DECLARATION

This research project is my original work and has not been submitted for the award of
degree in any other university.

Signature------------------------    Date---------------------

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K50/63733/2010

This research project has been submitted for examination with my approval as University
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List of Abbreviations

AMARC---------- World Association of Community Broadcasters
CRAK--------------- Community Radio Association of Kenya
FGM---------------- Female Genital Mutilation
FM------------------ Frequency Modulation
ICT---------------- Information Communications Technology
KDHS---------------- Kenya Demographic and Health Survey
KII------------------ Key Informant Interview
KNCHR-------------- Kenya National Commission of Human Rights
MSC---------------- Most Significant change
NGO----------------- Non-Governmental Organization
UNESCO------------ United Nations Education Scientific and Cultural Organizations
UNDP---------------- United Nations Development Programme
ABSTRACT

The purpose of this study was to investigate the role of Mugambo FM in female genital mutilation awareness in Tigania West Constituency, Meru County, Kenya. The objectives of the study are: to investigate how Mugambo FM has been used to create awareness about FGM and the abandonment of the practice and to examine the attitudes of the community members towards radio programmes addressing FGM. The target population for this study was listeners and managers of this community radio station. The target population was chosen carefully to include all gender and age groups. Quota sampling was used to select eight focus groups of secondary school girls who were listeners of the radio station with each group having fifteen respondents. This amounted to 120 girls. Eighty parents were purposively selected and a manager of Mugambo FM was selected. The research instruments included interviews for the focus groups, questionnaires for the parents and Key Informant Interview with a manager working with Mugambo FM. Data was analyzed and presented in a detailed report on the various remarks from the focus groups meetings, the station manager and parents’ questionnaires.

The results of this study show that FGM is still practiced in the study locale though secretly. This justifies the purpose of this study which was to investigate the role played by Mugambo FM in creating FGM awareness. It is clear from the study that Mugambo FM plays an important role in creating FGM awareness and could be contributing to the reported decline in the practice among other efforts aimed at fighting FGM. It is also apparent that participatory nature of the FGM programmes made them appealing to the audience hence increasing listenership. Therefore majority of the community members had positive attitudes towards Mugambo FM and programmes about FGM. This hence led to increased awareness of FGM. Furthermore, invitation of the experts to tackle FGM issues increases awareness thereby promoting FGM practice abandonment. Mugambo FM collaborated with Government agencies; Community based organizations and religious organizations in creating FGM awareness and also fighting the practice. However, other than awareness creation on dangers of FGM, Mugambo FM should also focus more on the anti-FGM laws to put record straight on real legal consequences of the practice. Moreover, given the secretive nature of the FGM practice, investigative journalism is vital in order to find more about FGM in order to enhance more FGM awareness.
CHAPTER ONE

INTRODUCTION

1.1 Background Information

According to a United Nations Educational, Scientific and Cultural Organization (UNESCO) report on community radio, there are more than 20,000 radio stations in the world, and more than 2 billion radio receivers. Unlike television and other sophisticated community technology, radio is in constant expansion. Its waves reach almost every corner of the planet. It is the prime electronic medium of the poor because it leaps the barriers of isolation and illiteracy, and it is the most affordable electronic medium to broadcast and receive in (UNESCO, 2002).

All the most recent and reliable surveys agree that radio is still the dominant mass-medium in Africa (Balancing Act 2008; BBC WST, 2006; RIA, 2005), with the widest geographical reach and the highest audiences compared to TV, newspapers and other ICTs. According to Myers (2008) Every African country has a state broadcaster with at least one radio (and one TV) channels. However, there are wide differences between countries as regards the numbers of commercial and independent radios.

In Sub-Saharan Africa, some countries have high overall number of radio stations, or a high proportion of stations in relation to their population size, or both. These include Mali with an estimated 300 stations broadcasting in more than a dozen local languages (Buckley et.al. 2008); D R Congo with an estimated 250 independent radios (DFID,
2007), Uganda with over 150 stations, most of which cater for one or more of the 38 different languages (Balancing Act, 2008); Ghana with 130 stations (Balancing Act 2008); South Africa with 125 domestic radio channels (Balancing Act, 2008); and Benin, with 74 stations to only 8 million people (IREX 2006/7).

