# Hop, Step, and Jump: The Art, Craft, and Music of Transforming Traditional Education in the North Rift Region of Kenya

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### Abstract

Education for promoting ethnic and social cohesion can be challenging in a multicultural country like Kenya, where strong traditional beliefs and practices form the core of an individual culture's social norms. One such practice is Female Genital Mutilation (FGM), a traditional initiation rite of passage for girls that the Kenya Government outlawed in 2011. Despite its illegality, some rural communities still practice it as part of their emphasis on traditional education. Community-based programs through various non-profit organizations have tried to root out the practice. However, in some communities in the North Rift Region of Kenya, the progress has been a hop and a step, but sometimes there has been no jump. As part of ongoing research that began in December 2020, this paper presents findings from studying the Tugen people, a subgroup of the Kalenjin, who occupy the Baringo County of Kenya. The findings show that even though some Tugen girls still undergo FGM, the most robust programs put in place by the non-profit groups focus on art, craft, and music as alternatives to the traditional initiation rites. Such programs have made significant contributions to reducing the number of girls undergoing FGM in the Tugen community and thereby improving their access to formal education.

Keywords: Female Genital Mutilation, Culture, Alternative Rites of Passage, Tugen, Kenya



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### Introduction

Even though in 2011, the Kenyan Parliament enacted the law to prohibit female genital mutilation (FGM), the practice is still prevalent among various ethnicities in Kenya because of differences between modern and traditional views on the subject. FGM, a traditional education practice in many Kenyan communities, is often in violation of the fundamental rights of women and girls, including the right to education and the highest attainable standard of health (Chesang et al., 2022). Despite the legislation to protect girls from FGM, secrecy and deeply rooted cultural and religious beliefs continue to drive the practice in different communities in Kenya (Loloju et al., 2024).

As part of research that began in December 2020, this paper presents the findings from the Tugen people, a subgroup of the Kalenjin community in Kenya, on the alternative programs put in place by non-profit groups to contain FGM prevalence. The paper begins with an appreciation of the legislative and policy frameworks the Government of Kenya has put in place and proceeds to highlight the indispensable role of alternatives to FGM using a case study of the Tugen community.

## Anti-FGM Legal and Policy Framework in Kenya

FGM is a serious violation of the rights of girls in Kenya, as it is in many parts of the world (Kandala, et al., 2019). Kenya has taken significant legal and policy measures to combat FGM, although the practice still exists. Article 2(4) of the *Constitution of Kenya*, 2010 states that any law, including customary law, inconsistent with the Constitution is void, and any act or omission in contravention of the Constitution is invalid. These rights are also mentioned in various international treaties and covenants that are part of Kenya's laws under Articles 2(5) and 2(6) of the Constitution. Some of the relevant instruments that call for the elimination of harmful practices include the 1948 Universal Declaration on Human Rights, the 1966 International Covenant on Economic, Social and Cultural Rights, the 1979 Convention on Elimination of All Forms of Discrimination Against Women (CEDAW), the 1981 African Charter on Human and People's Rights on the Rights of Women in Africa (Maputo Protocol). Since FGM in Kenya is primarily based on customary or cultural practices that negatively affect the fundamental rights of women and girls—such as the right to life, health, dignity, education, and physical integrity—it is inconsistent with the Constitution and, therefore, void.

The primary legislation on FGM in Kenya is the *Prohibition of Female Genital Mutilation Act of 2011*. This Act prohibits the practice of FGM to safeguard against the violation of a girl's and woman's mental or physical integrity. The Act prescribes penalties for those who perform or aid in the procedure. It classifies FGM into three types: clitoridectomy (Type I), excision (Type II), and infibulation (Type III). This classification omits Type IV of FGM, which includes procedures such as genital pricking, cosmetic surgeries, piercing with tongs or scissors including razor blades, labiaplasty, and incising and stretching of the clitoris or labia, among others not classified by the World Health Organization. The *Children Act of 2022* includes provisions for the protection of children from harmful cultural practices, including FGM. Thus, any practice that endangers the health and well-being of children, including FGM, is prohibited. Under section 144, a child needs care and protection if the child has been or is likely to be subjected to FGM, intersex genital mutilation, child marriage, or other customs and practices prejudicial to the child's life, education, or health, among others.

