EFFECTS OF FEMALE GENITAL MUTILATION ON GIRL CHILD EDUCATION: A CASE STUDY OF KURIA WEST SUB-COUNTY, MIGORI COUNTY, KENYA

 \mathbf{BY}

GATI EUNICE MAGIGE

EDU-G-4-0076-16

A RESEARCH PROJECT SUBMITTED TO THE SCHOOL OF EDUCATION IN PARTIAL FULFILLMENT OF THE REQUIREMENT FOR THE AWARD OF A DEGREE IN BACHELOR OF EDUCATON (ARTS) OF GRETSA UNIVERSITY.

NOVEMBER, 2020

DECLARATION

| I, the undersigned declare that this proposal is my original work and has never been submitted to any institution or university |
|---|
| GATI EUNICE MAGIGE |
| EDU-G-4-00076-16 |
| Signature Date 14/19/9090 |
| Submitted with my approval of the university supervisor |
| Mr. GAKWA |
| Signature Augo Date 14th Dec 2020 |
| GRETSA UNVERSITY |
| SCHOOL OF EDUCATION. |

DEDICATION

This research is dedicated to my beloved parents Mr and Mrs William Magige, my brother Chris and Charles, for giving me moral and financial support towards my research.

ACKNOWLEDGEMENT

My profound gratitude is to my supervisor Mr. Gakwa for his guidance through all stages of writing this research project.

LIST OF ABBREVIATIONS

FGM-Female genital mutilation

NGO-Non-governmental organizations

WHO-World Health Organization

TABLE OF CONTENTS

| DECLARATION | Error! Bookmark not defined. |
|-------------------------------|------------------------------|
| DEDICATION | ii |
| ACKNOWLEDGEMENT | iv |
| LIST OF ABBREVIATIONS | v |
| TABLE OF CONTENTS | vi |
| LIST OF TABLES | ix |
| LIST OF FIGURES | X |
| ABSTRACT | xi |
| CHAPTER ONE INTRODUCTION | 1 |
| 1.1 Background of the study | 1 |
| 1.2 Statement of the Problem | 1 |
| 1.3 Purpose of the Study | 2 |
| 1.4 Conceptual framework | 3 |
| 1.5 General objective | 4 |
| 1.5.1 Specific objective | 4 |
| 1.6 Research Questions | 4 |
| 1.7 Significance of the study | 4 |
| 1.8 Delimitation of the Study | 5 |
| 1.9 Limitations of the Study | 5 |
| 1.10 Assumptions of the Study | 5 |
| CHAPTER TWO LITERATURE REVIEW | 6 |
| 2.1 Introduction | 6 |

| 2. | 2 Relationship between FGM and students performance | 6 |
|----|--|------|
| 2. | 3 Contribution of FGM on dropout rates of girls from schools | 7 |
| 2. | 4 How FGM facilitates early marriages to school girls | 7 |
| 2. | 5 How FGM contributes to girl absenteeism in schools | 8 |
| 2. | 6 How to Eradicate FGM | 8 |
| 2. | 7 Theoretical Framework | . 10 |
| | 2.7.1 Liberal Feminism Theory | . 10 |
| CH | APTER THREE RESEARCH METHODOLOGY | . 12 |
| 3. | 1 Introduction | . 12 |
| 3. | 2 Research Design | . 12 |
| 3. | 3 Target Population | . 12 |
| 3. | 4 Sample Procedure | . 12 |
| 3. | 5 Methods of Data Collection | . 13 |
| 3. | 6 Research instruments | . 14 |
| | 3.6.1 Validity | . 14 |
| | 3.6.2 Reliability | . 14 |
| 3. | 7 Methods of Data Analysis | . 14 |
| 3. | 8 Measurement of variables | 16 |
| 3. | 9 Logistical and Ethical Considerations | . 17 |
| CH | APTER FOUR: FINDINGS AND DISCUSSION | . 18 |
| 4. | 1 Introduction | . 18 |
| 4. | 2 Instrument return rate | . 18 |
| 4. | 3 Respondents' demographic data | . 19 |

| 4.4 FGM and girl's performance in education | 21 |
|--|-------------|
| 4.5 FGM influences girls' dropout rate from schools | 22 |
| 4.6 Causes of girls dropout | 23 |
| Discussions of the findings | 25 |
| CHAPTER FIVE: SUMMARY OF FINDINGS, DISCUSSIONS, CONCLUSIONS, A RECOMMENDATIONS | |
| Introduction | 27 |
| 5.1 Summary of the findings | 27 |
| 5.2 Conclusions | 28 |
| 5.3 Recommendations | 28 |
| 5.4 Suggestions for further research | 29 |
| REFERENCES | 30 |
| APPENDICES | 32 |
| APPENDIX I: INTRODUCTORY LETTER | 32 |
| APPENDIX II: QUESTIONNAIRE FOR TEACHERS AND HEAD TEACHERS | 32 |
| APPENDIX III: QUESTIONNAIRE FOR STUDENTS | 30 |
| APPENDIX IV: WORK PLAN | 4 1 |
| ADDENDIY V RUDCET | 43 |

LIST OF TABLES

| Table 1 sample procedure |
|---|
| Table 2 Measurement of Variables |
| Table 3 Respondents gender |
| Table 4:Teachers' and head teachers' Age distribution in years |
| Table 5Teachers' and head teachers' academic qualification |
| Table 6 Teachers' and head teachers' responses on the extent to which FGM girls' education 21 |
| Table 7 Teachers' and head teachers' responses on the extent to which FGM influences school dropout |
| Table 8 Factors under Teachers and Head teacher's in consideration to causes of girls dropout 23 |
| Table 9Teachers' and head teachers' responses on the extent to which FGM facilitate early marriage |
| |

LIST OF FIGURES

| Figure 1 | Conceptual | framework | 3 |
|----------|------------|--|--------|
| 115010 1 | Comceptant | THE THE COLD STATE OF THE COLD | \sim |

ABSTRACT

The purpose of this study was to investigate the effects of female genital mutilation on girl child education in Kuria West Sub-County, in Migori County. The study employed a descriptive research design and targeted students in 10 public primary schools to represent the 95 public primary schools within Kuria West Sub-County. The main respondents were; primary school students and teachers. Stratified random sampling technique was used. The target population was divided into strata on the basis of subgroups. In this regard, a total of 80 respondents were sampled from the 10 primary schools selected of virtue of sex, age, role and the kind of information needed representing the 95 public primary schools. The study used questionnaire. Purposive sampling technique was utilized to help identify the interviewees and the female students. All respondents completed questionnaires and the questionnaires were edited for completeness and consistency, checked for errors and omissions and then coded. The quantitative data were processed with the help of Statistical Package of Social Science (SPSS) software while the qualitative data were subjected to content analysis from where relevant information was extracted. The data were presented using tables to give a clear picture of research findings at a glance. The findings of the study indicate the influence of socio-cultural factors such as Female Genital Mutilation (FGM), early marriages, school absenteeism and school dropout. It is the role of the government that parents and the community should be sensitized on the importance of girl child education. The results revealed that in Kuria West Sub-County, Migori County FGM has an influence on girls' performance in education, FGM influences girls dropout rates from schools. It also revealed that there is a relationship between FGM and girls absenteeism in schools. Based on the study findings the researcher recommended that the government should ensure that parents and the community are sensitized on the importance of girl child education. It also recommended that FGM should be understood by the community as a gender inequality ad genderbased violence, therefore elected leaders should lobby on its abolition. Further the study suggested that a study to be carried out on boys so as compare the findings with those of this study.