Countries where radio station numbers are still low include Eritrea, which is at the bottom of the list both for media outlets and for press freedom. There is only one state broadcaster and no independents at all (Freedom House, 2008); Equatorial Guinea (2 stations, one state owned, the other one commercial but owned by the president's son (IREX 2006/7); Swaziland 5 (CIA World Factbook); and Botswana 5 (IREX 2006/7). All of these countries have relatively small populations and governmental policies which do not particularly favour press freedom.

Kenyans have more access to radio, compared to other media. 81% of urban Kenyan households own a radio receiver and 71% of the rural households have a radio set (Kenya Demographic and Health Survey, 2003). While public and commercial radios are quite developed, community broadcasting is still developing. But the three types of radio; commercial, public and community are premised upon different logic and expectations. Community broadcasting through ownership, participative nature and community interest focus interacted with the election process in a different way when compared to the other two, that is, commercial and public broadcasting.
Community Radio Stations

It is widely agreed among scholars that community radio has the following characteristics: non-profit making, independent from government, owned and operated by and in the community. Its programming is tailored towards the interest and development of the community (Solervicens, 2007 Fraser and Estrada, 2001). Other scholars add that Community media are usually understood as media that serve and belong to a community that produce content with a specific community in mind (Alumuku 2006 & Rennie 2006)

In Kenya the definition of community radio is unclear. Additionally, there has been no regulation that categorizes radio stations. Community radio is largely deemed commercial (private) or local language or vernacular radio (Githethwa, 2008). A vernacular radio in Kenya means a radio that broadcasts for an ethnic community. This study will use ‘community radio’ to mean non-profit making radio owned and operated by a community.

According to Association of Community Broadcasters (AMARC) (1988) report, a community analyzes its own communication needs and determines how radio could help to resolve them. The traditional approach to development is to provide support to agriculture, health and education. A radio station enables a community to analyze its need in details and think about the causes of its problems and marginalization (Fraser, 2001). Therefore a community radio station provides a communication processes that help people share common understanding and common goals. This is the first step towards a community taking action to establish its own radio station.
The last two decades have seen a rapid expansion in the number and popularity of community radio stations. Among the reasons for this are: the democratization and decentralization processes in many parts of the world; deregulation of the media and the relaxing of broadcasting monopolies by state institutions; and disaffection with commercial radio channels (Ntab, 2004).

According to Kenya Community Media Network (KCOMNET) (2013), Mugambo FM is a project of Mugambo Jwetu Multimedia Centre, a community based organization which was registered in 2008. The station is located in Tigania West Constituency, in Meru County. Its broadcasting frequency is 102.3 FM. The multimedia project also runs a telecentre. It has a coverage radius of 30 kilometers. The main goal of the project is to empower the target community through various forms of information technology.

Mugambo FM’s mission is: To provide efficient and effective information to the community to enable citizens make informed choices in every aspect of their life and actively participate in their own development agenda. The radio station also addresses main issues of public concern such as health, civic education and agriculture. The main economic activities in the region are farming and business. The community radio has also collaborated with theatre artists from the community. They identified alcoholism as the pressing and cross-cutting issue in the community. The team developed and produced episodes of radio drama series e.g “Gutii Mbichi Itiiri” (There is no end to learning) (KCOMNET, ibid). Retrogressive cultural practices such as female genital mutilation and discrimination against women are also major problems in the constituency. This study
therefore intended to investigate the role of a community radio in FGM awareness with a special focus of Mugambo FM.

1.2 Statement of the problem

More than 850 million people in developing countries are excluded from a wide range of information and knowledge, with the rural poor in particular remaining isolated from both traditional media and new information and communication technologies, which would improve their livelihoods and development pattern (Wabwire, 2013 cited in FAO, 2001). Considering the socio-cultural and geographical structure of rural remote people, community radio has been found more effective and inclusive medium to provide unbiased information and knowledge among the masses (Gumucio, 2001).

Informational needs of the underprivileged, is especially difficult in Tigania West Constituency, Meru County, where poverty-stricken groups continue to be denied access to information, knowledge, skills and technology transfer. Cultural practices such as female genital mutilation and traditional unhygienic circumcision of boys pose health hazards. Discrimination against women is also a major problem in the constituency. Women are not allowed to engage in activities of their choice; there is discrimination in the allocation of resources such as land distribution, education provision and employment opportunities (CRAK, 2008).