The National Policy for the Eradication of Female Genital Mutilation (Sessional Paper No. 3 of 2019) is a revision of the National Policy on the Abandonment of Female Genital Mutilation of 2010 adopted before Kenya's Constitution 2010. The revised policy seeks to enhance initiatives to eliminate FGM in Kenya. The Key policy strategies for achieving this include intergovernmental coordination, strengthened multi-sectoral interventions, partnerships and community participation, empowerment of girls and women, research, and information/ knowledge management on FGM. In addition, the National Policy on Gender and Development (Sessional Paper No. 02 of 2019) addresses gender issues broadly and includes components aimed at combating harmful traditional practices such as FGM. It emphasizes gender equality and the protection of women and girls from violence.

Genital Mutilation Act Mutilation Board, established under the Prohibition of Female Genital Mutilation Act, is the main government agency that enforces anti-FGM measures in Kenya. The Board has formulated a national policy and strategy for eradicating FGM, conducted a situational analysis of the practice, which informed the inclusion of FGM in the competence-based curriculum, and continues to create awareness and engagement among the various stakeholders on FGM. Other key players are the National Gender and Equality Commission (whose mandate includes protecting the rights of women, youth, and children, among others), judicial and enforcement bodies involved in investigating and prosecuting FGM cases, and non-governmental organizations (NGOs) efforts through awareness campaigns and education programs aimed at changing attitudes and behaviors related to FGM. For example, the CEDAW Committee's General Recommendation No. 14 of 1990 considers FGM as a form of discrimination against women and girls. It urges states to take all necessary measures to eliminate this harmful practice, including legal measures, educational programs, and community engagement.

## The Alternatives Rites of Passage

Since FGM was banned in Kenya, the country has made headway in its efforts to combat the practice. There has been a downward trend in the rate of FGM, largely attributed to the robust legal and policy measures, goodwill in all political spheres, and anti-FGM advocacy by non-profit organizations. Such efforts have made it possible for many girls in the historically FGM hotspots to access formal education and be champions of alternatives to FGM.

Despite the robust legislative efforts, challenges to fully eradicating FGM in Kenya remain primarily because of the strong traditional beliefs and practices that form the core of some communities (Mukadi, 2017). The Kenya Demographic and Health Survey (KDHS) data for 2022 estimates the prevalence of FGM at 15% among women aged 15-49 years. This rate, though still high, is slightly lower than the 21% and 38% rates recorded in 2014 and 1998, respectively (Thomsen & Nilofer, 2023; Kenya National Bureau of Statistics, 2014) meaning that the country has been on the right trajectory in combating FGM. However, this progress is not uniform across the country as there has been a hop and step, particularly in northeastern and coastal Kenya, where communities continue to practice FGM at higher rates (United Nations Children's Fund, 2020). Many such areas are affected by severe drought, which hinders anti-FGM efforts (Thomsen & Nilofer, 2023). Rural women and girls with less education and poor livelihoods tend to have a greater risk of FGM. Others do it secretly as a private family affair to avoid stigma, ridicule, and exclusion of families and men who marry uncircumcised girls from important cultural activities. Some have shifted the period of performing FGM, for instance, from December holidays to April and August holidays, to evade law enforcers (Anti-FGM Board, 2019). There is also a marked trend where girls are being mutilated at young ages (between 5-9 years) to conceal the practice (Anti-FGM Board, 2019). Some perpetrators also disguise themselves under section 19 of the Prohibition of FGM Act by engaging health professionals in the conduct of FGM either at home or in public or private clinics (KOGS, 2023). It is noted, for instance, that 19.7% of girls (0-14 years) and 15% of women (15-49) living with FGM were cut by a medical professional (Kenya National Bureau of Statistics, 2014). This trend, also known as medicalization, is a major threat to anti-FGM efforts (COVAW, 2024).