CHAPTER ONE INTRODUCTION

1.1 Background of the study

Female Genital Mutilation which is also known as critoredoctomy is defined by the World Health Organization (WHO, 2010) as 'all practices that involve partial or total removal of the female external genitals (or other injuries to the female genital organs) for non-medical reasons. The FGM is practiced as a cultural ritual by ethnic groups in 28 countries in sub-Sahara stretching from Senegal in West Africa to Egypt in North Africa, to Somali in East Africa and the Democratic Republic of Congo (DRC) in Central Africa and North East Africa and to a lesser extent in Asia, Middle East, South Africa and within immigrant communities elsewhere. Affected girls and women are also increasingly found in Australia, Canada, Europe, New Zealand, and the USA primarily amongst immigrants' communities who originate from societies where FGM is a traditional practice (UNICEF, 2009).

Usually the practice is typically carried out with or without anesthesia, by a traditional circumciser using a knife, razor or sharpened iron blade. The age of initiates varies from community to community: some at infancy, others before puberty stage and even to pregnant women. The practice occurs among all educational levels, social classes, and many religious groups although no religion mandates it. The procedure also varies from community to community or ethnic group (Population Council, 2007). FGM is pertinent to the achievement of four Millennium Development Goals (MDGs). MDG3-promote gender equality and empower women; MGD4-reduce child mortality, MDG5-reduce maternal mortality and MDG6-combat HIV/AIDS, malaria and other diseases.FGM is a gender-based human right violation (Efua Dorkenoo, 2014)

1.2 Statement of the Problem

As the young girls continue to engage in the practice majority of them will no longer concentrate on education rather considering themselves mature, start looking for future marriage partners who distract them from total participation in education as they wish to please the would-be husbands (Population Reference Bureau, 2001). Less concentration to education will cause them not to perform, drop out of school due to not performing well and fear to become a laughing

stock of their school level when they fail to perform. Absenteeism will become rampant to girls causing nonperformance and failure for entry in secondary level. In relation to psychological issues surrounding FGM, data suggests that following FGM, women were more likely to experience psychological disturbance, (have psychiatric diagnosis, suffer from anxiety, somatization, phobia, and low esteem) (Berg and Denison, 2010).

1.3 Purpose of the Study

The purpose of the study was to investigate the effects of female genital mutilation (FGM) on girls' education in Kuria-West Sub-County in Migori County, Kenya.

1.4 Conceptual framework

The conceptual framework is a diagram representing variables in the study. The framework illustrates the interrelationship between the dependent and independent variables.

Dependent variable

Figure 1 Conceptual framework

Independent variables

Performance CATS Examination School dropout Head teachers remarks Guidance and counselling remarks School absenteeism Class teachers remarks

1.5 General objective

To investigate the effects of female genital mutilation (FGM) on girl child participation in education in Kuria West Sub-County.

1.5.1 Specific objective

- 1. To investigate the effects of FGM on girl's performance in education in Kuria West Sub-County.
- 2. To determine the extent to which FGM affects girls' dropout rate from schools in Kuria West Sub-County.
- 3. To find out the relationship between FGM and girls' absenteeism in schools in Kuria West Sub-County.

1.6 Research Questions

The study attempted to address the following research questions:

- 1. Is there a significant difference in performance between girls are who are thought to have undergone FGM and those who have not?
- 2. Is there a significant difference in dropout rate from schools between girls who are thought to have undergone FGM and those who have not?
- 3. Is there a significant difference in girls' absenteeism in schools between those who are thought to have undergone FGM and those who have not?

1.7 Significance of the study

The study is important as it may enable the government to empower girls/women within the community and be sensitized on the importance of girl child education. The community should also be made aware that FGM is a gender inequality; therefore, the practice should be abandoned and totally banned from operation through lobbying by the elected leaders. The religious leaders also need to take a strong stand in disbanding the FGM since it is neither supported by the Bible

nor Quran nor any other religious book (DHS, 2008-2009). The educated society should stand as a role model to enhance the importance of girl/women education and eradicate FGM as gender inequality and gender-based violence.

1.8 Delimitation of the Study

Though FGM is practiced globally, the researcher limited herself to Kenya, on Kuria West Sub-County communities which have 54 percent of practice and especially to Kuria community. The reasons for this were:

Kuria has heterogeneous population which ensures a wide spread of potential respondents to the study.

1.9 Limitations of the Study

Not all the responses to the items in the questionnaire were sincere. It is common that most institutions are known to be suspicious of strangers and investigation and therefore release limited information.

1.10 Assumptions of the Study

The study was based on the assumptions that: the respondents will be willing to spare their time to respond to the items on the questionnaires in order to provide vital information for the research. All the respondents will be willing to cooperate so that the responses given may be accurate hence the whole study not to be flawed. The respondents will be willing to give out the full information considering that issues related to FGM and sex are treated sacred, secret and personal.

CHAPTER TWO LITERATURE REVIEW

2.1 Introduction

Chapter two gives an outline of the literature review in relation to the effects of FGM on girls' education in Kuria West Sub-County. Majority of people especially the educated have realized that the practice violates a person's right to health, security and physical integrity, the right to be free from torture and cruel, inhuman or degrading treatment and the right to life when the procedure results to death (UNIFA,2005) Since the FGM has no health benefits but rather harms girls and women by involving the removal and damaging healthy and normal female genital tissues, and interfering with the natural functioning of their bodies. The objectives of the study spell out how FGM affects the girls' performance in education in one way or another.

2.2 Relationship between FGM and students performance

FGM decreases the performance and attendance of girls at school. This is caused by the girls being taken out of school to be cut and the healing process taking a prolonged period resulting to further school absence. This has an effect in their performance. At times the preparations begin long before schools close; this causes psychological effects to girls (Berg and Denison, 2011). Total concentration for education is affected as girls are double minded on what they are to encounter or undergo over the holidays. In many cases, FGM has a negative impact on a girl's education. According to Population Reference Bureau (2001), there is a general correlation that the higher a woman's education level is, the less likely she is to be in favor of FGM practices. As FGM is considered by many groups to be a rite of passage into womanhood, it is likely that a girl's education will end in order for her to be married (Population Reference Bureau, 2001). Health complications that girls suffer as a result of FGM cause irregular school attendance, thus non-performance and low performance trend on education. Some girls experience a lot of health hazards associated with the practice. Others encounter permanent problems like being anemic due to high incidents of postpartum hemorrhage particularly where health services are poor or inaccessible (WHO, 2008) which will affect their school attendance and performance.