A study by Evilia, Abdi and Askew (2008) found that the general prevalence rate of Female Genital Mutilation (FGM) in Meru North was 38% and in Tharaka District 58%.
Prevalence was highest among mothers in Tharaka, at 87 percent, and lowest among young girls in Meru North at 15%. In both districts, girls who had some formal education were less likely to have undergone the cut than girls who had none. Similarly, mothers with secondary school education were less likely to cut their daughters. This shows that community radio could also be used to educate the community on the dangers of FGM and thereby reduce or eliminate the practice altogether.

In order to empower disadvantaged groups as equal partners in the development process, a Community radio station (Mugambo FM) was set up to give a voice to the rural and remote communities in Tigania West Constituency – Meru County with affordable public access to information communication technologies and in particular, to Internet services and educational radio programmes. This study intended to analyze the contribution of community radio in FGM awareness in Tigania West Constituency, Meru County in particular and Kenya in general.

1.3 Study Objectives.

i. To investigate how Mugambo FM has been used to create awareness about FGM and the reduction of the practice.

ii. To examine the attitudes of the community members towards radio programs addressing FGM.
1.4 Research questions

i. How has Mugambo FM been used to create awareness about FGM and abandonment of the practice?

ii. What are the attitudes of community members towards radio programs addressing FGM?

1.5 Limitations of the study

A comprehensive research in all rural and marginalized areas of the country is costly and time consuming. Due to the limited budget and time constraints, the researcher used Meru County (Tigania West constituency) as a representative of the rural and marginalized areas in Kenya.

1.6 Justification of the Study

Mugambo FM has been in existence since 2008. Despite many challenges related to broadcasting like the area’s hilly terrain which interferes with the relaying of the signals, the radio’s broadcast reach a satisfactory number of listeners. However there is need for evaluation of their strategies so as to come up with recommendations to help the station meet the objectives that are enshrined in their mission “To provide efficient information to the community to enable citizens make informed choices in every aspect of life and actively participate in their own development agenda.” With the mission statement it was expected that Mugambo FM may be used to create awareness in FGM thereby reducing the practice.
1.7. Conceptual Framework

The conceptual framework shows that programming content and community participation in community radio can lead to FGM awareness and abandonment of the practice. Programming content refers to how the broadcasters arrange programs in a manner appealing to the audience. The content is usually locally oriented and produced where the community member are given a voice in the production of the content. Major areas include family life, gender, domestic violence, moral education, and social inclusion, conflicts and conflict resolution and the dangers of FGM. (Sterling, 2007). Participation by the community promotes freedom of expression about FGM and why it is practiced by the community. Such programs then provide an opportunity of explaining the dangers of FGM and why it is not a healthy practice. This may hence lead to awareness of FGM and may lead to abandonment of the practice by the community members.
1.8 Chapter Summary

The background of the study has depicted radio as the most used and expanding mass media in Africa compared to TVs, newspapers and other ICTs. Every country in Africa has a state broadcaster with at least one radio and TV station. However, some countries have higher overall number of radio stations than others. Some countries with relatively lower number of radio stations either have government policies that do not favour press freedom or have a relatively low population.

Kenya like other African countries has large access to radio broadcasting compared to other media. While public and commercial radios are quite developed, community broadcasting is still developing. This study has used community radio as non-profit making, independent from government, owned and operated by and in the community. The last two decades have seen a rapid expansion in the number and popularity of community radio stations in Kenya.

Mugambo FM is one of the community radio stations operating in Tigania West in Meru County. The radio station addresses main issues of public concern such as health, civic education and agriculture.

The statement of the problem outlines how the many people from developing countries are excluded from a wide range of information and knowledge, with the rural poor in particular remaining isolated from both traditional media and new information and communication technologies. With the introduction to Mugambo FM in Tigania west, Meru County, this study intended to investigate the role the community radio station in FGM awareness.
The limitations of the study were the financial and time constraints. Therefore the study used Mugambo FM as representative of the community radio stations in Kenya. The study was justified because Mugambo FM has mission statement which focuses on society development. It was therefore necessary to investigate how the radio station contributed to awareness of FGM.
CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter focuses on the role of communication in community development in general and that played by a community radio in particular. It contains an analysis of literature on the need for a community radio and the functions it plays in societal growth. The role of community radio on FGM followed by theoretical framework is also presented. Finally a summary of literature review is presented in the chapter.

