay the complex interplay of personal beliefs, experiences, and other factors that shape individuals' attitudes and perceptions.

The Agenda setting theory assists the researcher and the audience to participate themes that are informative, educative and interractive that are projected. by experts on health concerns, law, education, religion among other aspects by the *Asil po Pokot* radio programme through Pokot FM. These programmes especially the secondary source when repeat now and then may influence the audience thinking creating an understanding and awareness on their part. It is likely that audience apply a significant amount of focus and thought to the programme and the issues it covers. They may be more likely to discuss the issues with family members and friends.

### 1.6.2The KAP Model (Knowledge, Attitudes, and Practices)

The Knowledge, Attitudes, and Practices (KAP) model theory by Schwartz (1976) is a framework used to assess and understand individuals' knowledge, attitudes, and behaviors related to a specific topic. According to the KAP model, human behavioural change is attained through the acquisition of the correct knowledge, generation of attitudes, and adoption of behaviours in three sequential processes. Knowledge, Attitudes, and acceptance of Practices are key ingredients of behavioural change models. Knowledge is the understanding of the information, which is the conscious and non-symbolic perception of meaning. The four categories of knowledge include: scientific and social scientific knowledge, local knowledge, tacit knowledge, and self-reflective knowledge. Attitude is a positive or negative evaluation of an objective.. Practice refers to regular activities that are influenced by widely shared social norms and beliefs (Huang, 2019). The processes of this model was developed from Social-Learning-theory (SL) and Diffusion of innovation (DOF) theories. It refers that the given members of a social system would select the various innovations through four stages: Knowledge acquisition, persuasion, decision, and confirmation over time (Huang, 2019).

The aim of KAP model theory for the knowledge, attitudes, and practices reelatioship was characterized by the use of the structured, standardized questionnaire completed by a target population that can quantify and analyse what is known (knowledge), believed (attitudes), and done (practices) with regard to a topic of interest (Nguyen et al., 2019).

Similarly, the model data helps in identification of knowledge gaps, practices patterns and attitudes barriers that facilitate understanding and actions on a particular issue The goal of education is to inform personal concept of value. The role is to educate on morals and life education directly contributing to an increase for the value formation It is here that value entanglements and value judgments are attained. Similarly, this is also in line. KAP theory addresses objective, one, two and three. That is creating awareness (knowledge), changing and beliefs and sattitudes and acceptance to end the practice (Nguyen et al., 2019).

The tenets of the two theories; Agenda setting and KAP model theory theory are used to inform the objectives of the study in creating awareness, changing beliefs and attitudes and how *Asil po Pokot radio* programme informs the peoples' responses on on the issues concerning female circumcision and how to end the practice.

#### **CHAPTER TWO**

#### LITERATURE REVIEW

#### Introduction

This section provides an overview of the existing literature regarding the influence of radio in combatting female circumcision. It also examines the contributions made by different scholars and organizations in reducing the prevalence of this practice, with a specific emphasis on its social, health, and human rights implications as informed by the objectives and theories of this study. Additionally, it explores the effects of the *Asil po Pokot* programme in enhancing awareness about the consequences of FGM/female circumcision, altering cultural beliefs and attitudes towards the practice, and implementing interventions to eliminate it.

## 2.1 Radio programme in Creating Awareness of the implications of Female Circumcision

Asil po Pokot radio programmeand educational campaigns play a crucial role in raising awareness and promoting behavioral change tailored to individuals. It is essential for participants not only to be motivated and committed to ending and preventing female circumcision but also to understand the different stages of behavioral change (initial, improvement, maintenance). Participants must be informed about the consequences of FGM/female circumcision and be equipped with behavior change techniques. In order to effectively maintain behavioural changes and create awareness (Bandura, 1982),

According to Bandura (1982), it is important to focus on self-efficacy, a key component of social cognition theory These strategies can be integrated into programmes to assist individuals in changing their habits more successfully. Self-efficacy plays a significant role in determining whether individuals will change their behaviour, as they are unlikely to do so unless they believe they can achieve positive outcomes through their actions (initial stage. According to Leventhal (1970), communication plays a crucial role in influencing behaviour when participants exchange knowledge and communicators enhance comprehension. emphasize the significance of mass media in the effectiveness of communication campaigns and their impact on anti-social and cultural issues.

In 1999 World Health Organization, the United Nations, and UNICEF collaborated to launch a series of radio programmes to raise awareness about FGM/female circumcision and work towards its eradication. Four key approaches were utilized in these efforts, including bodily and sexual integrity, human rights, legislation, and health approaches. The WHO (1999) recommended the implementation of behavioural change strategies to make progress in eliminating FGM/female circumcision, as previous efforts have had limited success in reducing its prevalence.

The recommendation includes educating individuals about the consequences of FGM/female circumcision and creating a safe space for participants to discuss their perspectives and aspirations regarding the practice. As a result of increased awareness about the harmful effects of the procedure among parents and girls, the practice has declined in local communities. While communication efforts have been successful in raising awareness about the risks associated with FGM/female circumcision, they have not been as effective in bringing about the necessary attitude shift to end the practiceWHO (1999).

The government, NGOs, CBOs such as Maendeleo Ya Wanawake organization, and Faith-based organizations have jointly launched programmes to combat the practice of female circumcision. These organizations have engaged in grassroots lobbying efforts with political leaders, policymakers, and the radio at the national level. Their programmes were designed to raise awareness about female circumcision, which not only violates the rights of girls and women but also risks to their health(Wabwire, 2013).

According to Wabwire (2013), radio campaigns are commonly used to disseminate messages to large audiences, resulting in passive exposure to such communications. Challenges like cultural taboos, deeply rooted social norms, and behaviour driven by addiction or habit are often encountered in these campaigns. The impact of radio broadcasts on female circumcision in relation to other risky health behaviours is significant. A radio campaign can either promote positive changes in health-related behaviors or prevent negative changes in large populations. Through scheduled programs or supportive policy adjustments, a radio campaign can effectively reach a broad audience. Another advantage of radio broadcasts is their ability to deliver clear, behavior-focused messages to large audiences consistently and over time. This has the potential to influence individuals' attitudes, behaviors, self-efficacy, and empowerment.

Previous studies have demonstrated that combining behaviour modification strategies with social mobilization and advocacy initiatives, which are evaluated against programme objectives, yields better results. Vernacular radio has been effectively utilized by various organizations to address and discuss issues specific to their circumstances. Particularly, minority groups have found solace in the skills offered by public radio after being marginalized by mainstream media. Radio plays a crucial role in enhancing awareness, understanding, and participation among the target audience. It also serves as a platform for transmitting and promoting the retrogressive traditions and values of the community. Consequently, it is imperative to encourage and empower communities to collaborate in finding their own solutions to eradicate female circumcision (Wabwire, 2013).

This is achieved by tailoringradio programmeto suit the personality and character of specific communities, utilizing locally sourced content. One of the key factors contributing to the success of radio programmes is the development of culturally acceptable alternative rites of passage (Abusharaf, 2006). This is particularly relevant as female circumcision is deeply rooted in the cultures under investigation. He notes that the acceptance of this alternative rite has been limited because it did not originate within the female circumcision community. (Wabwire, 2013).

Asil po Pokot radio programme through the Pokot FM radio, aims to create awareness about the implications of female circumcision within the community. These programmes are coordinated in the campaign that involves also various stakeholders such as government agencies, NGOs, CBOs like Maendeleo Ya Wanawke, and faith-based organizations. For instance, World Vision promotes their slogan "Stop FGM/female circumcision in Pokot Land" (ketyara mutate tipin ompo korenyo), while Maendeleo Wanawake advocates for "Stop the knife" (Ketegha rotwo), both aiming to end the practice and promote alternative rites of passage for girls and women (UNICEF, 2010).

These radio programmes also educate individuals about the effects of female circumcision, allowing them to make informed decisions about whether or not to undergo the procedure. However, despite some women being aware of the detrimental effects of female circumcision, It is noted that resistance to ending the practice is often due to the perception of losing status and protection. Female circumcision is often driven by beliefs about proper sexual behaviour, linking the procedure to premarital virginity and marital faithfulness WHO (2017).

## 2.2 Radio programme in changing Beliefs and Attitudes against Female Circumcision

According to Alberracin, Dolores, Shavitt, Sharon (2018), understanding people's thoughts and feelings about something can often predict their behaviour. However, it may be surprising to learn that our actions can also influence our ideas and feelings. This is because our feelings and opinions about a product, for example, can impact how we behave. Interestingly, when we engage in an activity that we initially didn't want to do, our ideas and feelings about that activity are likely to change. people have a strong need to understand why they and others behave the way they do. By doing so, we can fulfill important goals such as caring for others and ourselves. Understanding the causes of behaviour allows us to avoid harm from others and encourage positive relationships.

Additionally, if we are aware of the reasons behind our own behaviour, we can better align it with our goals and plans. Approval or disapproval can indicate our feelings, beliefs, or opinions about something. Behaviour refers to the actions or reactions that occur in response to events or internal cues. While behaviors often reflect pre-existing beliefs and attitudes, this is not always the case. For instance, a person who strongly believes in abstinence before marriage may choose to remain a virgin until their wedding night. However, societal norms can sometimes influence individuals to engage in premarital sex despite their convictions. Approval or disapproval can indicate our feelings, beliefs, or opinions about something. In theory, actions based on a positive attitude should result in well-adjusted behaviour. However, there are instances where a positive mindset can lead to undesired behavior (Alberracin, Dolores, Shavitt, Sharon, 2018).

Festinger (1957), viewed attitude modification as a form of learning during his research on attitudes suggested that attitudes are acquired and altered through the learning process. This approach has been suggested as a strategy for combating FGM/female circumcision and promoting community mobilization to end the practice. In the context of anti-FGM/female circumcision campaigns, social marketing and cognitive-behavioural psychology are utilized to influence behaviour by promoting positive attitudes towards ending the practice. Social marketing seeks to shape behavior by promoting certain attitudes and beliefs.

Women who have not undergone circumcision often face the harsh judgment of being considered outsiders and immoral. This not only affects the woman herself but also her entire family, as they experience stigmatization and a loss of social standing. The pressure on parents to conform to the practice of cutting their daughters' hair as part of the initiation process is immense. Failing to comply with this tradition can lead to serious social consequences, including a decrease in prestige, limited marriage prospects for their daughters, social isolation, and more highlights that female circumcision is deeply rooted in Pokot traditions and plays a significant role in determining the social status of women and their familiesUNICEF (2017),

The ability of individuals and families to withstand such pressures and challenge tradition is influenced by their social status and exposure to diverse social environments. However, not all groups are equally open to changing their views on female circumcision. Beliefs and attitudes are shaped by social structures and reflect one's position within them. Consequently, gender perspectives, particularly regarding female circumcision, are closely tied to women's social standing. The more empowered women are, the more likely they are to adopt a "modern" or "Western" approach to these challenges, which can result in a loss of status and stigmatization for the entire family, not just the daughter. Due to the association between female circumcision and women's social status, there are significant societal pressures to conform to the belief that it is an inherent part of every woman's life (UNICEF, 2017).

Radio serves as a powerful tool in combating FGM/female circumcision, particularly in campaigns against violence towards women, but the messaging must be appropriate. Consequently, community radio can play a crucial role in anti-FGM/female circumcision campaigns, contributing to the eradication of the practice. However, deeply rooted beliefs and attitudes linked to FGM/female circumcision persist, as it is often viewed as essential for a girl's full growth and readiness for marriage. Defying this practice can lead to social ostracism, shame, stigma, and challenges in finding a spouse, especially in communities where FGM/female circumcision is prevalent. This sheds light on why certain cultures continue to uphold FGM despite its associated dangers. In many societies, FGM/female circumcision is believed to diminish a woman's sexual desire, enabling her to resist engaging in "illicit" sexual activities (UNICEF, 2005).

According to Severin and Tankard (2001).omen's empowerment is often associated with modernization trends such as urbanization, higher education, industrialization, rationality, individualization, and the formation of emotionally close nuclear families. Attitudes reflect the perceived value of traditional and contemporary practices and can indicate a willingness to change. However, it is important to note that attitude change does not always occur easily. Research suggests that people form swift and spontaneous positive or negative reactions to everything they encounter in less than a second, even before they are consciously aware of it. In this *Asil po Pokot* radioprogramme through Pokot FM radio has implemented various strategies, and campaignsusing persuasive communication techniques by delivering the right messages in an effectively.