2.3 Contribution of FGM on dropout rates of girls from schools

FGM has a relationship with issues such as girls not completing their education and having poor literacy. This is seen when the majority of the girls who undergo FGM consider themselves ready for marriage and take education as a lesser priority. Thus, school priority is deterred. Initiation affects girls both school attendance and academic performance. The cut girls find it difficult to concentrate in their school studies as they know at the back of their minds that the next option is to get married (Population Reference Bureau, 2001). They become unteachable as they have no interest in learning. Much clashing with the school authority and the uncircumcised peers causes them to drop out of school. As the teachers punish them, engage them in activities which they term as childish, yet they are mature (through the cut) causes conflicts which girls will not condon until they finally drop out of school as they want to be recognized as mature girls.

As they undergo the rite, girls no longer concentrate on learning but rather on beauty for attraction by opposite sex, letter writing to boys within the school and outside school. Currently, the mobile phones take a greater part as they make calls and sending messages which are never known the content capturing their minds. Such causes lack of concentration and as they mount up with outside business, they stop performing and finally end up dropping out of school. The girls will no longer become socio-economic producers as they drop out of school. This causes them to be marginalized in the informal sector unlike those who concentrate in education.

2.4 How FGM facilitates early marriages to school girls

Majority of the girls once they have undergone FGM are considered mature and ready for marriage (Population Reference Bureau, 2001). They drop out of school and engage in family life. As the initiation marks the transition from childhood to adulthood (Embu Report, 2008), girls tend to exploit that chance by engaging in relations with men looking forward to be married. Some would have marriage partners arranged by their parents as to their desires to which family they wish their daughter to be married in. As the class concentration is diverted to their expectation of marriage, back to school after initiation, girls no longer concentrate on learning but rather become unruly and in disciplined. They are likely to play truancy and drop out of school in-order to fulfill their priority and expectation (marriage) (Population Reference

Bureau, 2001) and to protect their ego and self-esteem. They also tend to engage in sexual relations resulting to early pregnancies and early marriages becoming young mothers. According to 'The Star 'magazine number 2145 dated Wednesday, September 17,2014 page five, Plan International a local NGO stated that Kenya has one of the highest early marriage prevalence rates in the world .The Director ,Sherman said on average, one out four girls get married before their eighteenth birthday (The Star 17 Sept 2014).

2.5 How FGM contributes to girl absenteeism in schools

The FGM contributes to girls' absenteeism as the healing takes a prolonged duration which will force the initiated girls fail to attend school sessions (Population Reference Bureau, 2001). This automatically contributes to their nonperformance. As the girls are withdrawn from school by parents to attend the lengthy initiation ceremonies, they become absent in such duration of time until those ceremonies are over. By that time, it means that girls are not attending school, thus become even prone to absenteeism. Some of the girls who undergo the FGM experience some health complications which force them not to attend school regularly (Berg and Denison, 2011). This could be due to excessive bleeding during the operation or any kind of health hazard related to the practice (WHO, 2008) and such would keep the school going girls out of school.

There is also the tendency of feeling mature after the initiation. This makes the 'mature' girls not to be regular school attendants as their focus now is no longer in education but to other issues related to life so as to get spouses to marry them. The initiation ceremony takes long in preparation. As they continue to unfold, girls would miss school for such reasons as being taken to the seclusion for counseling before the actual initiation. Such also causes absenteeism from school. The psychological disturbance as the girls are aware that come certain time, they are to undergo the initiation causes them to be absent minded and also physically (Berg and Denison, 2011).

2.6 How to Eradicate FGM

Though the practice was made illegal, NGO and UN agencies agreed that information, instruction and persuasion are the only effective tools to change the practice at the grassroots (UNICEF, 1997). Progress of eradicating FGM can continue in a positive direction accounting to

measures relating and considering FGM within the framework of the millennium development goals, facilitating education on health and FGM .Improving and managing health complications of FGM, tackling the medicalization of FGM, more resources and funding on the psychological consequences of FGM. There should be increased advocacy and lobbying, increased law enforcement and equipping of law enforcing agents, increased use of media and recognizing role of faith-based organizations.

The practice is carried out by communities as a heritage of the past and is often associated with ethnic identity. FGM is a rite of passage into womanhood (Coexist ,2012) and necessary for a girl to go through in order to become a responsible adult member of the society. The traditionalists have such strong believes on FGM yet it is not by undergoing FGM that one can become a responsible member of the society. This is so because there are those communities that do not practice the rite yet their women are responsible and productive in the society. Also, through the eradication of FGM, those women who have not undergone the rite are still capable. Thus, FGM cannot stand as a measure to responsiveness of a person since that is a personal attribute. Since FGM is an inherent violation of human rights, it needs to be ended. Women in rural areas are more likely to undergo FGM. The variations of prevalence based on place of residence are probably rooted in such factors as the area's ethnic composition, dominant religion, affiliation, and level of urbanization (Carr& Dara, 2012).

Kenya is classified by UNICEF as a Group 2 country, where FGM prevalence is intermediate and only certain ethnic groups' practice FGM, at varying rates (UNICEF, 2005). The prevalence ranges from 0.8% in the west to over 97% in the North-East of Kenya (Population Council, 2004) just as among the Abagusii, yet according to UNICEF and other NGOs, medicalization obscures the human rights issues surrounding FGM and prevents the development of effective and long-term solutions for ending it (UNICEF, 2005).

FGM keeps thousands of girls out of school every year. This can be because parents take them out of school to attend lengthy initiation ceremonies, in which FGM is a key part. It can also be as a result of health complications girls suffer as a result of FGM causing them not to attend school regularly (Berg and Denison, 2010) This could be girls being anemic due to much bleeding

during the operation or other health hazards associated with the practice(WHO,2008). The more they fail to attend school, the more they fail to produce good performance.

Majority of girls once they have undergone FGM are considered ready for marriage, as a result, their schooling may be seen as of less priority. This will cause majority to drop off from school due to early marriages and becoming young parents (Population Reference Bureau, 2001). Their school participation is deterred and they will no longer become social-economic producers since their dreams have been shut down for failure to continue with their education. It is only through keeping girls in education that there can be a huge impact on helping to combat FGM. This is because if school girls can learn about the severe negative impacts of FGM, in future can use this knowledge to help their own daughters. They can only learn about their rights in school and develop the skills and confidence to claim them. Initiation affects girls' both school attendance and academic performance.

Although initiation marks the passage from childhood to adulthood (Embu Report, 2008), school authorities continue to treat initiated girls who return to school as children. They expect them to participate in certain activities and punish them in a manner which is considered inappropriate for 'adults'. Initiated girls also find it difficult to concentrate in their studies because their next expectation is marriage (Population Reference Bureau, 2001). They are difficult to teach and easily loose interest in learning. Those girls who have not been initiated tend to perform better in schools because they are more obedient and respectful to the teachers as opposed to the circumcised girls. They manage to get good education which compensates for them not being cut and increase their chances of being accepted in the community.