2.2 Community Radio

A community is defined within a specified geographical region; like a neighborhood or village, a town, or a city. According to Jankowski (2002:5-6), the concept of a community is not only determined by geography, but also by “interest” where members share some social, cultural or political interests despite their geographical proximity.

There are several terms that are synonymous with a community radio; rural radio, cooperative radio, participatory radio, free radio, popular radio, educational radio, other times they are referred to as “bush radio” or “community radio” in Africa and the Caribbean, respectively. These stations are also called “alternative radio” in Latin America, “low power radio” in the United States, and “ethnic or aboriginal radio” in Australia.
A Community radio station is operated either by particular geographic communities, or by communities organized around specific interests such as religion, special interest group, etc. Community radio is most relevant to a group of people, who live and act as a community, and this could be several neighborhoods, or even several villages or communities, but the important thing is that they interact (AMARC, 2002). As earlier stated this study will use ‘community radio’ to mean non-profit making radio owned and operated by a community.

Community radio broadcasting is a form of public broadcasting that is evident in very many countries of the world. Its ownership ranges from minority communities, schools, churches and other religious institutions. Pioneering experiences began in Latin America in the mid-1940s. Poverty and social injustices gave impetus to start the radio stations which served primarily as the voice for miners and industrial workers. The first community radio was begun in Bolivia, The Radio Sutatenza, which aimed at supporting the peasants and even though they did not own it, 5000 letters were sent a year to mark the extent to which the community listened to the radio and used it to express their views. (Fraser & Estrada, 2001)

Whether in Africa, Asia, Europe or America, community radio has taken root as the instrument through which communities communicate with themselves and their leaders. For instance, in Canada, community radios are operated by minority communities in isolated areas that are separated by enormous distances. The villages might be very...
scattered but radio unites them with news, music, traditional folklore and other expressions of culture (Fairchild, 2001).

Fairchild, (2001) explains that, in the USA, community radio begun in 1945 when the government licensed educational non-commercial and other listener supported stations which the authorities viewed as alternative voice in the community to break the listener hold by commercial stations. Lasar (2000), further states that, the first community radio to capture the opportunity was the Pacifica foundation in the San-Francisco area, a group with a fascist background wanting to start a radio station to encourage dialogue and civil discussion among conflicting groups in local communities. (Khan,2011) explains that in India, the campaign to legitimize community radio began in the mid-1990s, soon after the Supreme Court of India ruled in its judgment of February 1995 that "airwaves are public property."

UNESCO (2009) report on listening to Africa, explain that community radio in South Africa began in 1994, when the country’s broadcasting authority began the continuing process of assessing and granting license application from groups as diverse as rural women’s cooperative, Afrikaner communities and a variety of religious bodies. The report states that the country has over 100 community radio stations broadcasting in a number of languages. Their scope and reach varies enormously, where some stations like Jozi FM has a listenership of a half a million to Iltha FM with a listenership of a thousand.
In Mozambique, under the auspices of the Media Development Project, funded by UNDP, and implemented by UNESCO, 30 community radio stations were set up between 1998-2006, to address developmental challenges. Most of the community radios work in conjunction with community communication centres, which are focal support points for not only print but also electronic media.

In Senegal 24 community multimedia centres have been set up in villages and poor suburbs under the auspices of UNESCO and the Swiss Agency for Development and Cooperation. The centers work in tandem with community radio, and have enabled thousands of people, living in isolated rural areas to gain access to information on health, agriculture, environment, commerce and business, training, culture and local government. The centres, which are found in 11 regions of the country, constitute the most important network of community access to ICTs.

Zambia has witnessed an increase in the number of community radios being set up. These are spread across 8 provinces. They are more than 10 community radio stations in the country’s various regions. They all broadcast within the range of 50-150 km and concentrate on the community’s needs, like adult literacy, civil education—where government officials respond to the people concerns on air, agriculture and health issues.

(CRAK), Reports that the first community radio on the entire African continent was established in Kenya in Homa Bay in 1982. The radio station was however deregistered two years later. Community broadcasting has consistently struggled to gain a grip in the country. There are just a handful of such stations in the county, most of them very small.
They include Mang’elete in Makueni, Radio, Maendeleo in Rarieda, Koch FM in Korogocho, Pamoja in Kibera, Ghetto FM in Pumwani and Mugambo Jwetu in Meru North (Wabwire, 2013; Quarmyne, 2006).