Radio programme has been designed in away that they are persuasive and influensive to capture the audience's imagination. The main objective of the *Asil po Pokot*radio programme is to support and empower girls and women who are at risk of female circumcisionto undersytand their nature and make informed decisions and maintain their self-esteem and self-efficacy in the face of challenges, while also respecting the community's cultural norms and traditions regarding the rite of passage. Additionally, the programme seeks to empower these individuals by providing them with an ''Alternative rite of passage'', which allows them to transition into adulthood without undergoing the harmful practice of female circumcision.

According to UNICEF (2017) radio serves as a powerful tool in combating FGM/female circumcision, particularly in campaigns against violence towards women, but the messaging must be appropriate. Consequently, community radio can play a crucial role in anti-FGM/female circumcision campaigns, contributing to the eradication of the practice. However, deeply rooted beliefs and attitudes linked to FGM/female circumcision persist, as it is often viewed as essential for a girl's full growth and readiness for marriage. Defying this practice can lead to social ostracism, shame, stigma, and challenges in finding a spouse, especially in communities where FGM/female circumcision is prevalent. This sheds light on why certain cultures continue to uphold FGM despite its associated dangers. In many societies, FGM/female circumcision is believed to diminish a woman's sexual desire, enabling her to resist engaging in "illicit" sexual activities (UNICEF, 2005).

### 2.3 Radio programme in EndingFemale Circumcision

Numerous international, national, and community-based organizations and their initiatives have been dedicated to eliminating FGM/female circumcision over the years. Leading the charge in this fight is the United Nations, as highlighted by WHO (2017). In 1997, WHO, UNICEF, and UNFPA issued a joint statement condemning FGM/female circumcision. Subsequently, in February 2008, a new declaration was released with the support of the United Nations to promote intensified actions towards ending FGM/female circumcision. Since 1997, various measures have been implemented globally to prevent FGM/female circumcision, including research, community engagement, policy enhancements, and increased advocacy efforts to eradicate the practice. These strategies have led to greater international engagement, legal frameworks, and political backing to end FGM/female circumcision, resulting in a reduction of the practice in numerous countries through media campaigns and approaches.

FGM/female circumcision is highly valued by those who practice it as a symbol of social, ethnic, and physical distinction. FGM/female circumcision is seen as an essential step in raising a girl "properly," safeguarding her, and, in many cases, making her suitable for marriage in communities where it is practiced. Parents trim their daughters' hair to provide them with the best opportunities for a successful future. She is perceived as a respectable lady. Parents have their daughters' hair cut to offer them the greatest chance for a promising future. Due to family pride and societal expectations, it is extremely challenging for individual families, girls, and women to halt FGM/female circumcision on their own (UNICEF, 2017).

According to Mbugua (1997) female circumcision, commonly referred to as such in practicing communities, is deeply ingrained in all aspects of social life and is therefore a significant rite of passage. A girl is not recognized as a woman until she undergoes the procedure. She is forbidden from marrying, speaking or dancing in public, or handling others' food or eating utensil. Asil po Pokot radioprogramme encourages the audience know and understand about their customs and tradions since immemorial, however it discourages practices that are retrogressive in the community well being. It is mentioned that uncircumcised women receive a lower bride price and are often ostracized in religious circles. Some argue that FGM/female circumcision is occasionally carried out for religious purposes. Religious communities view the practice as a necessity for spiritual purity. Contrary to this belief, other studies refute the notion, asserting that no religion advocates for FGM/female circumcision.

According to GTZ (2009), FGM/female circumcision, commonly practiced in certain societies, is deeply ingrained in every aspect of life and serves as a significant rite of passage intertwined with social existence. A woman's worth and recognition in society are often contingent upon undergoing the procedure. Despite efforts to eliminate FGM/female circumcision within Kenyan practicing communities, the outcomes have proven to be ineffective. The primary advocates of campaigns aims at banning the practice are external parties who do not consider the needs of those who practice it. In 2014, the United Nations Population Fund and Africa Media Houses launched a global initiative to enhance radio coverage of FGM/female circumcision in Africa.

As part of thisprogramme, the Pan African Award for FGM/female circumcision Reporting is presented annually to an African journalist who has shown creativity and dedication in covering the issue. Additionally, the UNFPA-UNICEF (2020), Joint Programme on FGM/female circumcision works directly with communities to raise awareness about the harmful effects of the practice and advocates for its elimination. Dr. Osotimehin further emphasized, "We firmly believe that by protecting girls from female genital mutilation, early marriage, and other harmful practices, we can empower them to lead healthier and more fulfilling lives." The objective is to put an end to this behavior within a single generation.

During the launch of the campaign, UN Secretary-General Ban Ki-moon stated, "Change can be brought about through sustained media focus on the severe public health consequences of FGM/female circumcision, as well as the violation of the rights of hundreds of thousands of women and girls worldwide." He added that the project promotes anti-FGM/female circumcision campaigns in Kenyan media. In 2010, the United Nations Children's Fund issued a statement calling for the eradication of FGM/female circumcision in the community. According to the organization, FGM/female circumcision could be eliminated if programs and policies address the various social factors that contribute to the practice and challenge gender stereotypes, prejudices, and assumptions.

#### **CHAPTER THREE**

#### RESEARCH METHODOLOGY

#### Introduction

This chapter covers the study area, research design, study population, sampling procedures, data collection methods, research instruments, data analysis and presentation, as well as the ethical consideration.

### 3.1 The Research Design

This research employed a descriptive research design, utilizing surveys and various forms of fact-finding inquiries. The primary goal of descriptive research is to outline the current situation of the research. Shukla (2008) defines descriptive research design as the examination of the frequency of an event or the relationship between two variables. A comprehensive description of the who, what, when, where, why, and how of the study, along with a clear data collection strategy, is incorporated into a descriptive research design. The descriptive research design is a systematic procedural framework that the researcher follows to address the research questions.

The objective in selecting and constructing a research design is to maintain the validity, reliability, and accuracy of the research. The descriptive research design aids the researcher and readers in understanding how data will be collected, the sampling procedures including the sample size, sampling technique, and data analysis methods. In this study the research design provideed detailed information on sampling, data collection, data analysis, and interpretation to ensure clarity on each step undertaken. It answered the research questions. It also ensured that the methods used to collect data align with the research objectives, whether of quantitative or qualitative data. This enables the researcher to draw valid, and reliable conclusions based on the research findings.

## 3.2 Study Area

The researcher carried out this study inKipkomo Sub-County in West Pokot County The sub-county has a female circumcision prevalent rate of 44%, (KDHS, 2019). The area is marginalized. Pastoralism and nomadism are still practiced. It has 102,633 inhabitants and covers an area of 10,136 square kilometers. Male are 50, 923 while females are 51,703. There are 17,926 households (Kenya National Bureau of Statistics (2019).

The researcher purposively picked Kipkomo Sub-County as a priority in his research because it has a highfemale circumcision prevalence rate compared to other Sub-Counties like lelan, which has a female circumcision prevalent rate below 10%. There has been also an outcry by the elite community of many young school going girls who have lost their precious lives and hope due to the complications, consequences and other social detriments associated with female circumcision practice (UNICEF, 2017).

## 3.3 Study Population

The population of this study werewomen of the Pokot community. A household based survey was conducted in Kipkomo Sub-County, West Pokot County. These are 17,926 households in the study area. However, there are 50, 923 males and 51,703 females in the Sub-County (Kenya National Bureau of Statistics, 2019).

Eight FGDs were conducted with a total of eighty (80): girls and women between 12-18 years; women 19-35 years and those above above 35 years. Key informant interviews (KII) were ten (10) selected individuals who included local administrator (Chief), Managers from local agencies implementing female circumcision activities, like World Vision, Women group, Lawyer, Medical practitioner, a traditional circumciser, traditionalbirth attendant (TBA), a woman over 18 years who underwent ''Alternative rite of passage''(ARP), A girl under 18 years who underwenttraditional female circumcision, School teacher, a village elder and a Church leader.

## 3.4 Sampling Procedure

## 3.4.1 Sample Size

The sample size is a term used in research to define the number of individuals included in a sample size selected from the general population and thought to be representative of the real population for the study. The number is often broken down into sub-groups by demographics such as age, gender, and location so that the total sample achieves represents the entire population. The sample size 391 of women were picked from the 17,926 households. One woman from one sampled household was picked during the systematic household random-walk. Sampling.

### Slovian's formula

Slovin's formula was used to determine the sample size of the randomly respondents selected to represent the study the population given, (an acceptable margin of error).

Slovin's formula is given as:

$$n = N/(1 + Ne^2)$$

'n' denotes the sample size

'N' denotes the size of the population

'e' denotes the maximum acceptable error. Take the margin of error to be 5%.

#### **Solution:**

$$n = N/(1 + Ne^2)$$

$$n = 17,926/(1 + 17,926 \times 0.05^2)$$

$$n = 17,926//(1 + 17,926 \times 0.05 \times 0.05)$$

$$n = 17,926/(1 + 44.8125)$$

$$n = 17,926/45.8125$$

n = 391.29058

n = 391

The sample size of the **women** in the households is **391** 

The researcher also carried out FGDS. Eight (8) FGDs) eachhaving ten (10) participants andten (10)KII were conducted over a period of 14 days.

### 3.4.2 Sampling Technique

Nachmias and Nachmias (1996) describe systematic random sampling as the process of selecting objects at a consistent interval. A systematic household-based random sampling technique was utilized to select 391 women from households distributed proportionately across eight rural administrative areas in Kipkomo Sub-County to participate in the survey. This study focused on women, with a total of 17,926 households in the Sub-County forming the study population. In cases where there were multiple eligible individuals in a household, the oldest woman was chosen to participate. In a couple of cases where no eligible woman was found in the homestead, it was replaced with the next household.

This sampling method not only provided a representative sample but also proved to be an efficient way of covering a large study area. The counting of households began at the first farmstead on the left side of the road, with the local chief's office acting as the starting point in each administrative site. Every third household or homestead was selected as a respondent household while walking through the area. If no one was found in the forty-sixth household, the researcher proceeded to the next one until a suitable household was identified for administering the questionnaire. This process was repeated until the desired sample size was reached.

The interval of the household sample in each location is the number of households subdivided by the number of sample size of those locations as shown in Table 3.1

Table 3.1 **Respondents Dstribution by Location** 

No	Location	Number of Households	Number of sample Sizes
1	Batei	3277	71
2	Kipkomo	2846	62
3	Senetwo	1327	29
4	Ywalateke	2291	50
5	Pserum	1490	33
6	Chepkopegh	3705	81
7	Shalpogh	1285	28
8	Parua	1705	37
	Total	17926	391

Source: Kenya National Bureau of Standards (2019)

The researcher also purposively sampled experts for interviews and FGDS. Eight (8) FGDs). With eachhaving ten (10) participants andten (10)KII were conducted over a period of 14 days. Respondentswere recruited by the researcher with the help of the local leaders (village elders) and theresearch assistant from the study area who were well conversant with the research area. Theresearcher with the research assistant set up the FGDs, to ensure that discussants are representative of the local community and stakeholders.

#### 3.5 Reliability and Validity

# 3.5.1 Reliability

The level of consistency in the outcomes or data produced by a research instrument after multiple trials is defined by Mugenda & Mugenda (1999).

Reliability, therefore, pertains to the ability of an instrument to consistently yield the same results under the same circumstances over time. The test-retest method was employed to thoroughly assess the instruments. This process was affected by random errors, which diminish reliability as they increase (Mugenda, 2003). This could be due to inaccuracies in the equipment utilized or errors in scoring/coding by the researcher resulting from unclear instructions given to the subjects. Researchers expect a construct to exhibit consistency over time when measured. It selects a reliable research method, form a sample group like FGDs by ensuring consistency among its members, and administer the test using interraction method. This process is then repeated one or more times with the same sample group based on the responses provided by the participants. Reliability is crucial for generating high-quality research that can be relied upon and utilized by others. This involved administering the same instrument twice to the samegroup of respondents in a village in the study area. A spearman rank order correlation was calculated. Orodho (2009) statesthat a correlation coefficient of about 0.75 should be considered high enough to judge thereliability of the instrument and the researcher adapted this recommendation.