2.7 Theoretical Framework

According to the oxford dictionary, a theory is a formal set of ideas that is intended to explain why something happens or exists or are principles on which particular subject is based. This study adopted the liberal feminism theory.

2.7.1 Liberal Feminism Theory

The liberal feminism is an individualistic form of feminists' theory, primarily focusing on women's ability to show and maintain their equity through their actions and choices. Liberal

feminism argues that society holds the false belief that women are, by nature, less intellectually and physically capable than men thus discriminating against women in academy, forum, and the market place. The primary goal of liberal feminism is gender equality in the public sphere. The liberal feminism promotes the ending of domestic violence and sexual harassment which have to do with removing obstacles to women as living on an equal level with men. FGM acts against gender equality against girls/women. It is also a sexual harassment against girls/women.

As the theory supports the affirmative action legislation requiring employers and educational institutions to make special attempts to include women in the pool of applicants, on the assumption that past and current discrimination may simply overlook many qualified women applicants. Though there are the biological based differences between men and women, liberal feminism does not accommodate them as adequate justification for inequality such a wage gap between men and women. Feminism theory aims at understanding the nature of gender inequality. It focuses on analyzing gender inequality. Themes included in its exploration are discrimination, objection, (especially sexual objection) oppression, patriarchy, stereotyping, art history, contemporary art, and aesthetics (Gilligan & Carol, 2013). Since feminism theory advocates or supports the rights and equality of women; empowering women against sexism and sexist oppression, it is in deed the best theory that suits this research. FGM is gender discrimination since its primary goal is gender equality in public sphere. It is therefore against FGM which alters natural rights of girls/women.

CHAPTER THREE RESEARCH METHODOLOGY

3.1 Introduction

This chapter focuses on various methodologies of research. It covers the research design, target population, sample and the sampling procedure, research instruments, validity and reliability of the instrument, data collection and data analysis procedure.

3.2 Research Design

The research design for this study 'the influence of FGM in girls' participation in education' was a comparative survey research. Mugenda (2003) defines survey as an attempt to collect data from members of a population in order to determine present status of that population with respect to one or more variables. A comparative survey research compares results from more than one variable.

3.3 Target Population

This study targeted students in primary schools within Kuria West Sub-county. In this case the target population for the study was primary schools within the sub-county. The reason why the study only targeted the primary school students and not secondary students is due to the fact that primary students are the ones that are largely affected by the FGM practice since the practice is performed during the age of puberty (Population Council, 2007) and primary students are the ones in that stage. As students enter the Secondary level, they are usually above the stage of puberty; the surgical operation stage. The teachers are with the students daily and are able to identify their behavior before and after the practice. Teachers are able to detect any truancy in relation to their normal behavior and how they relate with those who have not yet gone through the practice; whether they are harsh and stigmatizing them or not.

3.4 Sample Procedure

To get sample population for this study, stratified random sampling technique was used. The target population was divided into strata on the basis of sub-groups in order to achieve desired representation from the various subgroups in the population for instance teachers and students. The researcher employed purposive random sampling to sample girls.

Table 1 sample procedure

| Respondent category | Total population | Sample percent | Sample size |
|--|------------------|----------------|-------------|
| Number of Primary schools | 95 | 10 | 10 |
| Number of primary school- heads | 95 | 10 | 10 |
| Number of guidance and counseling teachers | 190 | 10 | 20 |
| Number of girls (class 6-8) | 570 | 20 | 40 |
| TOTAL | 1000 | 10% | 80 |

3.5 Methods of Data Collection

The study used questionnaires to collect empirical data from the obtained sample size. Each item on the questionnaire was developed to address specific objective and research question. The questions in the questionnaire were structured (close-ended), unstructured (open ended) or contingency questions. The structured questions had a listing of all possible alternatives from which the respondents select the answer that best describes their situation while unstructured questions gave the respondents complete freedom to respond to the question in his/her own words. Contingency questions are subsequent questions that the researcher may employ to probe for more information. The questionnaires were administered to the respondents by the researcher.

3.6 Research instruments

3.6.1 Validity

According to Mugenda and Mugenda (2003) validity is the accuracy and meaningfulness of inferences based on research results. It is a procedure that qualifies an instrument or a tool used in research to be accurate, true, meaningful, correct and right, while Mugenda (1999) describes the validity in quantitative research as 'construct validity'. The construct is the initial concept, notion, question or hypothesis that determines which data is to be gathered and how it is to be gathered. They also assert that quantitative researchers actively cause or affect the interplay between construct and data in order to validate their investigations through application of a test or other processes. The involvement of the researcher in the research reduces the validity of the test. There was incorporation of data quality in the entire study process especially at data collection to include completion of questionnaires, legibility of records and validity of responses.

3.6.2 Reliability

Mugenda and Mugenda define reliability as the measure of the degree to which a research instrument yields consistent results of data after repeated trials. Reliability is influenced by random error in research. The researcher used test-retest method which involves administering the same instrument twice to the same group of subjects giving time lapse between the first and the second test. The researcher selected an appropriate group of subjects administering the test to the subjects keeping all initial conditions constant. These subjects were administered the same test after a duration of one to four weeks before administering the test for a second time, then correlate the scores from both testing periods to give reliable results.

3.7 Methods of Data Analysis

This process of data analysis involved editing completed questionnaires for completeness and consistency, error checking, omissions and then coding. Since the study was seeking to establish the extent to which independent variables influence the dependent variables the data were analyzed through descriptive analysis. The descriptive statistics was employed since it describes or summarizes the data. The purpose of descriptive statistics is to enable the researcher to meaningfully describe a distribution of scores or measurements using a few indices or statistics.

The questionnaires were dispatched by the researcher then coded, cleaned then data fed into the Statistical Package for Social Science (SPSS) for analysis and presented by use of tables.

3.8 Measurement of variables

Table 2 Measurement of Variables

| Objectives | Variable | Indicators | Measurement | Scale | Data collection methods | Tool o f Analysis |
|---|---|---|-------------------------|--------------------|-------------------------|----------------------------|
| To establish the influence of FGM and girl's performance in education | Independent FGM Dependent Girls' performance | CATs End term/year exams | Frequency Percentage | Ordinal Nominal | Questionnaires | SPSS |
| To determine the extent to which FGM influences girls' dropout rate from schools | Independent FGM Dependent Girls' dropout rate | Head teachers' report Guidance and counseling teachers' remarks | Frequency Percentage | Ordinal Nominal | Questionnaires | SPSS |
| iv. To find out the relationship between FGM and girls' absenteeism in schools. | Independent FGM Dependent Girls absenteeism | Report from class teacher Consistency in class work Weekly, monthly, termly attendances | Frequency Percentage | Ordinal Nominal | Questionnaires | SPSS |

3.9 Logistical and Ethical Considerations

The study was conducted in an ethical manner. The purpose of the study was explained to respondents and assured that the information given would be treated confidentially and their names would not be divulged. Informed consent form was sought from all the participants that agree to participate. According to Polit and Hungler (1997), the participation of human subjects in research, especially if one is researching experiences, was taken care of to ensure the participants are protected.