In addition, the FGM framework is weak and poorly coordinated, especially in the education, health, legal, and economic segments. While the law provides for victim support, ensuring that FGM survivors have access to comprehensive medical and psychological support remains a critical challenge (Sheikh et al., 2023). Enforcement and anti-FGM initiatives have also been hampered by a lack of robust mechanisms for reporting and investigating FGM cases, inadequate resources, inadequate capacity, inadequate FGM data to inform policy programming, and resistance by communities that claim encroachment of their cultural and religious identity. In some regions, there is still a lack of awareness about the legal prohibitions against FGM and associated health risks. The greatest reduction in FGM is seen in western Kenya as well as in the Kikuyu and Kalenjin communities (United Nations Children's Fund, 2020). This reduction has been possible because of multifaceted approaches ranging from community engagement, education, empowerment, and support for victims to alternative rites of passage. Thus, as much as anti-FGM progress has been a hop and step in some places, there has been no jump in other areas where alternatives to FGM are increasingly being embraced.

## Case Study of the Tugen Traditional Education and FGM

The Tugen is a Kalenjin subtribe that occupies Baringo County and some parts of Nakuru and Elgeyo Marakwet counties in the Rift Valey region of Kenya. They speak the Tugen language, which is Nilotic. Historically and culturally, and as a Kalenjin subgroup, the Tugen are related to the Pokot, Nandi, Terik, Marakwet, Kipsigis, Sabaot, Ogiek, and Keiyo subtribes. There are two subgroups of Tugen: the highland Tugens (also known as Sammor), who practice pastoralism and agriculture, and the North Tugen (also known as Arror), who are nomadic pastoralists.

The Tugens are skilled craftsmen specializing in poisonous arrows, which they sell to neighboring communities such as the Nandi. Tugen traditional homes are circular huts with a cedar post at the center, which is considered sacred as a place for ancestors. Tugen culture is rich in traditions and customs handed down through generations. Traditional activities include farming, pastoralism, and various ceremonies related to rites of passage and community gatherings. One such rite of passage is FGM, which has traditionally been ingrained in the community based on strong customs. Other rites of passage are traditional naming, male circumcision, initiation ceremonies, and burial rites. The Tugen system of education was traditionally a lifelong learning journey that spans from birth to death, involving several stages of growth (Kiptala, 2017). This system, common in African traditional societies, focuses on passing down tribal knowledge, skills, and values from elders to children through oral teachings and hands-on activities. Instructors, chosen from within the family or clan, impart this education informally through stories, legends, riddles, and songs and by demonstrating tasks for the young to imitate. Emphasizing practical learning, the system involves children actively participating in and performing skills such as carving, masonry, clay working, cloth making, cooking, and home management.

The traditional education system aims to prepare boys and girls with skills suited to their gender roles. Girls were historically educated to be proficient mothers and manage their households. At the same time, boys were trained for roles such as warriors, farmers, heads of families, and other male-centric jobs. This system was centered on preparing children for adult roles through systematic socialization into societal norms, religions, and moral values. The community viewed education as vital for ensuring that children grew into knowledgeable and disciplined adults, with education primarily occurring within the family home. Parents were responsible for properly educating their children in tribal customs, and failure to do so could lead to the family's disgrace. Education involves both formal and informal methods. Children learned through hands-on experiences with skilled craftsmen and apprenticeships, acquiring trades like blacksmithing or herbal medicine. This process included direct teaching and practical involvement, such as working with blacksmiths (like *Kiptombul* from *Tirimionin*) to learn toolmaking or with herbalists (like *Chepkerichin* and *Chepsakitin*) to understand medicinal practices (Kiptala, 2017).