#### 3.5.2 Validity

To put it differently, validity pertains to the extent to which the results of data analysis accurately depict the phenomena under investigation. According to Borg and Gall (1989), validity is defined as the extent to which a test measures what it claims to evaluate. They argue that expert opinion enhances the content validity of an instrument, ensuring that the scores obtained from the measurement truly represent the intended variable. However, how does a researcher determine this? When a measurement exhibits good test-retest reliability and internal consistency, the researcher can have greater confidence that the scores accurately reflect what they are intended to measure. In order to validate or challenge the researcher's interpretation of the data, it is common for the researcher to ask the participants to carefully review their interview transcripts or data analysis.

This process contributes to refining themes and theory development, validity examines whether the study design, implementation, and analysis address the research question without bias, while external validity assesses whether the study findings can be generalized to other contexts. This is improved through expert judgment. The researcher approached the supervisor in order to seek expert judgment on the relevance of the questionnaires, KII and FGDs guide's that were developed and the participants recommendations were incorporated in the revised questionnaires.

## 3.6 Data Collection Techniques

#### 3.6.1 Questionnaire

The utilization of semi-structured questions served the purpose of facilitating communication between the researcher and the respondents, aiming to comprehend and grasp the values and significance of this practice. These values are believed to encompass various aspects, such as being a prerequisite for marriage, a rite of passage from childhood to adulthood, equivalent to male circumcision, serving as a marker of ethnic identification, and enabling a girl to mature into a responsible woman who garners respect and influence within the community, among other values. In addition to open-ended and closed-ended questions, the researcher also incorporated the options "Yes, No, or Not sure" in the structured questionnaires.

Through this approach, the researcher was able to gather crucial data that provided profound insights into the perspectives of the women who responded to the questions. The respondents were interviewed using semi-structured and pre-tested interviewer-administered questionnaires, following their informed verbal consent. These questionnaires aimed to collect basic sociodemographic characteristics. Prior to the actual data collection, the questionnaire was pre-tested among girls and women residing in households selected from the sampled administrative locations. Furthermore, the respondents were asked and their responses recorded regarding their awareness of the campaign against female circumcision, personal experiences with female circumcision, willingness to subject their daughters to the practice, as well as their awareness and experiences of any complications associated with female circumcision.

#### 3.6.2 Key Informant Interview (KII)

the kii host Manager of Pokot FM in *Asil po Pokot* radio programme conducted interviews to ten (10) key informant interviews over a period of 14 days who were selected individuals who included local administrator (Chief), Managers from local agencies implementing female circumcision activities, like World Vision, Women group, Lawyer, Medical practitioner, a traditional circumciser, traditional birth attendant (TBA), a woman over 18 years who underwent 'Alternative rite of passage' (ARP), A girl under 18 years who underwent traditional female circumcision, School teacher, a village elder and a Church leader.

Respondentswere recruited by the researcher with the help of the local leaders (Village elders) and theresearch assistant from the study area who were well conversant with the research area. Theresearcher with the research assistant set up the FGDs, to ensure that discussants are representative of the local community and stakeholders.

To ensure the validity and comparability of the answers, all respondents were presented with the same questions and prompts in a consistent manner. While maintaining an engaging tone, the researcher remained neutral and avoided engaging in substantive conversations with the respondents before or during the interview. This approach aimed to prevent any bias or the impression of a strong viewpoint on the topic. It is important to note that the interviewer's behavior and characteristics can influence how the participant responds. Cues such as tone of voice, body language, and interviewer characteristics may lead respondents to answer questions based on their attitudes towards the interviewer rather than providing genuine answers to the questions.

As a follow-up to the completion of questionnaires by individual respondents. These interviews aimed to delve deeper into the participants' answers and gain a better understanding of their perspectives. Interviews are particularly effective in gathering detailed information about a participant's background and obtaining in-depth responses related to the topic being studied. In qualitative research, interviews are often used to explore the significance of major topics in the lives of the participants, making them a more personal form of research compared to questionnaires or focus groups. During the interviews, open-ended questions were asked to encourage unbiased responses. However, closed-ended questions have the potential to influence participants to answer in a specific manner.

In this case, the KII host Manager through the *Asil po Pokot* radio programme of Pokot FM.used the interview guide to ask questions concerned experts on female circumcision issues, The participants included government officials, NGOs, CBOs, women groups, teachers, medical experts, and lawyers. These individuals were purposively sampled to provide valuable knowledge and information on topics such as the complications of female circumcision, early marriages, alternative rites of passage, and strategies for eradicating female circumcision. The interviews took place in a studio setting, allowing sufficient time for the interviewees to express their thoughts and opinions.

## 3.6.3 Focus Groups Discussion

The researcher conducted eight (8)of eighty FGDs of (80) girls and women participantsaged between 12-18 years, 19-35 years, and above 35 years that were purposively—picked—from each of the eight administrative locations in Kipkomo Sub-County.

The participants included students from primary, secondary, and post-secondary schools, as well as women from the local community. The researcher utilized an FGDs guide to facilitate individual interviews and recorded the sentiments, opinions, perspectives, and experiences shared by the participants. These recordings were used during the presentation and analysis of the collected data. The researcher encouraged the participants to freely express their opinions and ideas to persuade other participants.

A chosen mediator took notes on the discussions and opinions of the group members. This discussion-heavy setting proved valuable in confirming or challenging existing beliefs, attitudes, norms, and traditions related to female circumcision in the community. During the discussions, the researcher asked appropriate questions to ensure accurate results. The questions were friendly and conversational in tone, using language and phrases that resonated with the focus group participants. Each question focused on a single aspect and avoided merging multiple topics. Complex questions were clarified to obtain more precise answers. The researcher also avoided directing questions to specific individuals to ensure the inclusion of all participants. Additionally, the discussion time per question was limited to 5-10 minutes to maintain efficiency in the conversation.

The questions included a primary question, which served as the initial open-ended question to initiate the entire discussion. For example, "We are here to discuss the impact of the *Asil po Pokot* programME in changing beliefs and attitudes towards female circumcision. What are your thoughts about it?" Probe questions were also used to delve deeper into the discussion of the primary question.

Textual analysis: Secondary source of data included a recorded programme on FGM which the researcher analyzed. This enabled the researcher to find out how the programmes aired create awareness on FGM and the ending of the practice. The researcher also carried outa textual analysis on programme to determine how the information aired created awareness about female circumcision.

#### **3.7 Data Collection Instruments**

Research instruments are essential tools utilized to examine variables and elements of behavioural or psychological information. Kelinger (1986) defines research instruments as the devices employed for data collection. In this study; Questionnaires, Interview and FGDs were utilized for data gathering.

#### 3.7.1 Questionnaire

The researcher handed out the semi-structured questionnaire that inquired about the significance of anti-female circumcision initiatives to the participants. The surveys were distributed and, if necessary, translated to facilitate in-person discussions with participants to gather more insights. Semi-structured inquiries were employed to encourage dialogue between the researcher and the participants, enabling them to express their perspectives and thoughts on the research topics. Questionnaires, provide a platform for respondents to articulate their viewpoints, beliefs, and concepts. The researcher disseminated questionnaires to the respondents in the study area. The semi-structured questionnaire focused on the importance of anti-female circumcision programmes among Pokot women. The surveys were handed out and, when needed, translated to enable face-to-face interactions with respondents for gathering additional information.

#### 3.7.2 Interview Guide

Creating an interview guide is a valuable tool for interview researchers in various ways. The guide consists of a list of overarching themes and questions that the researcher intends to cover during the interview. The themes include the topics that adversely shared by the experts on female circumcision, girls and women rights, discrimination, gender based violence among others.

To ensure easy reference, the instructions by the researcher are kept concise on a single page. This process of developing the guide helps in focusing and organizing the flow of thoughts, thereby enhancing the overall inquiry. When conducting interviews, the researcher always carries a fresh copy of the guide to easily mark off questions or subjects as they are discussed.

Throughout the interview, the researcher often found that some questions were answered without being explicitly asked. In such cases, the researcher would circle the question on the guide to avoid redundancy. The Key Informant Interview (KII) Manager facilitated the participation of carefully selected experts and professionals who could address the relevant issues related to anti-female circumcision campaign activities.

The sample key informant interview guide ensures that the session remains concise by focusing on primary topics of interest. This approach simplifies both the interview administration and data management processes. The researcher made efforts to establish a comfortable environment for the respondents, aiming to avoid any perception of leading them. These instructions were designed to assist the researcher in conducting the interview effectively. Each answer was carefully cross-checked with the corresponding question, and if necessary, further probing was conducted. The researcher ensured that the responses were noted and recorded in narrations and quatations. In cases where the responses were lengthy or difficult to transcribe quickly, the researcher would indicate "REFER TO AUDIO RECORDING" to capture the complete information during the interview.

#### 3.7.3 Focus Group Discussion Guide

A subject guide, also referred to as a Focus Group Discussion (FGD) guide, is a tool used in qualitative research methods like Focus Groups or individual depth interviews. Unlike a traditional questionnaire, it is designed to facilitate conversation rather than simply gather information. If participants introduce new and important topics during the discussion, the researcher may choose to deviate from the planned agenda. Typically, a FGDslasts for about 90 minutes. The researcher, in collaboration with the group leader, selects a moderator to assist in facilitating the discussions. The first 10 minutes are dedicated to introducing and explaining the topics to be discussed. The moderator then invites the participants to share their thoughts for approximately 10 minutes. The moderator may ask questions or seek additional information.

The researcher allocates 60 minutes for the actual discussion, leaving the remaining time for participants to respond. This approach is particularly intriguing when exploring different perspectives on "female circumcision." The initial question posed by the researcher focused on the origins of this practice, as the study aimed to examine the impact of Pokot FM radio in preventing female circumcision.

The instructions were revised by the researcher to incorporate this information. To ensure accurate capture of conversations, both a notebook and a tape recorder were utilized to record participants' comments. As a result, a FGDs guide was developed by the researcher, which included questions regarding efforts against female circumcision.

## 3.8 Data Analysis and Presenation

Data analysis involves the systematic application of statistical and/or logical methods to interpret, summarize, and evaluate data. According to Shamoo and Resnik (2003), various analytical techniques allow for the derivation of inductive inferences from data, distinguishing the phenomenon of interest from statistical fluctuations within the data, and utilizing analytical or statistical tools to uncover meaningful information. Data was analyzed and presented in a detailed report on the various remarks from The results of the quantitative findings were presented in form of tables, graphs and charts, while for qualitative data was presented in narrations and narrations as per the themes of the study.

#### 3.8.1 Quantitative Data

Quantitative methods necessitate the generation of data in a quantitative format suitable for formal and rigorous quantitative analysis (Kothari 2009). As per Mugenda (2003), data in the quantitative approach is impartial to individuals' perspectives. Neill (2007) states that the objective of quantitative methods is to demonstrate observed phenomena, classify characteristics, quantify them, construct statistical models, and generalize the results. The reliability of data acquired is a key advantage of qualitative methods (Hakim 1987)

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Stoke (2003) highlights that the strength of quantitative methods lies in the capacity to extend findings to the entire population due to the sizable randomly selected sample. In this research, descriptive statistics were employed to analyze quantitative data using the statistical software SPSS. The researcher evaluates the quantitative data gathered through statistical techniques, as quantitative data comprises numerical values that can be computed. Data from a quantitative dataset, like survey responses, was typically inputted into software like SPSS or Excel to swiftly generate tables, charts and graphs for analysis.

It involves becoming familiar with the appropriate software like spss in excel, systematically logging in and screening your data, entering the data into a program, and finally, ensuring that your data is clean and free from errors. Running descriptive statistics to summarize the basic features of a data set, including measures of central tendency (frequencies, mean, mode, and median), dispersion (variance, and standard deviation), and distribution.

#### 3.8.2 Qualitative Data

Data analysis in qualitative research refers to the systematic process of organizing and examining interview transcripts, observation notes, and other non-textual materials collected by the researcher to enhance the comprehension of the phenomenon. The primary method of analyzing qualitative data involves coding or categorizing the information. This process entails making sense of extensive data by condensing raw information, identifying significant patterns, and deriving meaning from the data to establish a logical chain of evidence (Kothari, 2009).

Qualitative method of data analysis was employed in this study because the researcher was interested in analyzing information obtained in a systematic way and get detailed information about the phenomenon of Female genital cutting in the Pokot community. This process involved transcription of the recorded information from the Interviews and FGDs. The researcher read all transcriptions carefully and wrote down some ideas as they came to mind. The qualitative research approach used in the study was constant analysis/grounded theory which involved the following steps as described by Auerbach and Silverstein (2003).