CHAPTER FOUR: FINDINGS AND DISCUSSION

4.1 Introduction

The purpose of this study was to investigate how FGM influence girls education participation in Kuria West Sub-Cunty. It was guided by the following objectives; establish the influence of FGM and girls' performance in education; to determine the extent to which FGM influences girls' dropout rate from schools; to establish if there is a significant difference in age of marriage between girls who have undergone FGM and those who have not; and to find out the relationship between FGM and girls' absenteeism in schools. The study targeted students in 10 public primary schools. The main respondents were; primary school students, teachers and head teachers, a total of 75 respondents participated in the study. The study used questionnaires to collect empirical data from the obtained sample size. This chapter presents the instrument return rate, demographic information of the respondents and the factors influencing girls' performance in primary education.

4.2 Instrument return rate

The researcher administered 80 questionnaires to the respondents during data collection. A response rate of 50% is adequate for analysis and reporting, a rate of 60% is good and a response rate of 70% and over is excellent (Mugenda and Mugenda, 1999). However, all the 80 questionnaires were returned from the respondents, representing 100% response rate. This response rate was very good for the study. This response rate was realized since the researcher personally visited the primary schools-built rapport with the respondents on the purpose of the study.

4.3 Respondents' demographic data

The personal information of the respondents was sought to get an insight on the respondents' characteristics in relation to the study's objectives. This included gender, academic qualification, age, students' classes and religion. Table 3 presents respondents gender distribution.

Table 3 Respondents gender

| Gender | Teachers | Percentage | Head teacher | percentage |
|--------|----------|------------|-----------------|------------|
| | F | % | F | % |
| Male | 15 | 75.0 | 8 | 80.0 |
| Female | 5 | 25.0 | 2 | 20.0 |
| Total | 20 | 100.0 | 10 | 100.0 |
| | | | | |

Information in Table 3 shows that 75%, of the teachers and 80% of head teachers who participated in the study were males respectively. This was an indication that in the study area participation in education suffers gender disparity, therefore gender hinders girls' participation in education due to the unequal representation.

The study necessitated finding out respondents' age distribution; the teachers and head teacher responses were as shown in Table 4.

Table 4: Teachers' and head teachers' Age distribution in years

| | Frequency | % | Frequency | % |
|----------|-----------|-------|-----------|-------|
| Below 30 | 4 | 20.0 | 0 | 0.0 |
| 31-40 | 5 | 25.0 | 1 | 10.0 |
| 41-50 | 10 | 50.0 | 2 | 20.0 |
| Above 50 | 1 | 5.0 | 7 | 70.0 |
| Total | 20 | 100.0 | 10 | 100.0 |

From the study findings half of the teachers (50%), were aged between 41 and 50 years, while 70% of the head teachers were over 50 years. This was an indication that the respondents were in a position to give accurate information on the study items due to their advanced ages. Teachers and head teachers academic qualification were also sought and presented as shown in table 5 below.

Table 5Teachers' and head teachers' academic qualification

| Qualification | Teachers | percentage | HT | percentage |
|---------------|----------|------------|----|------------|
| Certificate | 5 | 25.0 | 0 | 0.0 |
| Diploma | 10 | 50.0 | 1 | 10.0 |
| Undergraduate | 5 | 25.0 | 6 | 60.0 |
| M. Ed | 0 | 0.0 | 2 | 20.0 |
| Phd | 0 | 0.0 | 1 | 10.0 |
| Total | 20 | 100.0 | 10 | 100.0 |
| | | | | |

Table 5 shows that half of the teachers (50%), were diploma holders while majority, of their school heads (60%), were graduates. This shows that teacher qualification was not a hindering factor to girls' participation.

4.4 FGM and girl's performance in education

To establish whether FGM affects girls' performance in education the researcher sought to compare the students on the performance between those that were thought to have undergone and those that had not. Therefore, teachers and head teachers were requested to rate the extent to which FGM causes low performance trend in girls' performance in class. Their responses were as shown in table 6.

Table 6 Teachers' and head teachers' responses on the extent to which FGM girls' education

| Response | Teachers | | Head teachers | Head teachers | |
|------------------|-----------|------------|---------------|---------------|--|
| | Frequency | Percentage | Frequency | Percentage | |
| Very high extent | 10 | 50.0 | 7 | 70.0 | |
| High extent | 5 | 25.0 | 1 | 10.0 | |
| Moderate extent | 5 | 25.0 | 1 | 10.0 | |
| Low extent | 0 | 0.0 | 1 | 10.0 | |
| Total | 20 | 100.0 | 10 | 100.0 | |

From the study findings in Table 6, half of the teacher respondents (50%) and 70%, head teachers indicated that FGM causes low performance trends in girls' performance. While only 10%, of the head teachers felt that the effect was only at a low extent. This was an indication that FGM was a contributing factor to girls' nonperformance in education. It was thus important for the study to find out the performance of girls in class so as to compare the difference in both categories of girls. The findings were presented in table 7.

4.5 FGM influences girls' dropout rate from schools

To establish whether FGM influence girls' dropout rate from schools the researcher sought to compare the students on the dropout rates between those that had undergone through the cut and those that had not. Table 8 shows teachers and head teachers' rating on the extent to which FGM influences dropout rates of girls.

Table 7 Teachers' and head teachers' responses on the extent to which FGM influences school dropout

| Response | Teachers Frequency | Percentage | Frequency | Head teachers | Percentage |
|------------------|-----------------------|------------|-----------|------------------|------------|
| Very high extent | 5 | 25.0 | 7 | | 70.0 |
| Moderate extent | 5 | 25.0 | 1 | | 10.0 |
| High extent | 10 | 50.0 | 1 | | 10.0 |
| Low extent | 0 | 0.0 | 1 | | 10.0 |
| Total | 20 | 100.0 | 10 | | 100.0 |

Majority, 90%, of the head teachers and all the teacher indicated that FGM influence girls' dropout rate at a very high extent. This was an implication that many girls leave school before the completion of the whole cycle after undergoing through the practice. Then the researcher sought to find out what are the priorities of girls after going through

FGM.

4.6 Causes of girls dropout

Table 8 Factors under Teachers and Head teacher's in consideration to causes of girls dropout

| | F | % | F | % | F | % | F | % |
|--|----|-------|---|------|----|-------|---|------|
| FGM contributes to girls' dropout rates from school | 18 | 80.0 | 2 | 20.0 | 9 | 90.0 | 1 | 10.0 |
| FGM has a relation with issues like girls not completing their education | | 70.0 | 3 | 30.0 | 6 | 60.0 | 4 | 40.0 |
| School attendance and academic performance is usually affected after FGM | | 90.0 | 1 | 10.0 | 10 | 100 | 0 | 0.0 |
| FGM causes girls' to focus more on outside issues than on education | | 100.0 | 0 | 0.0 | 10 | 100.0 | 0 | 0.0 |

Table 8 shows that majority of the teachers agreed that FGM contributes to girls' dropout rates from school since they were in agreement with 90%, of the girls' becoming indiscipline after undergoing the rite of passage, 70%, attendance and academic performance are usually affected after FGM and FGM causes girls' to focus more on outside issues than on education at, 100%. The study findings also revealed that head teachers were in agreement that FGM has a relation with issues like girls not completing their education.