Children also received instruction through constant corrections, warnings, and participation in household chores, with boys learning from their fathers and girls from their mothers. Girls assisted their mothers with tasks such as caring for their younger brothers and sisters, weaving grass baskets, grinding grain, and making small clay pots. Children gathered in the evenings before their parents, grandparents, or elders to learn about their ancestry, tribal origins, customs, and traditions (Kiptala, 2017). This education aimed to support the children's physical development, build endurance, and enhance their memory. Initiation rites, including ear-piercing and tooth removal, marked stages of development and transition from childhood to adolescence. These rites included formal lessons integral to the community's educational system (Kiptala, 2017). At puberty (12-15 years), circumcision was a crucial rite of passage, signaling full community membership. This rite involved rigorous training in endurance, respect, and social responsibilities. Boys and girls learned to handle pain, respect elders, and fulfill societal roles. The training aimed to instill community values, ethics, and personal responsibility, preparing them for adult life and responsibilities within their family and society.

Overall, Tugen education blends practical skills, social norms, and moral teachings to prepare children for their future roles, ensuring they develop the necessary qualities for contributing effectively to their community. It includes listening to and imitating riddles, myths, proverbs, and folk tales, which helped introduce children to their traditions. The community constitution (*Kigirei*), established by elders' councils, is crucial for maintaining order, with severe penalties for violations. Oral literature, which includes myths and folk tales, teaches ethical values and social norms. Proverbs (*kalewenaniik*) are employed in conversations to impart moral lessons and guidance on behavior. Health education for children involves teaching safety practices and hygiene.

## FGM and the Tugen Traditional Education

As various studies indicate, FGM is a deeply ingrained cultural practice within the traditions of the Tugen people. Traditionally, FGM was carried out by a traditional practitioner using rudimentary tools without anesthesia. Despite the efforts of different anti-FGM campaigners and the Kenyan government, eliminating the practice has proven difficult in the Tugen community. According to Mukadi et al. (2015), the Tugen men's participation in household and community socioeconomic development is greatly influenced by the marriage of circumcised or uncircumcised women. Most of them prefer to marry circumcised women due

to the cultural belief that they would be respected members of the community (Mukadi et al., 2015). As barbaric as this tradition seems, historically, a circumcised Tugen woman is considered more respectable and more likely to be assigned leadership roles than the uncircumcised one.

The decision to mutilate a Tugen girl involves significant input from both family and community members, with immediate family—particularly the girl, her mother, her father, and peer groups—playing a crucial role, and fathers ultimately making the final decision (Mukadi et al., 2015). The reasons given by the community for FGM are varied and context-specific. The practice holds substantial social and economic importance at multiple levels for the Tugen. At the community level, FGM is viewed as a crucial rite of passage from girlhood to womanhood, instilling values and training and preparing girls for future responsibilities, thereby maintaining family stability. At the individual level, FGM is believed to protect girls, secure their social acceptance and respect, enhance marriage prospects, ensure cleanliness, and curb sexual promiscuity by diminishing sexual sensitivity. It is also thought to prevent excessive clitoral growth and preserve virginity. At the household level, FGM can be seen as a means of generating wealth through high bride prices, achieving social acceptance, and gaining honor and recognition.

## **Alternatives to the Tugen Traditional Initiation Rites**

Whether social or economic, the Tugen justifications for FGM sustain the practice and contribute to its continuation (Mukadi et al., 2015). However, the Tugen people have started embracing alternative rites of passage initiated by non-profit organizations in the region. The alternative programs employed in the Tugen region to mark the transition to adulthood involve a combination of local advocacy, education, ceremonies, and support efforts tailored to the unique cultural and social dynamics of the Tugen people. They seek to maintain the cultural practice of initiating girls to adulthood without FGM. Various alternative rites of passage (ARP) programs are encouraged by NGOs such as AMREF Health Africa, The Girl Generation, So They Can, and community-based organizations (CBOs) like the Tugen Women Network.