Qualitative research delves into the examination of values, meanings, beliefs, thoughts, experiences, and feelings that are characteristic of the phenomenon being studied. This was essential in eliciting the sentiments and viewpoints of individuals regarding female circumcision. Mugenda (2003) asserts that qualitative analysis enables researchers to gather more comprehensive data and provide a more thorough explanation of phenomena. This viewpoint is supported by Patton (1990), who argues that qualitative methods enable researchers to delve deeper into phenomena and provide detailed insights. From transcripts obtain in the KII and FGDs together with the field notes, the researcher identified relevant texts and grouped together repeating ideas from the relevant texts. Qualitative data was thematically analysed where themes were later formed from the repeating ideas and eventually categories formed from the themes.

The researcher together withindependent coder who verified the findings reach a consensus to confirm and change identified themes as it required. Finally, findings were reported using the actual words narrations and quotations of study participants in order to describe their feelings, opinions and attitudes. Qualitative data was presented using narrations and quaotes.

#### 3.9 Ethical considerations

Ethical considerations were carefully considered during the course of this investigation, ensuring that the rights and dignity of the respondents were safeguarded, along with their autonomy to either accept or decline participation in the study. In order to maintain impartiality and avoid bias, the research objectives were effectively communicated to the participants without revealing specific study details. Prior to commencing the research, full disclosure was made to the participants and their consent was obtained. The researcher acknowledged any borrowed materials and credited the work of others where necessary. Participants were assured of confidentialityfor the sole academic purposes. A permit from NACOSTI was provided, followed by data collection methods. Questionnaires were distributed to respondents, who were given ample time to complete them.

Key informant interviews were conducted. Interviews and Focus Group Discussion guides were distributed to participants. Permission was sought from respondents and parents of girls below 18 years before recording began. At the conclusion of the exercise, each participant was thanked for their valuable input.

#### **CHAPTER FOUR**

## DATA ANALYSIS, PRESENTATION AND DISCUSSION

#### Introduction

The chapter contains findings of this study as informed by the objectives andtheories informing this study. It also discusses the findings based on the introduction, literature review, materials and methodology of the study.

## 4.1 Respondents Demographic Profile

## 4.1.1 Response Rate

Of the 391 questionnaires that were prepared and distributed by the researcher to the women in the households, as per the sample size; 260 questionnaires were filled by the women and returned to the researcher. This represented 92 % of the sample size who answered thequestions. Therefore, this suggests that majority of the respondents were eager to know about the female circumcision and it's consequences. Pokot language language was used to communicate to the respondents and where the participant is not a Pokot, translation was done.

## 4.1.2 Respondents age

In this research, a total of eighty (80) FGDs. These groups and ten (10) KII were purposively picked by the researcher. The FGDs consisted of young girls and women whose parents and guardians were guaranteed confidentiality. The sampling process was conducted from eight (8) administrative locations in Kipkomo Sub-County. Age and gender need to be included in the demographics of research because they provide important information about the participants that can influence the results and interpretation of the study. Age can impact research outcomes as it is associated with different levels of experience, knowledge, and cognitive abilities as shown in Table 4.1

Table 4.1

Age	Frequency	%
12-18	24	30
19-35	36	45
Above 35	20	25
Total	80	

The findings above was as a result of age factor shows that majority of the respondents were youth girls aged between 18-35, accounting for 30% of the total. Following closely were girls aged between 12-18 representing 45% of the respondents and those aged above 35 years old wre 25%.. The study depends on their levels of knowledge, experiences, perceptions and abilities.

## **4.1.3 Respondents Educational Level**

Cheserem (2010) argues that educating individuals about the consequences of FGM/female circumcision creates an opportunity for them to explore their own perspectives and aspirations regarding the practice in a lively and non-threatening environment. This educational approach not only enhances the well-being of families and communities but also equips respondents with knowledge and understanding of the prevailing situations surrounding female circumcision in their community. This highlights the fact that individuals who are highly educated are more likely to make informed decisions, while those with limited education may face challenges in comprehending relevant issues.

According to KDHS (2014), research revealed that girls with some formal education were less likely to undergo the 'cut' compared to those with no formal education. Furthermore, mothers who had completed high school were also less inclined to subject their daughters to female circumcision. In Kenya, approximately 58% of women without a secondary education have undergone female circumcision, whereas only 21% of women with a secondary or higher education have experienced it. So when the individuals and the audience hear or listen to the *Asil po Pokot* radio programmes in anti-female campaign in creating awareness, changing beliefs and attitudes and ending the female circumcision..they are able now to make informed decisions..

Table 4.2

<b>Education Level</b>	Frequency	%
Primary	19	24
Secondary	33	41
Collage/University	28	35
Total	80	

The table 4.2shows that majority (41%) of the respondents have attained attained secondary levellevel; .(24%) have attained primary level, while (35%) have attained college and University level. The total respondents average level of education of the respondents is (33%.).

The educational level of the respondents intentionally aims at achieving the specific study objectives as they listened to *Asil po Pokot* radio Programme in creating awareness, changing beliefs and attitudes and ending the female circumcision.. These objectives may encompass the enhancement of comprehension and logical thinking. For instance, the respondents demonstrated a positive understanding when responding to the research inquiries and interviews.

## 4.2 Anti-Female Circumcision Messages in Creating Awareness

Female circumcision has severe consequences on the physical and emotional health of girls and women. It results in physical harm, including fatalities, as well as emotional trauma and mental anguish. Moreover, it can lead to complications during childbirth and infections due to the absence of proper sterilization. The spread of various infections, such as HIV, is also a significant concern. Female circumcision frequently leads to early marriages for young girls and the discontinuation of their formal education. As per the Kenya Demographic and Health Survey (2014), 2.1% of girls and women aged 15-49 in Kenya have been subjected to FGM/female circumcision. Despite a decrease in prevalence nationwide and in West Pokot County, the female circumcision is still practiced and the prevalent rate currently stands aa follows; Pokot (44%), Somali (94%), Samburu (86%), Kisii (84%), and Maasai (7%) (KDHS, 2019). The Agenda Setting theory assumptions highlighted in the research demonstrate the significant role of *Asil po Pokot*radio programme aired on Pokot FM in raising and promoting public awareness on the negative implications of female circumcision.

Despite the women acknowledging increased awareness of anti-female circumcision messages, they expressed their inability to change the prevailing narrative due to the deeply entrenched cultural norms and traditions of the Pokot community and that why the practice is still on in some areas of the West Pokot County. Nevertheless, many women found satisfaction in the anti-female circumcision campaign programmes, as they provided valuable insights into the consequences of the practice. There is hope that over time, these programmes may contribute to the ending of female circumcision in favour of the 'Alternative rite of passage", which aligns with the objectives of the study.

On creating of awareness the researcher posed this question to the participants, What have you heard aboutfemale circumcision in Asil po Pokot radio programme? The responses as follows; One hundred and twelve (112) participants said YES while 75 indicated NOthat female circumcision is a prohibited cultural practice by On the issue that female circumcision makes a woman complete or proud; 109 rparticipants to it saidYES while 87 said NO. About the issue that female circumcision is prohibited by government 122 participants saidYES, while 66 said, NO. That female circumcision complicates child birth during delivery, majprity of the participants 137 who have undergone through the 'cut' indicated YES while 52 girls stated that they are not sure.. atahe researcher asked the participants; Do you still practice female circumcision in your community? A hundred and twenty six (126) participants said, YES, while 61 of them indicated NO. If YES, what are the reasons behind it? Majority of the participants stated,

"Female circumcision practice has been there in Pokot community since time immemorial and we are not sure when it will end in the community. You see if you're not circumcised, you will not be respected nor honoured but you will be discriminated and labaled against the society and you may likely not get a husband nor your parents get pride price." Because of how the world is now, nobody wants to remain home. We want to go to school to learn. Some of uswish it to stops as many girls usually drop out of school and get married off after circumcision. Some girls girls bleed to death during the cut" we are hoping and paray that interventions by *asil po pokot* radio programme in anti-female circumcision through Pokot FM as well as the government ,NGOs, CBOs, Faith-based Organisations, women groups among others will create more awareness to bring positive change to the community byeradicating some retrogressive cultures."

#### 4.2.1 Listening to *Asil po Pokot* radioprogramme

The researcher purposively sampled Pokot FM radio which is a government owned State public radio, stationed in Kenya Broadcasting Corporation Station in Kisumu. It transmits its airwaves as well broadcasts at a frequency of 100.9FM in his research study with outright principle from the Controller of Programmes Kenya Broadcasting Corporation (KBC) in Kisumu.

Respondents listening to Asil po Pokot radio programme

Figure 4.1

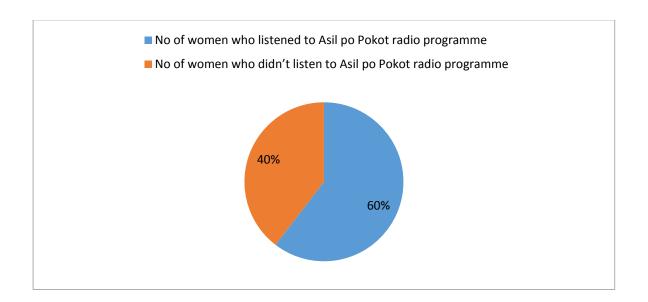


Figure 4.1 Shows that majority in 116 of the respondents (60%) listened to Asil po Pokotradio programme while 76% (representing (40%) did not.

Asil po Pokot radio programme is aired by Pokot FM on every Tuesday weekly, between 8.45 am to 9.45 am. It was designed to address issues that mainly affect girls and women in the Pokotcommunity, such as; effects, implication and consequences of female circumcision. The programme in collaboration with other agencies that advocates like; government, NGOs.CBOs, Faith-based Organisation, women groups among others who are against the 'cut' to propagate c anti-female circumcision activities in the community.

The researcher asked the participants whether they do listen to *Asil po Pokot*radio programme through Pokot FM; 128 participants responded YES, while 57 indicated NO. When he probed further as how long and in which day is the *asil po pokot* radio cprogramme aired?, Majority (124) of the participants indicated 15 mins, while some say it's 30 mins. On what appeals to them about *Asil po Pokot* radio programme on anti-female circumcision messagesand realated topics; 70 participants said it's the content, 52 indicated the presenter as entertainining, while 47 stated that is the the interview.

The KII, the host Manager inquired from the partipants to tell the topics they hear from the *Asil po Pokot* radio programme and whether they get or hear responses from the women respondents?. The respondents indicated that the programmes are about the effects, implications and consequences offemale circumcision, girl child rights, discrinaation against them. women, Gender based violence against women, HIV/AIDS infection and taking care of their bodies. They have also heard many women responses voicing over the women aconcerns go against them as mentioned. They also ststed that they have also heardfrom *Asil po Pokot* radio programme.

Through Pokot FM the government officials like Chief, health officers, lawyers, Managers of NGOs, CBOs and Church leaders address several issues anti-female circumcisioncampaign and the reasons why the government has outlawed the practice, however, the practice is persistent but gradually reducing umlike before due to priorities to education and anti-female circumcision campaigns by *Asil po Pokot* radio programme as well as other multispectral agencies in the County. They said they enjoyed the listening to .the views, opinions and the messages which most informative, educative and entertainingand they wish the *Asil po Pokot* radio programme continues henceforth. The KII further said that the listeners participated in talk shows through SMs, phone calls, pre-recording of listeners in field. He added that selected listeners were also invited to the studio when the *Asil po Pokot* radio programmes were being aired. The FGDs also indicated that listeners participated in programme addressing the female circumcision practice.

Based on the results, it is evident that *Asil po Pokot* radio programme play a crucial role in creating awarenessagainst female circumcision. These initiatives can be customized to target individuals who need to be both motivated and committed to ending the practice. The study also revealed that *Asil po Pokot* radio programme allowed active participation in activities related to female circumcision which helps them to gain a deeper understanding of the issue by sharing their diverse perspectives, opinions, and experiences.

Various stakeholders, including government agencies, NGOs, CBOs, and Faith-based organizations, regularly use the *Asil po Pokot* radio programme platform to engage in discussions on the pressing matters surrounding female circumcision. During these FGDs, the researcher asked participants a series of questions to gauge their knowledge and perceptions on the topic. These questions included inquiries about their understanding of female circumcision, their sources of information on the subject, and whether the practice is still prevalent in their communities. The responses provided valuable insights into the participants' perspectives on female circumcision. One participant stated, "I am aware that female circumcision involves the practice of circumcising girls to prepare them for marriage." Another individual mentioned, "Female circumcision is a ritual that signifies a girl's transition into womanhood." An 18-year-old girl expressed, "Female circumcision is detrimental. It inflicts unnecessary suffering upon girls." Lastly, it was noted that "Female circumcision is still practise in the Pokot community due to ingrained cultural practices in the community.