Table 9Teachers' and head teachers' responses on the extent to which FGM facilitate early marriage

| | Agreen | nent | Disagreement | | Agreement | | Disagreement | |
|---|--------|-------|--------------|------|-----------|-------|--------------|------|
| | f | % | f | % | f | % | f | % |
| Does FGM early marriage to school girls | 20 | 100.0 | 0 | 0.0 | 9 | 90.0 | 1 | 10.0 |
| Parents arrange for marriage partners for their girls' though they are still at | 19 | 90.0 | 1 | 10.0 | 10 | 100.0 | 0 | 0.0 |
| school Majority of girls drop out of school due to early | 17 | 70.0 | 3 | 30.0 | 6 | 60.0 | 4 | 40.0 |
| pregnancies FGM can destabilize girls learning | 19 | 90.0 | 1 | 10.0 | 10 | 100 | 0 | 0.0 |
| After the practice girls focus more on marriage life than on education issues | 20 | 100.0 | 0 | 0.0 | 10 | 100.0 | 0 | 0.0 |

Table 9 shows that 100%, of teachers and 90%, of head teachers indicated that FGM facilitates early marriage to school girls, they indicated that this is largely contributed by parents who arrange for marriage partners for their girls' though they are still at school. At other instances girls who undergo through FGM engage in relationships thus 70%, and 60% of teachers and head teachers respectively indicated that majority of girls drop out of school due to early pregnancies. Hence the study findings imply that after the practice girls focus more on marriage life than on education issues reducing their participation.

Discussions of the findings

This section deals with discussions of the study findings that compare and contrast with other empirical findings reviewed in chapter two.

According to the study it has come out clearly that FGM has an influence on girls' performance. This study finding concurs with Berg and Denison (2011) who asserts that psychological effects experienced during the FGM affects girls' performance.

The respondents reported that FGM contributed to drop out rates of girls from schools in Kuria West Sub-County Migori County The respondents reported that when majority of the girls who undergo through FGM consider themselves mature, education is taken as of lesser priority. Since FGM prepares girls for marriage, majority of the girls wish to fulfil what it takes for a cut woman to get married. These findings concurs with Population Reference Bureau (2001), report which states that when girls undergo through FGM they wish to please the would- be husbands, hence less concentration is given to education. Since there is no performance in schools girls start feeling ashamed when defeated in class work and they end up dropping out of school to alleviate from shame. Girls become unteachable as they clash with school authority when given school

activities they tend to see as childish thus dropping out of school to be free.

Based on the study findings respondents reported that FGM facilitates early marriage to school girls in Kuria Sub-County. It was reported that majority of the girls who undergo the FGM hardly join the neither secondary education nor tertiary level. They get married off immediately

after undergoing through FGM. These findings agreed with Embu Report (2008) which states that initiation is a transition from childhood into adulthood. Girls tend to exploit that chance by engaging themselves in relationships with men looking forward to marriage. The respondents also pointed out that some marriages are usually arranged by girls own parents. Girls tend to play truancy and engage in sexual relations resulting to early pregnancies and early marriages.

The respondents reported that FGM contributed to girls' absenteeism in schools in Kuria West Sub-County. The respondents felt that when girls are taken out of school due to early preparations for FGM, prolonged healing and withdrawal from school to attend the lengthy initiation ceremonies, girls become absent in such a duration of time. This concurs with Population Reference Bureau (2001) which states that FGM healing takes a prolonged duration which forces initiated girls fail to attend school sessions. The findings also agree with Berg and Denison (2011) who points out that some girls who undergo FGM experience some health complications which force them not to attend school regularly and also become absent mind-set due to the psychological disturbance associated to FGM. This causes the girls to be physically absent of school and also be absent minded through physically in school.

CHAPTER FIVE: SUMMARY OF FINDINGS, DISCUSSIONS, CONCLUSIONS, AND RECOMMENDATIONS

Introduction

This chapter presents the summary of the findings of the study, discussions, conclusions and recommendations arrived at. It also gives suggestions for further studies.

5.1 Summary of the findings

The influence of Female Genital Mutilation was analyzed, the results were expected to establish if FGM affects girls' participation in education, the extent to which FGM influences girls' dropout rate from schools and absenteeism of girls who have undergone through FGM in schools in Kuria West Sub-County Migori County, Kenya.

According to the results, FGM influences girls' performance at a very high extent. Majority, 80%, of the girls that are thought to have undergone through FGM registers below average performance, while 70%, of the girls who have not undergone through the cut perform averagely. From the study findings most, 40%, of the students who are thought to have undergone through the process concentrate more on outside school issues which distract them from paying attention to teachers which is translated in their dismal performance.

From the results of the study 90%, and 100% of the teachers and head teachers respectively indicated that FGM influence girls' dropout rates at a very high extent. Majority of the students, 80%, agreed that more girls who are thought to have undergone through FGM are more likely to drop out of school than those that have not. These findings concurred with information from 90%, 60% and 55% of the teachers and head teachers respectively who indicated that girls who are thought to have undergone through FGM hardly continue with secondary education nor join tertiary education. The teachers, 80% expressed their disappointment in parents who embrace the practice and encourage their girls to discontinue schooling and engage in other practices related to FGM. The head teachers reported and showed records of the majority of girls dropping out of school after FGM while the guidance and counselling teachers expressed efforts of following girls from their homes after dropping out of school in order to continue with education.

5.2 Conclusions

The findings of the study have revealed that FGM influences girls participation in education, FGM influences girls dropout rate from school. There is a relation between FGM and girls absenteeism in school in Kuria West Sub-County Migori County.

The findings further revealed that when girls engage in FGM, they lack basic education which causes gender disparity in realization of opportunities in life.

5.3 Recommendations

Based on the findings and conclusions of the study, the researcher made the following recommendations;

The government should ensure that parents and the community are sensitized on the importance of girl child education.

Faith based organizations (FBOs) should educate people on dangers related to FGM practice since it's neither supported by any religious book. This is will ensure that girls are not endangered due to the continued practice of these vice.

FGM should be understood by the community as a gender inequality and gender-based violence, therefore elected leaders should lobby on its abolition.

The government through local administration and other children activists should be in the creation of rescue centers within the districts so that those girls who are forced to undergo FGM can have a safe place to run to.

The community heritage conservers should introduce other alternative rite of passage to replace the FGM so that there is no vacuum left in rearing the girl child. This is bound to continue unifying the communities in their initiation practices so as to pass on their heritage to the new generation to come.

5.4 Suggestions for further research

Since the research was carried out on girls, the researcher recommends that a similar stand be carried out to boys as to why they do not perform to compare the findings of the standing with those of this study. The study can also be replicated with adjustments in scope and valuables to determine any similarities or differences with the findings of the study. The study should also be conducted using the interview schedule as the research instruments with the head teachers, teachers, chiefs and students as the target population.