**Transition Ceremonies and Music:** Music plays a central role in the various Tugen ceremonies and festivals that mark the transition to adulthood. They involve traditional songs and dances (with musical instruments) and display the traditional Tugen wares, feasts, and community gatherings, which replace the traditional FGM ceremony. The songs enhance memory, discipline, self-expression, and communication. The girls are educated about their cultural values and the beauty of the Tugen people during such ceremonies. Through the traditional songs, the girls are guided on how they should prepare for marriage, seek out responsible husbands, and gain respect as mothers. For instance, Dandelion Africa, a Kenyan NGO, has been organizing and funding ARP ceremonies in Nakuru, Baringo, Kajiado, and Narok counties, where girls are secluded in seminars and imparted with positive cultural values while being encouraged to reject FGM (Ngugi & Rasto, 2024).

**Art, Craft, and Education Workshops:** Week-long workshops are held to educate girls about the immediate and long-term health risks of FGM, positive norms and values, self-esteem, life skills, girls' sexual and reproductive rights, and their empowerment. The workshops, often mixed with dances, pottery, or arts and crafts activities, culminate in a symbolic celebration of the girl's transition into adulthood with blessings from cultural elders and leaders. The art and craft sessions include, for instance, making traditional cowhide thong

(*Riguita*) for tethering cows, anklets, necklaces made of beads (preferably from the *Kipungeiwa* tree) and sisal strings (*kilembele*), among others. Sometimes, the workshops involve public denouncement of FGM. For instance, in November 2023, So They Can facilitated a three-day awareness workshop for students and community elders from various places in Baringo (including the Tugen community) (So They Can, 2024). About 105 children from local primary schools were engaged in the workshop. They were educated about child rights, the dangers of FGM, drug and substance abuse, leadership skills, and upholding good values in the community, among other critical aspects.

Community Engagement and the Role of Elders: Some NGOs have facilitated dialogue with the Tugen community with assistance from the traditional elders, especially when they want to educate the community about ARP. The elders are instrumental in mobilizing community resources and supporting the NGO initiatives, collaborating with them to end the practice. Although the strong cultural dynamics still hinder progress, there has been significant change because of the support provided by the elders. Dandelion Africa, for example, has been training youth and women as trainers of trainers (ToTs) for anti-FGM crusades (Ngugi & Rasto, 2024). The ToTs, in turn, hold community and campus dialogues with youth, community elders, and religious leaders about ARP. Through such programs, some conservative members of the communities have begun to appreciate that FGM is a violation of human rights and that it is time to say no to such practice. Through grassroots advocacy, boys are empowered to change the cultural attitudes and beliefs around gender roles and norms and protect their sisters from FGM.

### Conclusion

FGM continues to be a big challenge in communities like Tugen, where there are deeply ingrained cultural practices. To effectively encourage the abandonment of FGM, a supportive environment must be created. This requires a strong commitment from the stakeholders to implement appropriate social measures, alternative rites of passage, robust legislation, and effective advocacy, education, and awareness efforts. Effective enforcement of the legislation requires adequate resources and human capacity, as well as robust mechanisms for reporting and investigating cases of FGM. However, as this paper indicates, alternative rites of passage focusing on traditional music, arts and crafts, and community engagement are critical for eradicating or reducing FGM, especially in communities that still hold onto this outdated cultural practice. The lessons from the Tugen show the need for communities to embrace such alternatives without necessarily completely abandoning their culture but recognizing the importance of aligning with the human rights of girls and women. There needs to be a firm policy action to promote such alternatives among the Tugen people, gender equality, and equal rights for both boys and girls, as well as for women and men.