The KII hostManager who was also interviewed by the researcher emphasized that the majority of respondents have expressed positive views regarding the *Asil po Pokot* radioprogrammes efforts against female circumcision. According to their involvement and reactions, they perceived the cultural programme as reliable, convenient, and persuasive. However, the Manager also acknowledged that a small number of respondents have voiced their opposition through phone calls and SMS messaging, indicating a mixed or divided opinion among the audience. The respondents mentioned various reasons for listening to the shows, including information on "Alternative rite of passage," the entertainment factor in the radio broadcasts, and long-standing myths surrounding female circumcision. Additionally, they noted that not undergoing the procedure may affect a woman's chances of finding a husband.

## 4.2.2 Knowledge of Anti-Female Circumcision Messages

The study findings indicate that a majority of the respondents actively listened to the *Asil po Pokot* radioprogramme, which focused on addressing concerns related to female circumcision through cultural, religious, and health discussions. It is worth noting that marginalized communities have historically utilized radio platforms to emphasize their fundamental rights, as stated by WHO and UNICEF (1999). This aligns with the objective of the study, which aimed to raise awareness about the complications of female circumcision among women in the study area.

The researcher askd the participants on the topics they are covered in *Asil po Pokot* radioprogramme whether they were satisfactory; Majority (112) of them responded YES and a few (73) said they are not sure. He also posed the question, "DoPokot FM radio collaborate with the government, NGOs, CBOs and Faith-based organizations, professionals and experts in participation to address anti-female circumcisioncampaign messagess?" Majority (114) responded that they have heard from *Asil po Pokot* radioprogramme, their chief, a medical practioner, a lawyer, a teacher, a mother, a circumcisor talk and discuss issues on the implications of female circumcision on girls and women.

On whether the rite is forced or willingly undergone by the girls and women; Majority (107) indicated that most girls willingly undergo the 'cut', however, some girls are forced to undergo as it is a tradition to do so to find a husband or get married and more pride price is paid to parents family. The study is based on the Agenda Setting theory, which suggests that public awareness and pressure, through regular radio programs focusing on the harmful health effects and violation of rights of Pokot girls, can indirectly influence positive decisions among the community.

The redearcher administered the following questions to the respondents;-

#### 4.2.2.1 Have you heard that female circumcisionis a prohibited cultural practice?

Yes [ ]
No [ ]
Not sure [ ]

Table 4.3

Female circumcision is a	No of women	%
prohibited cultural practice		
Yes	167	76
No	172	78
Not sure	66	30

Table 4.3 indicates that 167 respondents (76%) have heard that female circumcision is aprohibited cultural practicewhile 172 respondents (78%) have not and 21 respondents (30%) were not sure.

The results indicate that the majority of the respondents (76%) are unaware that female circumcision is a prohibited cultural practice, although some acknowledged that it is indeed prohibited. These findings imply that with sufficient time dedicated to spreading anti-female circumcision campaign messages, the respondents may be influenced as they receive more information and knowledge about the harmful effects of female circumcision.

The researcher posed the following questions to the participants: Is female circumcision a prohibited cultural practice? Is female circumcision a forced or voluntary practice? Have you undergone circumcision? Why should girls undergo circumcision? The participants responded as follows: one participant chuckled and stated, "When I think of female circumcision, it as a cultural practice in the Pokot community.

"I have heard most of these stories from *Asil po Pokot* radio programme. It educates us a lot' I heard from an old woman in the radio interview saying that female circumcision has been there since time immemorial, around for generations, I am not sure when it began really." During FGDs a 40-year-old mother mentioned, "Female circumcision is a cultural tradition where girls, typically aged 12 and above, must undergo the practice in order to secure a marriage or find a husband or get married.." Another participant shared, "Female circumcision symbolizes womanhood and is seen as a form of wealth during marriage." Many respondents indicated that traditional circumcisers view the practice as a source of income, often receiving compensation for their services. It has been observed that elders also benefit financially from this practice.

During KII the Pokot FM host Manager elaborated that some girls perceive female circumcision as a way to control female sexuality. It has also been linked to the cleanliness and aesthetic appeal of a girl or woman. As a result he observed that putting a stop to female circumcision in a short period of time is challenging, even if the individual is the daughter of a prominent figure; she is bound to be influenced by cultural norms. A participants questioned, "How can they be made victims and why should they remain without husbands simply because they were circumcised without their consent?" "It was a shocking, unforgettable incident that will always stay with me," expressed a stunned 26-year-old girl. She went on to say, "We must strive to bring about change and find solutions for the mistakes made in relation to circumcision."

During the conversation, she learned that *Asil po Pokot* radioprogramme, was being utilized by anti-female circumcision advocates to raise awareness and combat the practice within the community. She urges the community to make concerted efforts to eradicate female circumcision at all levels and adopt ''Alternative rites of passage'' for their girls. However, the participant voiced their concernsthrough *Asil po Pokot*radioprogramme about the challenges involved in raising awareness and in ending the practice..This approach is guided by the Agenda Setting theory, which suggests that the media especially radio has the power to. Influence and boost public awareness and highlight important matters by setting the agenda.

## 4.2.2.2 Are you aware that female circumcision is a harmful practice?

Yes [ ] No [ ]

Not sure []

Table 4.4

Female circumcision is a	No of women	%
harmful practice		
Yes	174	79
No	178	81
Not sure	33	15

Table 4.4 states that 174 respondents (79%) are awarethat female circumcision is a complicated practice while 178 respondents (81%) have not and 33 respondents (15%) were not sure.

The results show that a large percentage of respondents (81%) are unaware of the harmful nature of female circumcision, while a significant number (79%) have knowledge of its harmful effects. The *Asil po Pokot* radio programme allowed the KII host Manager, FGDs, and professionals who were invited to the studio to engage with female listeners on the topic of anti-female circumcision through call-ins and SMS, raising awareness about the complications associated with the practice in order to eliminate it.

A KII,participant shared a story of a circumcised girl who suffered greatly from the procedure, experiencing excessive bleeding and severe pain until her death. She emphasized the severe suffering endured by girls and women during circumcision, leading to various health issues such as infections, pain, and complications during childbirth. The participants called for a change in community norms to allow girls to undergo an "Alternative rite of passage," highlighting the negative impact of female circumcision on their well-being. The majority of participants noted that female circumcision in the Pokot community is carried out by traditional circumcisers. Despite being offered alternative employment by the government, many participants continue to practice circumcision. Participants expressed support for the eradication of female circumcision, with one sharing how her perspective on the practice shifted from childhood beliefs to recognizing its harmful effects on girls and women.

The *Asil po Pokot* radio programmehas assumed a prominent role in addressing the issues surrounding female circumcision, particularly those that have adverse effects on women's health, discriminate against them, and infringe upon their rights. This programme offers a platform for community members to express their opinions and concerns.

The KII host Manager, extended invitations to medical practioners, birth attendants, teachers, religious leaders, human rights activists, and government official (Chief) among others to discuss the implications of female circumcision. The Manager reported that these professionals provided free consultations and responded to relevant questions from the participants. The advice offered by these professionals was highly esteemed and acknowledged. This underscores the dedication of the *Asil po Pokot*radio programme in creating awareness of the consequences of female circumcision.

## 4.2.2.3 Have you heard that female circumcision makes a woman complete or proud?

Yes [ ]
No [ ]
Not sure [ ]

Table 4.5

Female circumcisionmakes a	No of women	%	
woman complete or proud			
Yes	192	87	
No	101	46	
Not sure	53	24	

Table 4.5 states that 192 respondents (87%) have heard that female circumcisionmakes a woman complete or proud, while 101respondents (46%) have not heard so, with 53 respondents (24%) not sure

In the findings, KII host Manager expressed to the participants the plight, faced by women who have not undergone circumcision are tremedious. They are often labeled as outsiders and immoral, which not only affects the woman herself but also her spouse and family. The participants emphasized that the absence of circumcision leads to stigmatization and a loss of social status. Another participant emphasized that female circumcision is deeply rooted in the Pokot community and is considered a source of pride and completeness for women in the eyes of the community.

This has been underscored by *Asil po Pokot* radio programme in pursuit to education of girls and women enable them to understand their ego and about themselves to adopting modern and fairer traditions that may favoour them to achieve better living standard in the society. During FGDs, a 22-year-old girl shared her experience, stating that women who undergo the required procedure are highly respected and blessed by the elders, and it is seen as a prerequisite for finding a husband and getting married.

The FGDs lauding efforts by Asil po Pokot radio programme to discourage this practice, they observed that remains challenging to bring about immediate change due to the influence of mothers and grandmothers who have belief that circumcision is necessary for securing marriage.

However, there has been some progress by *Asil po Pokot* radio programme as uncircumcised girls are now able to get married, indicating a more positive situation compared to the past when traditions were more rigid. UNICEF (2017) highlighted in a study on Pokot culture that a woman's social standing is crucial and is determined by her moral character, as well as her position within the social hierarchy. Female circumcision not only perpetuates women's social inferiority but also symbolizes their transition into womanhood and acceptance into society.

## 4.2.2.4 Are you aware that female circumcision is outlawed by the government?

Yes [ ]
No [ ]
Not sure [ ]

Table 4.7

Female circumcisionis	No of women	%
outlawed by the government		
Yes	117	53
No	146	66
Not sure	60	27

Table 4.7 shows that 146 respondents (66%) are not aware that female circumcision is outlawed by government, while 117 respondents (53%) have heard of it, with 60 respondents (27%) not sure.

The KII host Manager of Pokot FM asked the participants during *Asil po Pokot* radio programme; "Is FGM/female circumcision is outlawed by the government?". One participant said, "I don't know but I once heard that a woman circumciser was arrested by police when a girls she "cut" bled to death." Another participant chipped in, "Yes, FGM is prohibited by the government. My father told that they attended a County Commissioner meeting in which they were told to stopfemale circumcision and our church has propagated similar sentiments." She further added that it seems that the practice is not good as it was harmful and complicates a girl's life.

The Kenya Children's Act of 2001 has implemented a law that bans FGM/female circumcision as an unlawful cultural tradition. Despite this, the enforcement of these regulations has been lacking, leading to minimal arrests of individuals who persist in defying them (GTZ 2009). Various International, national, and community-focused groups and initiatives have been dedicated to eliminating FGM/female circumcision over the years. The United Nations has been at the forefront of the battle against this practice. They noted that opponents of the legislation argue that banning female circumcision could have negative consequences, such as driving the practice underground and hindering efforts to address it.

This could also lead to underreporting in surveys due to fear of legal repercussions and criticism of cultural practices. Such challenges pose a threat to the monitoring and evaluation of existing policies. Additionally, communities may resist legislation if they perceive it as an imposition from above, without their input or consent.(UNICEF, 2017).

### 4.3 Attitudes and Beliefs against Female Circumcision

The study findings determined the efficacy of *Asil po Pokot* radio programme in changing beliefs and attitudes against female circumcision among the women. To measure these attitudes and beliefs, a five-point Likert scale was used, ranging from strongly agree to strongly disagree. The theory of KAP model suggests intervention strategy that reflects specific local circumstances and the cultural factors that influence them; plan activities that are suited to the respective population involved.

This intention is determined by an individual's attitude, beliefs, values, and subjective norms. Therefore, the respondents' attitudes and beliefs may change depending on their involvement in the *Asil po Pokot* radio programme on anti-female circumcision campaign agains the female circumcision. In the 1940s and 1950s, Carl Hovland investigated attitude change as a learning process. He believed that attitudes were learned and adjusted through the process of learning. This perspective has been seen as both perpetuating female circumcision and mobilizing the community to end the practice.

Asil po Pokotradio programme utilizes persuasive and influential communication messages to engage in anti-female circumcision campaign activities. These messages are based on the belief that attitude and beliefs change by delivering the right message to the community in the right way. The Asil po Pokotradio programme aimed to spread messages against female circumcision in order to promote and empower girls and women who are at risk of this harmful practice. The goal is to help them regain and maintain their self-esteem and self-efficacy in the face of the challenges they encounter, while still respecting the community's traditional rite of passage as dictated by the Pokot culture. The study also aimed to empower girls and women to seek an "Alternative rite of passage" that would enable them to transition into adulthood without undergoing the actual circumcision.