REFERENCES

Belrendt, A. Moriz, S, (2005). Post traumatic stress disorders and memory problems after female Genital Mutilation. *Am J Psychiatric*, 162(5), 1000-1002.

Berg, R. C, & Denison, E. (2011). Does Female Genital Mutilation/cutting (FGM/C) Affects Women's sexual Functioning, A Systematic Review of the Sexual Consequences of FGM/C. Sexuality Research and Social Policy

Boyle, Y., Elizabeth, L., Heger, V. (2002). Female genital cutting, cultural conflicts in the global community. The John Hopkins University Press.

Carr, P. & Dara, V. (2012). Female genital cutting: Findings from the Demographic and Health Surveys Program. Calverton, MD: Macro International Inc.

Chege, J., Askew, I., Igras, S., & Mutesh, J.K. (2004). Testing the effectiveness of integrating community-based approaches for encouraging abandonment of female genital cutting into CARE'S reproductive health programmes in Ethiopia and Kenya. Washington DC: Population Council.

Creswell, J.W. (2013). Research Design: Qualitative and Quantitative Approaches Thousand Oaks: Sage Publications.

Denzin, N., & Y. Lincoln, (2014). Handbook of Qualitative Research. Sage Publications California.

Crichton, J. (2012). Mother-daughter communication about sexual maturation Abstinence and unintended pregnancy: Experience from an informal settlement in Nairobi.

Dirie, M., & Lindmark, G. (2012). The Risk of Medical Complications after Female Circumcision East Africa Media. *Journal of Medicine*, *3*(5), 45-90

Rymer J. (2003). Female Genital Mutilation Gynecol. *Journal of Nursing*, 3(6), 56-90

Dorkenoo, U., & Efua, K.(2014). Female genital mutilation, cutting and the rose. The practice and its prevention. United Kingdom monitoring rights group.

Dorkenoo, E. (2012). Combating Female Genital Mutilation: an agenda for the next decade.

Dymer, J. (2003). Female genital mutilation curr abslet Gynecol. *Journal of Medicine*, 13(3), 185-190

Eke N, & Nkanginieme, K.E.O. (2016). Female Genital Mutilation: A Global bug that should not cross the millennium bridge' World J Surg, 23 (10): 1082-1087

FIDA Kenya (2009). Protection Against Female Genital Mutilation: A Review of the Implementation of the Children's Act. Published by Federation of Women Lawyers

Galtung, A. (2015). Peace by Peaceful means: Peace and Conflict, Development and Civilization International Peace Research Institution.

Gilligan, P. & Carol, J. (2013). In a different voice: Women's Conceptions of Self and Morality in Harvard Educational Review.

Government of Kenya, (2011). Children's Bill, Kenya Gazette Supplement no. 18 (Bill no. 4); 2001 Human Rights Reports, 2011 US Department of state, Kenya Country Report on Human Rights Practice.

Hungi, N. (2010). Differences in pupil's achievements in Kenya Implications for Policy and practice. International Journal of Educational development.

IRIN, (2005). FGM amongst the Maasai Community of Kenya Razors' Edge- The Controversy of Female Genital Mutilation.

Kenya Demographic and Health Survey, (2003). Health Survey. Nairobi

Kenya National Bureau of Statistics, (2008) .Embu district Multiple Indicator Cluster survey

APPENDICES

APPENDIX I: INTRODUCTORY LETTER.

Dear respondent.

I am a student of Bachelor in Education (B.E.D) at GRETSA University carrying out a study on

the effects of FGM, on girl child education in Kuria West sub county. Your cooperation will be

highly appreciated. Your responses to this questionnaire will be used only for the purpose of this

study and will be private and confidential.

Let me take this chance to thank you in advance for taking part in this study.

Yours faithfully

GATIEUNICE MAGIGE.

APPENDIX II: QUESTIONNAIRE FOR TEACHERS AND HEAD TEACHERS

Instructions: This questionnaire is to collect data for purely academic purposes. All information will be treated with strict confidentiality. Do not write your name or any identification on this questionnaire. This questionnaire is divided into respondent sections. All respondents MUST complete their sections. Put tick $(\sqrt{})$ to the correct option, or fill in appropriately the blanks provided as applicable to you.

What is your gender?

Male () b) Female ()

The age group of respondents

a) Below 30 () b) 31-35 () c) 36-40 () d) above 41

What is your academic background?

Certificate () b) Diploma () c) Undergraduate d) others () d) None ()

How long have you been in the profession?

Less than 3 years () b) 3-5 years () c) 5-7 years () d) over 7 years ()

| How do you promote girls participation in education? |
|--|
| |
| Do you believe that FGM affects girls participation in class? |
| Yes () b) No () |
| Do you identify any significant difference in general performance between girls who have undergone FGM and those who have not gone through it in various subjects a) Yes () b) No () |
| FGM and low performance trend in performance |
| How does FGM contribute to low performance trend in performance? |
| Very high extent () c) High extent () |
| Moderate extent () d) Low extent () |
| To what extent do you agree with the following statements on FGM and low performances trend in performance rank by placing a tick in the appropriate place |
| 1-Strongly disagree 3- Moderately agree 5-Strongly agree |
| 2-Disagree 4-Agree |
| Factors under consideration 1 2 3 4 5 |
| FGM contributes to low performance trend in girls' performance |

| Factors under consideration | 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|---|
| FGM contributes to low performance trend in girls' performance | | | | | |
| FGM decreases the performance and attendance of girls' at school | | | | | |
| The prolonged healing after the practice contributes to low performance | | | | | |
| There is a general correlation between woman's education and FGM practice | | | | | |
| Health hazards experienced during the practice may cause poor performance | | | | | |

FGM and girls' drop out from schools.

To what extent does the FGM contribute to girls' dropout rates from schools?

a) Very high extent b)

b) High extent

| c) Moderate extent | d) Very low extent |
|--------------------|--------------------|
|--------------------|--------------------|

11. To what extent do you agree with the following statements on FGM and girls' drop out rates from school? Rank by placing a tick in the appropriate place.

Strongly agree

Moderately agree

Moderately agree

Strongly disagree

Disagree

| Factors under consideration | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|---|---|
| FGM contributes to girls' dropout rates from school | | | | | |
| Girls' become indisciplined after undergoing the rite of passage | | | | | |
| FGM has a relation with issues like girls not completing their education | | | | | |
| School attendance and academic performance is usually affected after FGM | | | | | |
| FGM causes girls' to focus more on outside issues than on education | | | | | |

FGM and early marriages

How does FGM facilitate early marriage?

A. Very high extent B.High extent C.Moderate extent D.Low extent

E.Very low extent

To what extent do you agree with the following statements on FGM and girls early marriages? Rank by placing a tick in the appropriate place.