#### References

- Chesang, J., Ndavi, P. M., Kimani, S., Jebet, J., & Meroka-Mutua, A. (2022). Female Genital Mutilation Prevention and Care Content in Health-Related Courses in Universities in Nairobi: Current State and Way Forward. Nairobi: ACCAF.
- COVAW. (2024). *No Justification: Medicalisation of Female Genital Mutilation in Maasai Communities A Case Study of Narok County, Kenya*. Nairobi: COVAW. Retrieved August 12, 2024, from https://covaw.or.ke/wp-content/uploads/2024/01/Medicalization-of-FGM-Report-Final.pdf
- Kandala, N.-B., Nnanatu, C. C., Atilola, G., Komba, P., Mavatikua, L., Moore, Z., . . . Shell-Duncan, B. (2019). A Spatial Analysis of the Prevalence of Female Genital Mutilation/Cutting among 0–14-Year-Old Girls in Kenya. *International Journal of Environmental Research and Public Health*, 1-28.
- Kenya National Bureau of Statistics. (2014). *Kenya Demographic and Health Survey 2014*. Nairobi: KNBS.
- Kiptala, S. J. (2017). The Origin of the Tugen of Baringo County and their Practice of Indigenous Education: A Historical Perspective. *Scholars Journal of Arts, Humanities and Social Sciences*, *5*(7A), 676-685.
- KOGS. (2023, February 17). Statement of Commitment to End Medicalisation of Female Genital Mutilation in Kenya. Retrieved from Kenya Obstetrical and Gynaecological Society: https://kogs.or.ke/wp-content/uploads/2023/04/KOGS-Statement-on-Ending-FGM-1.pdf
- Loloju, B., Thomsen, A., & Nilofer, S. (2024, February 11). Support for survivors key to achieving social transformation to end Female Genital Mutilation: Creating safe spaces for open dialogue. Retrieved from Unicef: https://www.unicef.org/kenya/stories/support-survivors-key-achieving-social-transformation-end-female-genital-mutilation#:~:text=Partners%20like%20Men%20End%20FGM,Initiative%20in%20T ana%20River%20and
- Mukadi, E. B. (2017). Influence of Female Genital Mutilation on Girl Child's Education Participation in Primary Schools: A Case Study of the Tugen Community in Baringo County, Kenya. *International Journal of Contemporary Applied Researchers*, *4*(6), 188-198.
- Mukadi, E. B., Kiptiony, G. J., & Sindabi, A. M. (2015). Tugen Men and Women's Perception on FGM in Relation to their Participation in Household and Community Socioeconomic Development Activities in Baringo County. *Kabarak Journal of Research & Innovation*, 3(1), 21-31.
- Ngugi, J., & Rasto, D. (2024, February 24). *Campaigners step up fight against FGM* . Retrieved from Kenya News: https://www.kenyanews.go.ke/campaigners-step-up-fight-against-fgm/

- Oloo, H., Wanjiru, M., & Newell-Jones, K. (2011). Female Genital Mutilation Practices in Kenya: The Role of Alternative Rites of Passage A Case Study of Kisii and Kuria Districts. London: Feed the Minds.
- Republic of Kenya. (2019). Sessional Paper No. 3 of 2019 National Policy for Eradication of Female Genital Mutilation: Towards a Sociatey Free from Harmful Cultural Practices. Nairobi: Ministry of Public Service, Youth and Gender.
- Republic of Kenya Anti-FGM Board. (2019). Anti-Female Genital Mutilation Board Strategic Plan 2019-2023.
- Sheikh, M. M., Cheptum, J. J., & Mageto, I. G. (2023). Factors Linked to Female Genital Mutilation Practice Among Women Living In Alungu Village of Mandera County, Kenya. *East African Health Research Journal*, 7(1), 109-115.
- So They Can. (2024, February 12). *Alternative Rite of Passage for Girls in Baringo*. Retrieved from So They Can: https://www.sotheycan.org/blog/arp-for-girls/
- Thomsen, A., & Nilofer, S. (2023, February 6). *Men and boys key to ending FGM in Kenya:*\*\*Active involvement of men and boys can help end female genital mutilation. Retrieved from UNICEF: https://www.unicef.org/kenya/stories/men-and-boys-key-ending-fgm-kenya#:~:text=According%20to%20the%20recently%20released,Yet%2C%20progres s%20is%20being%20made
- United Nations Children's Fund. (2020). *A Profile of Female Genital Mutilation in Kenya*. New York: UNICEF.