Mugambo FM is a community radio stations operating in Tigania West in Meru County. The radio station addresses main issues of public concern such as health, civic education and agriculture. The mission of the Mugambo FM is: To provide efficient and effective information to the community to enable citizens make informed choices in every aspect of life and actively participate in their own development agenda. This study will investigate the role played by Mugambo FM towards FGM awareness and reduction of the practice.

2.3 Functions of a Community Radio

Fraser and Estrada (2001) explain the functions of a community radio as a reflection and promotion of local identity, culture and character as the most central. This is achieved through provision of programming that is particular to its community identity and character through the local content that is aired by the station. A community radio should air diverse voices and opinions. Encouraging of dialogue is an issue critical in community radio broadcasting. Since the radio station is open to all sections of people in the community, it offers them a good opportunity to air their diverse views on any issue of interest. Through such dialogue local listeners can participate in democratic process.
According to Wabwire, (2013) marginalized communities have typically adopted community radio as a tool for highlighting their fundamental rights. Siemering, et al (1998) states that in Latin American countries, community radio, otherwise known as people's radio, became the voice of the poor and the voiceless, the landless peasants, the urban hut dwellers, the impoverished indigenous nations and the trade unions. Given the kind of populations to whom they are targeted, community radios have also been used as tools for development. Such communities have used radio to raise and address issues exceptional to their experiences. In particular, minority groups marginalized by the mainstream media find solace in the capabilities of community radio.

According to Fraser (2001), a community radio performs the function of providing an independent platform for interactive discussion about matters of importance to the community. Fraser (2001), further argues that for development to take place there has to be a collective will on the part of the community to improve its welfare, however he insists that, that was only possible through internal discussions within the community about its situation, the causes and possible action for improvement. Fraser summarizes a community radio as a platform to give a voice to the voiceless.

2.4 Community radio and rural development

According to the World Bank Rural Development Policy Sector Study, Rural Development is defined as a strategy designed to improve the economic and social life of a specific group of people – the rural people. This involves extending the benefits of development to the poorest among these who seek a livelihood in rural areas. Rural
development means as overall development of rural areas economic, political, social and cultural- so that people lead a pleasant life. Agriculture plays the most important and decisive role in rural development. Therefore, the development strategy should be such through which the development of the rural population and rural areas is directed towards a total development of the people and their environment through concerted action. The importance of communication in development is mobilizing people and seeking their willingness to participate in the development of a country. The development and communication infrastructure are closely allied. The resultant communication and development processes have been strengthening and supporting each other taking the country forward.

Rural Communication is defined as the practice of systematically applying the processes, strategies, and principles of communication to bring about positive change in rural society. Daniel Lerner, Wilbur Schramm, and Everett Rogers defined the development communication as "the art and science of human communication linked to a society's planned transformation from a state of poverty to one of dynamic socioeconomic growth that makes for greater equity and the larger unfolding of individual potential. In addition Lowe (1981) states that “all attempts to change attitude and behavior involve the educative process, since, in order to change, people must first acquire fresh knowledge, insights and skills,” so community radios must perform this communicative function.

Moemeka, (1981) advocates for rural community education by arguing that it entails all activities- social, economic, educational, political and cultural which touch on the lives of
rural communities, knowledge of which is essential to purposeful living and progress. He quotes Lowe who states, “All attempts to change attitude and behavior must first acquire fresh knowledge, insights and skills”. He proposes radio as the most effective tool for this task and gives several advantages of radio as being available, that it beats language barriers as message content can easily be delivered in native languages. He also cites that radio has a personal touch that lends urgency to change, as it is a populist medium and enhances chances of getting educational messages across a very wide segment of the rural population.

However he states that regardless of whether they are commercial, private or community radios, they all have one thing in common. They all broadcast programmes with information components, covering questions of health, environment and making skillful use of national languages and local music. In fact, many of them have started playing the initial roles and uses of rural radio with even a greater degree of attention in targeting specific audiences or entire communities.