The researcher asked the participants to express their thoughts, feelings, perceptions, experiences and perceptionsagainst female circumcision. They were asked as to what extent they agreed with statements such as whether it is a prohibited cultural practice, whether it makes a woman complete or proud, and whether it is harmful and outlawed by the government or not as follows;-

#### 4.3.1 Female Circumcisionis a Prohibited Cultural Practice

Respondents were asked to state to what extend did they agree that female circumcision is a prohibited cultural practice. The findings were shown in the figure 4.2 below.

Figure 4.2

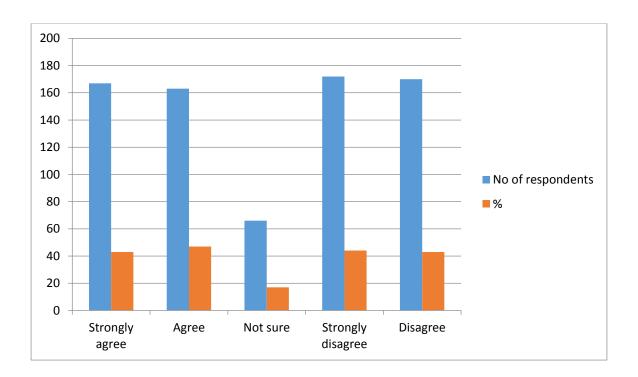


Figure 4.2 states that 167 respondents (43%) who strongly agree and 163 respondents (42%) who agree respectively that female circumcision a prohibited cultural practice, while 172 respondents (44%) strongly disagree and 170 respondents (43%) disagree, and 66 respondents (17%) not sure.

The results indicates that majority of the respondents (87%) belief that female circumcision is a prohibited practice, while (85%) indicated that it is not. Though the results are close to each other, Pokot community, however, still practice circumcision of girls and women though at a lower rate than before likely due to awareness creation. UNICEF (2017) on hteir report indicated that the prevalence rate of female circumcision in West Pokot County stands at 44% (KDHS, 2019) than 96% (KDHS, 2008-2009) and 74% (KDHS, 2014).

This is due to concerted efforts by *Asil po Pokot* radio programme to through Pokot FM that havecommunicated anti-female campaign messages that are geared towards behaviour change which have influenced individual's beliefs and attitudes against female circumcision in the community. This iis aligned to the objective of the study in which theory of TPBposits that an individual's intention to engage in a specific action at a particular time and place is a key predictor of their behaviour, It also emphasizes that one's intentions play a crucial role in shaping their actions, aiming to encompass all self-regulatory behaviours. During KII, a45 year old woman expressed satisfication in female circumcision saying that the practice is a concern to most parents, family members, relatives and even to the whole clan as it gives respect and honour. It also a value to them in terms of pride price and makes sure that girl finds a husband. However, she allays fears to the current circumcisors who are after money. She said afew girls have bleed to death. 'It is good that this practice should be stopped as we have heard many challenges faced girls and women from the *Asil po Pokot* radio programme aired by Pokot FM. The programmes are appealing to us women.''

#### 4.3.2 Female circumcision is a HarmfulPractice

Respondents were asked to state to what extend did they agree that female circumcision is a harmfulpractice. The findings were indicated in the figure 4.3 below.



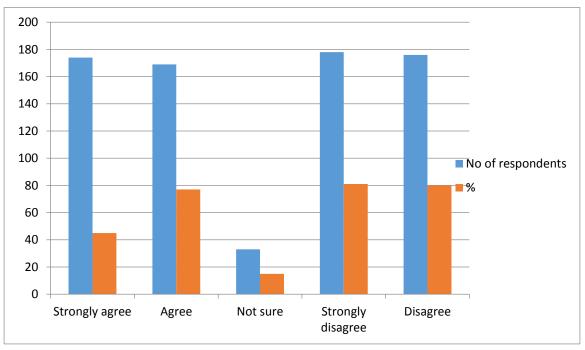


Figure 4.3 indicates that 174 respondents (44%) strongly agree and 169 respondents (43%) agree respectively that female circumcision is a harmful practice, while 178 respondents (46%) strongly disagree and 176 respondents (45%) disagree, however, 33 respondents (8%) not sure.

Thefindings indicates that majority of the respondents (91%) disagree that female circumcisionis a harmful practice, however, (87%) agree that the practice is a harmful. It is important to note that the Pokot community still practices female circumcision as a cultural norm and tradition. This practice is deeply ingrained in their culture and any disobedience to it may be seen as an insult to the community. Additionally, not adhering to this practice can result in discrimination towards the girl or woman, leading to social rejection, shame, stigma, and difficulties in finding a husband. Despite the health risks associated with female circumcision, cultures continue to practice it.

During FGDs session, a participant said, I agree to sentiments that I have heard from *Asil po Pokot* radio programme about the effects of female circumcision. It's sad and hurts alot to hear that a girl who had just undergone the 'cut' has bled to death. I think this practice is not good to us. We want our parents and our leaders to stop female circumcision. We have heard from the *Asil po Pokot* radio programme that the female circumcision has no health benefits to the girls nad women but it harms them. It is a health risk/ It is painful and may lead to HIV infection too.''

KII host Manager interviewing a medical practioner through *Asil po Pokot*radioprogramme indicated that the radio programmehas taken a goal-setting approach and implemented interventions through its anti-female circumcision campaign, which aims to prevent this practice. It is expected that with time, the respondents' beliefs and attitudes may change, as informed by the theory of TPB which outlines that behaviours are influenced by an individual's intention to act in accordance with societal norms and personal beliefs which are shaped by an individual's attitude (their beliefs and values regarding the outcomes of the behaviour. On the same note *Asil po Pokot*radio programmehas played a crucial role to provide information and knowledge in antifemale circumcision campaign that can help shape and modify behaviour and emphasize onachieving positive outcomes that can change their individula's beliefs and attitudes as well as embracing the ''Alternative rite of passage.''

# 4.3.3 Female Circumcision makes a Woman Complete or Proud

Respondents were asked to state to what extend did they agree that female circumcision makes a woman complete or proud. The findings were stated in the figure 4.4below.

Figure 4.4

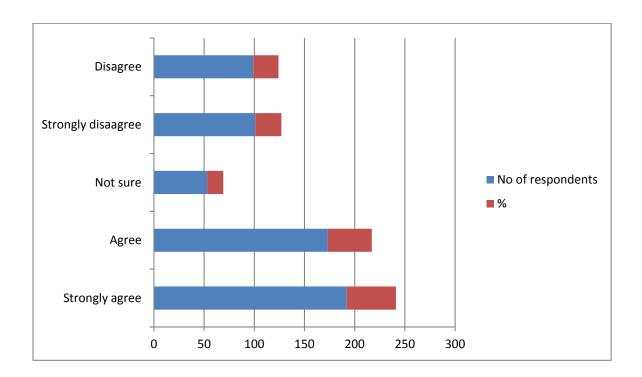


Figure 4.4 shows that 192 respondents (49%) who strongly agree and 173 respondents (44%) agree respectively that female circumcision makes a woman complete or proud, while 101 respondents (26%) strongly disagree and 99 respondents(25%) disagree with 53 respondents (16%) not sure. The findings indicate that majority of the respondents (93%) makes a woman complete or proud, while 51% do not agree.

KII host Manager during interview with participants pointed out that *Asil po Pokot* radio programme has outlined anti-female circumcision campaign messagesthat are designed to promote and improve girls and womenwell being in the society, which crucial to the objective of this dtudy. A lady interjected, "Female circumcision makes a woman complete. A woman becomes clean and this gives a lot of respect and honour to the husband and also other people.

A woman who is not circumcised is usually considered dirty and unclean" Howevr, another young women participant argued, "Nowdays some girls, are not undergoing the 'cut' as before but have opted and embraced "Alternative rite of passage (ARP)" especially to us school going girls because we want to value our education than undergoing the cut, drop out of school and finally get married off." We have often heard and learnt a lot from *Asil po Pokot*radio programme on anti-female circumcision that are aired like opting for ARP which is a good as female circumcision but you can not undergo the real 'cut'. We think that is the right way to go and I am sure soon or later our parents will accept this kind of rite."

UNICEF (2010) highlights the significance of a woman's social status within the Pokot community, which is determined by her moral standing, social identification, and rank. Female circumcision not only symbolizes women's social subordination but also signifies the transition to womanhood and confirms their full membership in society. Failure to undergo circumcision may lead to stigmatization and loss of status for both the woman, her spouse, and her family. Despite being aware of the negative impacts of female circumcision, the Pokot community continues to practice it, viewing eradicating of the tradition as a loss of status and protection. The practice is often justified by beliefs about proper sexual behaviour, linking it to premarital virginity and marital fidelity (WHO, 2017). As a result of this, *Asil po Pokot*radio programme in tandem with the theory of KAP modelhas seen beliefs and attitudes is influenced by an individual's self-efficacy to carry out the behaviour which is typically influenced by the quality of relationships and the context of the situation.

## 4.3.4 Female Circumcision is Outlawed by the Government

Respondents were asked to state to what extend did they agree that female circumcision is outlawed by government. The findings were shown in the figure 4.5 below.

Figure 4.5

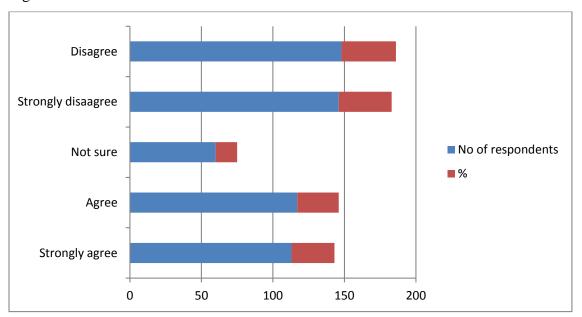


Figure 4.5 indicates 117 respondents (30%) who strongly agree and 113 respondents (29%) agree respectively that female circumcision is outlawed by the government, while 148 respondents (38%) strongly disagree and 146 respondents (37%) disagree, with 60 respondents (15%) not sure.

The research findings indicate that a majority of the respondents (75%) acknowledge that the government has made female circumcision illegal, while a smaller percentage (59%) disagree with this notion. The KII host Pokot FMManager whileresponding to questions from the Managers of anti-female circumcision agencies like, World Vision, Lawyers, Church leaders among others smentioned that most participants became aware of female circumcision when they listened to the *Asil po Pokot*radio programmeon anti-female circumcision campaign through Pokot FM radio. Despite these efforts, the community continues to circumcise girls and women, whether voluntarily, forcefully, secretly, or discreetly, as it is a customary belief to prepare them for marriage, as most Pokot men prefer to marry circumcised women.

In 2001, the Kenya Children's Act was passed, which specifically prohibits female circumcision as a cultural practice that is unwanted and illegal. However, due to a lack of enforcement, these restrictions have only led to a few arrests of individuals who continue to violate the law (GTZ 2009). Therefore, it is a key measure that *Asil po Pokot* radio programme is aligned with the thoughts of the theory of TPB to provide tangible information and valid communication messages that emphasize and promotes positive beliefs and attitudes towards the desired behaviour that support the individual's behaviour.

### 4.4 Ending of Female Circumcision Practice

The research confirmed the willingness to put an end to the practice of female circumcision, which is the primary objective of activities carried out by the anti-female circumcision campaign. A Likert scale with five points was utilized to determine the respondents' readiness to discontinue the practice. The *Asil po Pokot*radio programme, in collaboration with Pokot FM, engaged with various government agencies, NGOs, CBOs, faith-based organizations, and other relevant platforms to address the issue of ending female circumcision. For instance, Pokot FM collaborated with organizations like NGOs such as; World Vision, carrying the message 'Stop FGM in Pokot Land' (ketyara mutata tipiin ompo korenyo) and CBOs like Maendeleo Ya Wanawake, promoting 'Stop the knife' (ketegha rotwo) to prevent female circumcision and offer an 'Alternative rite of passage' for girls and women through education and counseling instead of the actual procedure.

As a part of a holistic approach to eradicate the practice of female circumcision, *Asil po Pokot* radio programme through Pokot FM has been utilized as an advocacy tool to disseminate anti-female circumcision campaign messages to the community. Themes against female circumcision were also integrated into various programmes such as community meetings, religious gatherings, health talks, and discussions. According to Cheserem (2010), these platforms create a dynamic and non-threatening space for participants to reflect on their beliefs, attitudes, and values related to the practice. Given the substantial impact of media on people's lives, it can serve as a platform for public discourse and reevaluation of norms. The Theory of Planned Behaviour proposes that presenting information to cultivate positive attitudes towards a behaviour and emphasizing subjective norms that endorse the behavior are crucial. This motivates individuals to actively seek out more knowledge and information on preventing and eradicating the practice of female circumcision. This was effectively done through timely FGDs interactions and discussions.