Strongly agree

Disagree

Moderately agree

Agree

Strongly agree

| Factors under consideration | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|---|---|
| Does FGM facilitate early marriage to school | | | | | |
| girls | | | | | |
| Parents arrange for marriage partners for their girls' though they are still at school | | | | | |
| Majority of girls drop out of school due to early pregnancies | | | | | |
| FGM can destabilize girls learning | | | | | |
| After the practice girls focus more on marriage life than on education issues | | | | | |

FGM and girls' absenteeism from school

To what extent does FGM contribute to girls' absenteeism from schools

Very high extent c) mod

c) moderate extent

e) Very low extent

high extent

d) Low extent

To what extent do you agree with the following statements on FGM and girls absenteeism from schools? Rank by placing a tick in the appropriate place

1. Strongly agree

3. Moderately agree

5. Strongly agree 2. Disagree

4. Agree

| Factors under consideration | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|---|---|
| The prolonged preparation and healing keeps girls out of school | | | | | |
| Girls' absenteeism from school contributes to poor performance | | | | | |
| Some health complications experienced forces girls to be out of school regularly | | | | | |

| Tendency of feeling mature conflicts with school rules and regulations keeping girls out of school | | | |
|--|--|--|--|
| Psychological disturbance can be linked to the FGM | | | |

| As a school administrator how many estimated cases of girls do you administer who drop out of school due to FGM participation per year. How do you help |
|---|
| them? |
| How many cases of early marriages are identified within your school within a year? How do you reduce the problem of early marriages within your school? |
| Are early marriages linked to student to student or student with outsiders? How do you treat such cases? |
| As a school administrator, when a girl drops out of school within your school, what measures do you take especially to take the girl back to school? |
| What challenges do you encounter in administration in trying to ensure peace and harmony prevails within the institution due to the presence of two groups within the school? |
| Thank you for participating |

APPENDIX III: QUESTIONNAIRE FOR STUDENTS

Instructions: This questionnaire is to collect data for purely academic purposes. All information will be treated with strict confidentiality. Do not write your name or any identification on this questionnaire. This questionnaire is divided into respondent sections. All respondents MUST complete their sections. Put tick $(\sqrt{})$ to the correct option, or fill in appropriately the blanks provided as applicable to you.

| What is y | our gender? |
|-----------|---------------------|
| Male () | b) Female () |
| The age g | group of respondent |

| b) Below 30 () b) 31-35 () c) 36-40 () d) above | 41 | | | | | |
|--|---------|--------|--------|---|---|--|
| What is your academic background | | | | | | |
| Certificate () b) Diploma () c) Undergraduate d) others | () | l) Noi | ne () | | | |
| How long have you been in the profession | | | | | | |
| Less than 3 years () b) 3-5 years () c) 5-7 years () d | l) ovei | 7yea | ırs () | | | |
| How do you promote girls participation in education | | | | | | |
| | | | | | | |
| Do you believe that FGM affects girls participation in cla | SS | | | | | |
| a) Yes () b) No () | | | | | | |
| Do you identify any significant difference in general undergone FGM and those who have not gone through it () | - | | | | _ | |
| FGM and low performance trend in performance | | | | | | |
| How does FGM contribute to low performance trend in | erforn | nance | | | | |
| Very high extent () c) High extent () | | | | | | |
| Moderate extent () d) Low extent () | | | | | | |
| To what extent do you agree with the following statemen in performance rank by placing a tick in the appropriate Moderately agree 5-Strongly agree 2-Disagree 4-Agree | | | | | | |
| Factors under consideration | 1 | 2 | 3 | 4 | 5 | |
| FGM contributes to low performance trend in girls' performance | | | | | | |
| FGM decreases the performance and attendance of girls' at school | | | | | | |

The prolonged healing after the practice contributes to low performance performance

| There is a general correlation between woman's education and FGM practice | | | |
|---|--|--|--|
| Health hazards experienced during the practice may cause poor performance | | | |

FGM and girls' drop out from schools.

To what extent does the FGM contribute to girls' dropout rates from schools?

Very high extent ()

b) High extent ()

c) Moderate extent ()

d) Low extent ()

To what extent do you agree with the following statements on FGM and girls' drop-out rates from school? Rank by placing a tick in the appropriate place.

Strongly agree

Agree

Moderately agree

Strongly disagree

Disagree

| Factors under consideration | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|---|---|
| FGM contributes to girls' drop out rates from school | | | | | |
| Girls' become indisciplined after undergoing the rite of passage | | | | | |
| FGM has a relation with issues like girls not completing their education | | | | | |
| School attendance and academic performance is usually affected after | | | | | |
| FGM | | | | | |
| FGM causes girls' to focus more on outside issues than on education | | | | | |

FGM and early marriages

Very high extent
high extent
moderate extent D. Low extent E. Very low extent
To what extent do you agree with the following statements on FGM and girls early/child marriages? Rank by placing a tick in the appropriate place.
Strongly agree
Disagree
Moderately agree
Agree
Strongly agree

| Factors under consideration | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|---|---|
| Does FGM facilitate early marriage to school | | | | | |
| girls | | | | | |
| Parents arrange for marriage partners for their girls' though they are still at school | | | | | |
| Majority of girls drop out of school due to early | | | | | |
| pregnancies | | | | | |
| FGM can destabilize girls learning | | | | | |
| After the practice girls focus more on marriage life than on education issues | | | | | |

FGM and girls' absenteeism from school

How does FGM facilitate early marriage?

To what extent does FGM contribute to girls' absenteeism from schools

Very high extent c) moderate extent e) Very low extent

high extent d) Low extent

How do you create a conducive learning environment between the group which has undergone FGM and that which has not

| As a guiding and counseling teacher in your school, which are the most rampant conflicts within the students that you solve and how do you solve them? |
|--|
| How do you guide and counsel the girls who get pregnant in school in order for them to continue with schooling after they deliver? |
| How do you counsel the students who have not undergone FGM so that they can feel accepted within the school environment? |
| How do you address issues within the school so that all groups remain equal |
| How do you address issues of maturity within the school so that all groups are balanced? |
| |

APPENDIX IV: WORK PLAN

| ACTIVITY | sept. | Sep 2019 | OCT | OCT | JAN | FEB | MARCH |
|--------------------|-------|----------|------|------|------|------|-------|
| | 2019 | | 2019 | 2019 | 2020 | 2020 | 2020 |
| Proposal writing | | | | | | | |
| Troposur writing | | | | | | | |
| Developing data | | | | | | | |
| collection tool | | | | | | | |
| Protect data | | | | | | | |
| collection tool | | | | | | | |
| Proposal defense | | | | | | | |
| Data collection | | | | | | | |
| Data analysis | | | | | | | |
| Report writing and | | | | | | | |
| submission | | | | | | | |

APPENDIX V BUDGET

| Types of expenditure | Cost |
|----------------------|--------|
| | |
| Typing | 1200 |
| D. C. | 1000 |
| Printing | 4000 |
| Transport | 4000 |
| Transport | 1000 |
| Food | 2500 |
| | |
| House | 5000 |
| | |
| Total | 16,700 |
| | |