Walters et al (2011) assessed the impact of community radio in Indonesia and concluded that effective radio activities can make a significant change in a community’s life. They described it as the Most Significant Change (MSC) process. The MSC methodology has its origins in community health development debates. It has recently been applied to community radio impact evaluation. Walters et al (2011), observe that by the MSC process, community members provide feedback in the form of stories describing the desirable change in their life as a result of the activities of the radio. Tachi and Joe (2003)
observe that community radio in Australia assist in enterprise development, diversification and the incorporation of new technologies. Lasar (2000) observes that first community radio to capture the opportunity was the Pacifica foundation in the San-Francisco area in the US, a group with a fascist background wanting to start a radio station to encourage dialogue and civil discussion among conflicting groups in local communities.

According to (AMARC, 1998) report, the introduction of community radio has many advantages for the African continent. The language issue is addressed with the introduction of community stations, given the large number of different local languages in African countries. In Africa it is not just a question of whether people can hear broadcasts but rather whether they can understand the broadcasts.

In Africa, community radio has been founded not only to give the voice to the voiceless but also as a tool for social development. In South Africa for instance, the emergence of community radio was due to the desire by the majority of the people who had been oppressed under the apartheid rule to have their voices heard. Alimuku, (2000)

A community radio addresses human rights issues through the right to information and communication. The majority of people in Africa have been starved of information, hence in these days of information society, community radio offers some Kodjo, (1998).

He further states that the provision of information and skills has gained popularity in the quest to empower communities with Community Radio as a unique and effective tool. Chapman et al (2003) reported that the growth of rural radio stations reflects both the
improvements in information technologies and the shifting of development paradigm towards a more participatory style of information and knowledge transfer. Kumar (2004) identified radio as an avenue for participatory communication and as a tool relevant in both economic and social development of African communities.

Community radio can play a significant role at the grassroots level for rural development. For instance, issues of poverty, agriculture, gender inequality, education, social problems among others could be the focus for programming. In exploring the importance of sharing information locally and the opening up of wider information networks for farmers in Northern Ghana with reference to vernacular radio programmes, Chapman et al (2003) found that rural radio is effective in improving the sharing of agricultural information by remote rural farming communities. This is most applicable in our African situation. They explain that radio provides a set of participatory communication techniques that support agricultural extension efforts by using local languages to communicate directly with farmers and listeners’ groups.

Maina (2013), cites that Simli radio was established in 1996 under the Ghanaian Danish Community Programme (GDCP), an integrated rural development programme. The overall strategy of GDCP has been to promote integrated rural development. This is by creating an enabling environment for constructive dialoguing among community members; thus giving voice to the vulnerable and excluded to demand for and claim their rights (Simli Radio 2010 cited in Maina, 2013).
Osunkunle (2008) in a study in South Africa’s Limpopo province observes that Radio Turf, a community radio station, has selected programmes that ensure that the station fulfills its mandate to entertain, educate and inform its listeners. This has led to social change and development in the various communities. The listeners are well catered through the various programmes, which ensure the total development of the listeners or community members.

Sterling et al (2007) in a study in South East Kenya, provided evidence that female community radio listeners will be more likely to benefit from technology-mediated opportunities for development if they themselves produce information that contributes to their advancement, rather than simply consuming information provided by others. The authors estimated the cost of excluding women from ICT for development and explored how community radio represents an opportunity for inclusion.

Audience-Scape (2010) carried out by Inter-Media, show that radio is the most vital medium in Kenya for channeling developmental information. Majority of Kenyans are listeners of radio, and more so, these listeners are said to use this medium as the most preferred source of news and information. Eighty nine percent of Kenyan media users get information and news on weekly basis, from the radio. The results of the survey showed that, 95% of the respondents considered this information and news channeled through the radio, as trustworthy. The study further explains that Community Radios in particular, empower the local communities through dissemination and exchange of development programmes.
During the Kenyan 2007 post-election crisis, community radios were hailed for their good services towards national cohesion, as documented by a mini-study by the BBC World Service Trust in 2008 which concluded that whereas some mainstream commercial public media played a partisan role during the entire election process, community radio stations were said to have played a much more positive role than their better financed commercial rivals, (BBC World Service Trust, 2008). Wabwire (2013) gives examples of community radio stations that played a positive role during the 2007 Post Election Violence (PEV) in Kenya. Firstly, Pamoja FM in Kibera slums worked to calm conflict through talk shows that tried to reduce ethnic stereotypes. Secondly, Koch FM in Pumwani also gathered community members to create peace messages which were regularly played on air. Wabwire (ibid) adds that Ghetto FM in Pumwani presented itself as a political neutral station in Kenya 2013 general elections.