## 4.4.1 Willingness to subject a daughter to Female Circumcision

Respondents were asked as to what extend based on *Asil po Pokot* programme would they agree tosubject their daughter to female circumcision.

The findings were shown in the figure 4.6 below.

Figure 4.6

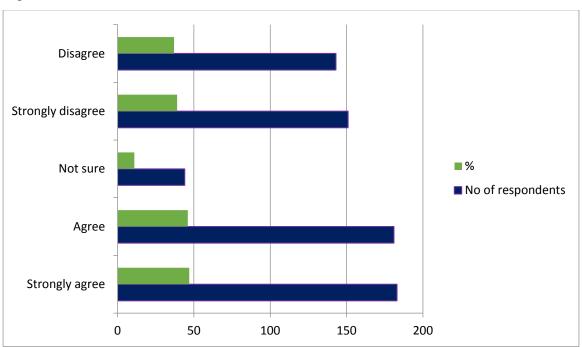


Figure 4.6 shows that 183 respondents (47%) strongly agree and 181 respondents (46%) agree willingly to subject their daughter to female circumcision, while, 151 respondents (39%) strongly disagree and 143respondents(37%) disagree to it, with, 44 respondents (11%) are not sure of what to do.

The results confirmed that majority of responents (93%) agree to take their daughter undergo the 'cut' while (76%) disagree. This indicates that female circumcisionis still a preference of Pokotcommunity. The community's beliefs and attitudes are associated with the 'cut' when it comes to "fully" growing a girl child, preparing her for marriage (UNICEF, 2005).

When the researcher asked FGDs participants on willingness to subject a daughter to female circumcision, a 36 year old lady stated, '' I underwent the 'cut'as it was demanded by my parents, little did I knew that it was so painful and I bleed a lot.

It almost costed my life. It is harmful practice." Another participant echoed, "I have heard from the *Asil po Pokot* programme that a nimder of girls have lost their precious lives when they bled to death after they were circumcised in remote villages in Sook and Kasei Locations of West Pokot. We need to discourage it completely. It is good that the government has outlawed it." A 60 year old mother in her discussion said, "Female circumcision is a norm and a right for all females to undergo to raise them properly to the status of womanhood and to get married. Women who face the "cut" are highly valued and respected by the society." We underwent it and proved ourselves as women of the land. As mothers we will support to take our girls to the rite."

Disobeying the practice can have severe consequences, including social exclusion, shame, stigma, and difficulties in finding a spouse. This explains why certain cultures continue to practice female circumcision despite the associated risks (Gruenbaum and Ellen, 2001). Female circumcision significantly impacts the social status and identity of the community, particularly for girls who are directed to undergo the procedure. Various initiatives have been implemented to address the needs and aspirations of mothers, daughters, fathers, husbands, and other community members. Given the significant role of female circumcision in the community, one of the key measures of success for these programmes are the development of culturally appropriate "Alternative rites of passage" (Abusharaf, 2006). According to the World Health Organization (2010), many cultures practice FGM/female circumcision due to the belief that it reduces a woman's sexual desire, making her more resistant to engaging in "illicit" sexual activities.

The painful process of opening a covered or narrowed vaginal opening, as well as the fear of being discovered, are intended to discourage women who have undergone this procedure from engaging in "illicit sexual intercourse." FGM/female circumcision is also associated with cultural ideas of femininity and modesty, such as the notion that women are "pure" and "beautiful."

# 4.4.2 Willingness to take a daughter to an "Alternative Rite of Passage"

Respondents were asked based on listening to the *Asil po Pokot* programme asto what extend would they agree totaketheir daughter to an ''Alternative rite of passage.'' The findings were shown in figure 4.7.

Figure 4.7

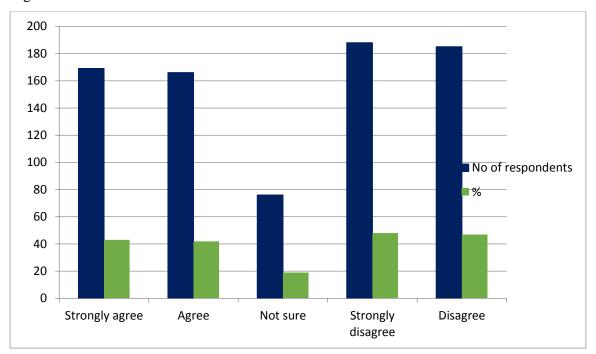


Figure 4.7 states that 169respondents (43%) who strongly agree and 166 respondents (42%) who agree willingly to take a daughter to an "Alternative rite of passage," while, 188 respondents (48%) strongly disagree and 185 respondents (47%) disagree, with 76respondents (19%) not sure.

The findings shows that 86% a significant number of the respondents expressed willingness to take their daughter to 'Alternative rite of passage," while majority 95% were opposed to the idea. This suggests that the acceptance of the "Alternative rite of passage" is gradually being recognized by the community members, although it may take some time for its full potential to be realized. However, the proposal to incorporate the "Alternative rite of passage" into the development of Pokot culture-friendly long-term interventions, such as utilizing forums such as; Asil po Pokotradioprogramme in collaboration with other anti-female circumcision agencies can help promote the rite and provide free education and boarding schools for girls in the region, ultimately leading to a change in behaviour to eliminate the practice.

During FGDs discussions, a 32-year-old mother shared, "After experiencing the pain and suffering of circumcision, I am in full support of and will advocate for other mothers to consider the 'Alternative rite of passage,' which has been endorsed by our experts through the *Asil po Pokot*radioprogramme. 'Conversely, another participant stated, "I will not subject my daughter to the 'Alternative rite of passage' as it may bring shame, dishonor, and stigma to our family.

My daughter could be labeled as a coward and may not receive respect from relatives and the community." According to Cheserem (2010), the lack of full acceptance of the "Alternative rite of passage" is attributed to its non-origin in the female circumcision communities. *Asil po Pokot*radio programme is in fore front advocacyin anti-female circumcision campaign through Pokot FM aims at safeguardingthe community against health risksassociated with the female circumcision.

#### 4.4.3 Willingness toendthe Female Circumcision Practice

Respondents were asked to what extend would they agree with the statements to stop the practice. The results were stated in figure 4.8 below



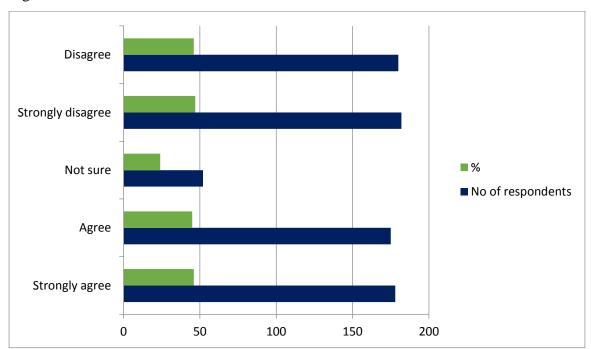


Figure 4.8 indicates that 179respondents (46%) strongly agree and 175respondents (45%) agreewillingly to end the practice, while, 182respondents (47%) strongly disagree 180respondents (46%) disagree, with 52respondents (13%) not sure.

The results reveal that majority of the respondents (93%) are against discontinuing of the female circumcision practice, while a significant number (91%) are in favour to put to an end the practice. It is evident that many respondents have not been fully convinced to alter their views and beliefs regarding female circumcision due to the high regard, respect, and importance placed on the practice within the Pokot community as a symbol of family prosperity.

During the FGDs forum, a 26-year-old woman expressed, "It is a positive step that the government has banned the practice, considering its harmful effects on the health of girls and women, as well as the violation of their rights, as highlighted by experts on the *Asil po Pokot* radio programme." Another participant added, "It is crucial to halt this practice, as many young girls drop out of school and marry early. If this continues, we will lack women in both private and public sectors. It is imperative to put an end to it." A 45-year-old mother shared her thoughts during the discussion, mentioning the challenges in stopping female circumcision, especially when it is carried out secretly in remote areas of the county. The practice is deeply ingrained and valued, serving as a significant cultural and social marker that is believed to prepare girls for marriage and ensure their protection.

The belief is so strong that parents view it as essential for their daughters' future success. This perception is deeply rooted in the community (UNICEF, 2017). The theory of TPB emphasizes the significance of intention in driving behaviour change. By providing information that shapes positive beliefs and attitudes, and highlighting subjective norms that support the desired behaviour campaigns as advocated by *Asil po Pokot* radioprogramme in anti-female circumcision to influence and persuade individuals and community to reconsider their stance on female circumcision.

#### **CHAPTER FIVE**

### SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

#### Introduction

This study was conducted with a goal of achieving the objectives, the impact of *Asil po Pokot* programmein anti-female circumcisioncampaign among women in Kipkomo Sub-County and presentation of the findings.

#### 5.1. Summary of the findings

The findings revealed that female circumcision prevalent ratehas gone down in West Pokt County and now stands at 44% (KDHS, 2019) compared previous statistics as; 96% (KDHS, 2008-2009) and 74% (KDHS, 2014). This is mainly due to the intensified efforts by *Asil po Pokot* radio programme through Pokot FM in anti-female circumcision campaign. in creating awareness of the implications of female circumcision. However, to some extend the female circumcision is still practiced in some parts of the study area. The rationale provided against female circumcision primarily revolved around the deeply ingrained cultural practices of the Pokot community. Nevertheless, the incidence of female circumcision may decrease due Based on the findings, it is evident that *Asil po Pokot* radio programme plays a crucialadvocacy role in creating awareness against female circumcision. These programmes can be customized to target individuals who need to be both motivated and committed to ending the practice.

The findings of objective twoindicats that *Asil po Pokot* radioprogramme has taken a goal-setting approach and implemented interventions through it's anti-female circumcision campaign, which aims to prevent this practice. It is expected that with time, the respondents' beliefs and attitudes may change, as informed by the theory of TPB in that. *Asil po Pokot* radio programme is playing a crucial role to provide information and knowledge in anti-female circumcision campaign that helps shape and modify behavior changewhile emphasize on achieving positive outcomes that can change their individula's beliefs and attitudes against the female circumcision and embrace the 'Alternative rite of passage.''

On the third objective of tehe srudy, the findings confirms that there is the willingness to put to an end to the female circumcision practice, which is the primary objective of activities carried out by the *Asil po Pokot* radioprogramme in anti-female circumcision campaign in West Pokot Count.. The programme throughPokot FM isin collaboration with various government agencies, NGOs, CBOs, faith-based organizations, and other relevant platforms that also address the issues of eradicating female circumcision in the community. For instance, *Asil po Pokot* programme collaborated with NGOs like the World Vision, in caonveying positive campaign messages and promos such as, 'Stop FGM in Pokot Land' (ketyara mutata tipiin ompo korenyo) and CBOs like Maendeleo Ya Wanawake, promoting 'Stop the knife' (ketegha rotwo) to prevent female circumcision and offer an 'Alternative rite of passage' for girls and women through education and counseling instead of the actual procedure..

#### **5.2 Conclusion**

The research aimes to assess the efficacy of the *Asil po Pokot* programme in creating awareness and dissuading the practice of female circumcision. The findings indicated that many women found satisfaction in the anti-female circumcision campaign programmes, as they provided valuable insights into the consequences of the practice. There is hope that over time, these programmes may contribute to the ending of female circumcision in favour of the 'Alternative rite of passage', which aligns with the objectives of the study. Despite the women acknowledging increased awareness of anti-female circumcision messages, they expressed their inability to change the prevailing narrative due to the deeply entrenched cultural norms and traditions of the Pokot community and that is why the female circumcision is still practiced in some areas of the West Pokot County.

The study also found that girls with some level of formal education were less likely to have undergone the procedure compared to those with no formal education. Additionally, mothers who had completed high school were less inclined to subject their daughters to female circumcision. The acceptance of the "Alternative rite of passage" is gradually being recognized by the community members, although it may take some time for its full potential and impact to be realized. However, the proposal to incorporate the "Alternative rite of passage" into the development of Pokot culture-friendly is along-term interventions.

These results indicates that with increasing knowledge messages about the negative effects of female circumcision in community can help prevent the 'cut'. *Asiil po Pokot* radio through Pokot FMaddresses issues that influence the well-being of thecommunity and offers a platform for individuals to voice their thoughts. feelings,ngs,perceptions, experienciences and to haveexpected outcomes which are crucial for maintaining focus and their healthy routines. Given the deep-rooted social and cultural significance of female circumcision, as well as its association with family status, mere willingness or ability to stop the practice may not be sufficient in the community where decision-making power is limited. Nevertheless, a shift in mindset is necessary. Female circumcision is a belief in Pokot culture as a woman's moral standing, social identity and societal status. It not only reinforces women's social subordination but also symbolizes girls' transition to adulthood and their full integration, (UNICEF, 2017).

#### **5.3 Recommendations**

The main objective of the *Asil po Pokot*radio programme is to raise awarenessof the effects of female circumcision by supporting and empowering girls and women who are at risk of female circumcision to understand their nature and make informed decisions and maintain their self-esteem and self-efficacy in the face of challenges, while also respecting the community's cultural norms and traditions regarding the rite of passage. *Asil po Pokot* radio programme is also to encourage survivors of female circumcision to share their stories, even if anonymously. This could help raise awareness and understanding about the issues surrounding female circumcision.

Educating girls and women about the consequences of FGM/female circumcision and creating a safe space for participants to discuss their perspectives and aspirations regarding the practice. As a result of increased awareness about the harmful effects of the procedure among parents and girls, the practice has declined in local communities. While communication efforts have been successful in raising awareness about the risks associated with female circumcision, they have not been as effective in bringing about the necessary attitude shift to end the femalecircumcision practice.. Given the conflicting views on female circumcision among Pokot women, with some supporting the practice and others opposing, it is essential for radio,government and anti-female campaign agencies to adopt more diplomatic and gentle approaches to discourage the practice and promote 'alternative rites of passage' for the girls and women in the community.

It is also crucial to develop culturally sensitive, long-term interventions tailored to the Pokot culture, such as utilizing the radio and traditional forums like elders' barazas to provide education opportunities for girls, including access to boarding schools until they reach 18 years of age. This will enable them to make well-informed decisions regarding the practice.

## **5..4** Suggestions for Further Research

With the recent expansion of FM's radio's coverage in West Pokot County, it is now possible to conduct a study in a different location or for men or both in anti-female circumcision campaign within West Pokot County to compare community members' opinions and views The initial research focused on the Efficacy of *Asil po Pokot*radio programme in anti-female circumcision through Pokot FM in educating the public about the implications of female circumcision, changing beliefs and attitudes and ending the practice. Moving forward, additional research should explore other socioeconomic issues affecting the community and investigate how FM's radio programmes can contribute to finding solutions..

#### REFERENCES

Abusharuf R M (2007) Female Circumcision: multicultural perspectives. Penn Press

Albarracin, Dolores; Shavitt, Sharon (4 January 2018). "Attitudes and Attitude Change". Annual Review of Psychology. 69 (1): 299–327.

Bandura, A. (1982). "Self-efficacy mechanism in human agency". American Psychologist. 37 (2): 122–147

"Council Functions". Media Council of Kenya. Archived from the original on 22 July 2011. Retrieved 26 February 2010.

Female genital mutilation/cutting, a global concern. Geneva: UNICEF; 2016. [26 April 2016]. http://data.unicef.org/resources/female-genital-mutilation-cutting-a-global-concern.html.

FORWARD (2007, 2010). Female Genital Mutilation. Education and Networking Fraser, C. and

Estrada S.R. (2001). *Community Radio* Handbook. Paris, UNESCO Project. www.fgmnetwork.org.

Festinger, L. (1957). A theory of cognitive dissonance. Stanford, CA: Stanford University Press

Government of Kenya (GoK). (Kenya Constitution (2010).

Government of Kenya, (2008), *West Pokot District Development Plan* (2008-2010). Republic of Kenya. Ministry for Planning and National Development.

GTZ (2007) Female *Genital Mutilation in Kenya*. www.gtz.de/en/dokumente/en-fgm-countrieskenya.pdf (accessed 30.01.2011)

Huang, J.; Chen, Y.; Zhu, Y.; Li, H.; Wen, Y.; Yuan, H; Song. J.; Liang, Y. *The understanding, attitude and use of nutrition label among consumers* (China). Nutr. Hosp. 2019, 31, 2703–2710.

KDHS. 2014 Demographic And Health Survey. *Kenya Natl Bur Stat*. Published online 2014. Kenyan Laws (2001, section 14). 2001 *Children's Act, Laws of Kenya*-Ministry of Gender, Sports, Culture and Social Services.

"Introduction" (Accessed 1oct. 2007). Kenya Population and Housing Census (2009). Kenya National Bureau of Statistics; Nairobi.

Kiletat Women group Report (1991). *Eradication of Female circumcision in West Pokot District Kenya*. (Unpublished)..

Kumar, K. (2003). Radio Broadcasting Policy in India: *A Study on Mixed Signals. Economic and Political Weekly*, Volume 38, Issue 22. Lazersfeld, P. F. (1940).

Lazersfeld, P. F. (1940). An *Introduction to the Study of Radio and its Role in the Communication of Ideas*: Radio and the Printed Page. New York: Duel, Sloan and Pearce..

Leventhal, H. A. (1970). *Findings and Theory in the Study of Fear Communications*. In L. Berkowitz (Ed.), Advances in Experimental Social Psychology (Vol. 5, pp. 120-186). Orlando, FL: Academic Press.

Maendeleo Ya Wanawake Organisation. (1991). Harmful *Traditional Practices that Affect the Health of Women and Children in Kenya*. Nairobi: Maendeleo Ya Wanawake.

MYWO and PATH (1993). "Quantitative Research Report on Female Circumcision in Four Districts in Kenya". Nairobi: Maendeleo Ya Wanawake.

McQuail, D. (2010). *Media Regulation*: Module 2, Unit 11. Department of Media and Communication, Attenborough Building, University of Leicester, University Road, Leicester.

McQuail, D. (1993). Mass Communications Models. London: Longman.

McGuire, W.; Lindzey, G.; Aronson, E. (1985). "Attitudes and Attitude Change". Handbook of Social Psychology: Special Fields and Applications,

Media Council of Kenya (2011), *The Performance of Vernacular Radio Stations*. Government Press, Nairobi

Mugenda, O. M. and Mugenda, A.G. (1999). Research Methods. Nairobi: Acts Press.

Nguyen et al., 2019 T.P.L. G. Seddaiu, P.P. Roggero. *Declarative or procedural knowledge?* Environ. Dev. Sustain., 1 (2000), pp. 235-25

. Schwarz JM, Rödelsperger C, Schuelke M, Seelow D. *MutationTaster evaluates disease-causing potential of sequence alterations*. Nat. Methods. 1976; 7:575–576. [Pub Med] [Google Scholar]

UNICEF (2017) Case Study on the End Female Genital Mutilation (FGM) programme in the Republic of Kenya= https://data.unicef.org/topic/child-protection/femalegenital-mutilation/. Published Feb 2020.

UNFPA and UNICEF (2020) SDG 5.3: Eliminating Female Genital Mutilation.

WHO, UNICEF, UNFPA (2016). A joint statement on eliminating Female Genital Mutilation. Geneva World Health Organization.

Wabwire, J.(2013). *The Role of Community Radio in Development of the Rural Poor*. New Media and Mass Communication ISSN 2224-3267 (Paper) ISSN 2224-3275 (Online) Vol.10, 2013 www.iiste.org.

WHO-UNICEF (1999). Female Genital Mutilation: Integrating the prevention and the management of the health complications into the curricular of nursing and midwifery.

WHO (2008). *Eliminating female genital mutilation: an interagency statement* UNAIDS, UNDP, UNECA, UNESCO, UNFPA, UNHCHR, UNHCR, UNICEF, UNIFEM, WHO.

## **APPENDICES**

APPENDIX 1: QUESTIONNAIRE					
SECCTION A: BACKGROUND INFORMATION					
Ref No					
Location					
My name is Jacob Ptoyo Daimoi, and I am a Maseno University Communication and Media Studies graduate student. In Kipkomo Sub County, I'm conducting research into the impact of <i>Asil po Pokot</i> programme through the Pokot FM radio in ending female circumcision practice This study has chosen your community as a participant of anti-female circumcision campaign activities. All given information will be kept private and anonymous, and will only be used fo academic purposes. Please feel free to respond to the questions in any way that you see proper					
1. What is your highest level of education?					
[] None					
[] Primary School					
[] Secondary School					
[] University/College\					
2. Your religious convictions					
[] Protestantism					
[] Catholicism					
[] Muslim					
Various (Specify)					
3. Are you married or single?					
[] a single					
[] Married					
[] Divorced					
[] Separated					
[] Widowed					

# SECTION B: IMPACT OF ASIL PO POKOT(CULTURE) PROGRAMME IN CREATING AWARENESS OF THE IMPLICATIONS OF FEMALE CIRCUMCISION

# $Respondents\ knowledge\ on\ anti-female\ circumcision\ messages$

1. What have you heard of female circumcision in Asil po Pokot radio programme?
Prohibited / outdated cultural practice [ ]
Complicated cultural practice [ ]
Makes a woman complete or proud []
It is prohibited by government []
It complicates child birth during delivery [ ]
Not sure [ ]
2. Do you listen to Asil po Pokot programme of Pokot FM?
Yes []
No [ ]
4. How long is the Asil po Pokot cprogramme?
15 mins [ ]
30 mins [ ]
45 mins [ ]
Not sure []
5. What appeals to you about Asil po Pokot programme and realated topics about anti-female
circumcision messages?
Presenter[]
Content[]
Interviews[]
6. Do you still practice female circumcision in your community?
Yes[]
No[]
If yes, what are the reasons behind it?

# SECTION C: EFFICACY OF ASIL PO POKOT RADIOPROGRAMME PROGRAMME IN CHANGING BELIEFS AND ATTITUDES TOWARDS FEMALE CIRCUMCISION

How much do you agree or disagree with the following statements using a five point Likert scale?

(a) Female circumcision is a prohibited
cultural practice
Strongly agree []
Agree []
Not sure []
Storngly disagree []
Disagree []
(b) Female circumcisionis a harmful practice
Strongly agree []
Agree []
Not sure []
Storngly disagree []
Disagree []
(c) Female circumcision makes a woman complete or proud
Strongly agree []
Agree []
Not sure []
Storngly disagree []
Disagree []
((d) Female circumcisionis outlawed by government
Strongly agree []
Agree []
Not sure []
Storngly disagree []
Disagree []
(e) it is time for the pokot community to endthepractice of female circumcision
Strongly agree []
Agree []

Not sure []
Storngly disagree []
Disagree []
SECTION D: EFFICACY OF ASIL PO POKOT RADIO PROGRAMME IN ENDING
THE PRACTICE
To what extend do you agree to the following using a five point Likert scale?
(a). I will willingly take my daughter to undergo female circumcision
Strongly agree []
Agree []
Not sure []
Storngly disagree []
Disagree []
(b) I will willingly take a daughter to alternative rite of passage
Strongly agree []
Agree []
Not sure []
Storngly disagree []
Disagree []
d) I will willingly end female circumcision
Strongly agree []
Agree []
Not sure []
Storngly disagree []
Disagree []

#### APPENDIX II: INTERVIEW GUIDE

Ref No	-
Location	

- 1. What are the topics covered in your Asil po Pokotradio programme?
- 2. Does your community still practice female circumcision?
- 3. Do*Asil po Pokot* radio programme through Pokot FM collaborate with the government, NGOs, CBOs and Faith-based organizations, professionals and experts in participation to address antifemale circumcisioncampaign messagess?
- 4. Do girls and women willingly undergo female circumcision or they are forced to?
- 5. Do you belief that *Asil po Pokot* programme adequately addresses the problems of female circumcision in the community?
- 6.. Do you get the women responses from the Asil po Pokot programmeon anti-female circumcision campaign?
- 7. Why do you think there is a persistence in female circumcision practice in the Pokot community?
- 8.. Are there some legislations or anti-female circumcisionlaws mentioned in *Asil po Pokot* radio programme in addressing female circumcisionissues?

### **APPENDIX 111: FOCUS GROUP DISCUSSION GUIDE**

Ref No		
Location		

- 1. Discussion abouton creating awareness of the implications of female circumcision
- 2.. Discussion about changing beliefs and attitudes against female circumcision.
- 3.. Discussion about willingness to end the female circumcision practice
- 4. Discussion about "Alternative rite of passage.".