On the other hand commercial and vernacular radio stations were accused of contributing negatively in the 2007 PEV. For instance, KNCHR report on the 2007-2008 post-election violence implicated Kass FM, which broadcasts in the Kalenjin language in the Rift Valley region, as having broadcasted hate speech and materials meant to incite communities against each other. The report named and censored one of the station’s reporters, who hosted some of the morning shows and used the station to mobilize and plan for violence. Howard (2009) also established that the vernacular radio stations in Kenya facilitated the use of coded or idiomatic expressions that mainly translated into hate messages that incited the public to resort to violence.
According to Maina (2013) Kenya Community Radio can employ very good communication Strategies that can foster Social Cohesion and Integration. She adds that Community Radio Stations do organize community projects which uplift the lives of community. However, she argues that there is a problem of lack of a distinct identity and confusion with Vernacular FM. To avoid the misunderstanding Maina (ibid) states that a community radio station is one that is operated in the community, for the community, about the community and by the community.

2.5. Community Radio and FGM Awareness

World Health Organization (WHO, 1997), defines Female genital mutilation as all procedures involving partial or total removal of the female external genitalia or other injury to the female genital organs for non-medical reasons.

In Kenya the Children’s Act in 2001 and the Constitution of Kenya 2010 banned the practice of the FGM practice. But as studies show, this has had but a small effect in many communities. In addition, the procedure, because it is illegal, is often done in secret. According to RoK (2007), the reasons supporting continuity of FGM are; rite of passage from childhood to adulthood, it is a source of family honour, it controls sexual desires, it is a religious requirement in some communities and it is a source of cultural and ethnic identity.

According to Omondi (2011) the practice of FGM is still widespread among some communities in Kenya, especially the Kisii (96%) despite communication efforts aimed
at eradicating the practice. A study by Evilia, Abdi and Askew (2008) also found out that the general prevalence rate of FGM in Meru North was (38%) and in Tharaka District (58%). Prevalence was highest among mothers in Tharaka, at 87 percent, and lowest among young girls in Meru North at 15 percent.

According to Cheserem (2010), educating people about disadvantages of FGM is important. It helps people to examine their own beliefs and values related to the practice in a dynamic, open way that is not experienced or seen as threatening. Educating parents and girls about adverse effects of female genital mutilation has helped in reducing the practice in our local communities. Evilia, Abdi and Askew (2008) in their study in Meru North and Tharaka districts found that girls who had some formal education were less likely to have undergone the cut than girls who had none. Similarly, mothers with secondary school education were less likely to cut their daughters. Over 58 percent of women with no education in Kenya have undergone female circumcision compared to 21 percent of those with secondary education and more (KDHS 2003). These studies show that educating communities about the dangers of FGM can highly contribute to the abandonment of the practice. A community radio can thus be used in educating community members about the dangers of FGM thus contributing to its abandonment. This is because a community radio focuses on issues affecting the welfare of a society and creates a forum for the society members to express their ideas.

Omondi, (2011) observes that Communication efforts aimed at fighting FGM have largely succeeded in raising awareness regarding the dangers of the practice, but failed to
effect attitude change essential in abandoning the practice. According to RoK (2007), the media plays a crucial role in FGM advocacy and is especially important in campaigning about violence against women generally, but care needs to be taken that appropriate messages are communicated. Therefore, a community radio can be used to in campaigning against FGM and hence contribute to the abandonment of the practice.

According to Kabunga, (2008) Comprehensive social development approach is one approach that aims at bringing about social change through participatory processes and consensus building over broad issues affecting the community. The model is grounded in public discussion and dialogue by which communities themselves decide to end the practice as opposed to individual change which may stigmatize some families. A community radio can thus be used as a forum of bringing the members community together to discuss and dialogue about FGM with an aim of abandoning the practice.

As pointed out earlier, Mugambo FM is one of the community radio stations operating in Tigania West in Meru County. The radio station addresses main issues of public concern such as health, civic education and agriculture. The mission of the Mugambo FM is: To provide efficient and effective information to the community to enable citizens make informed choices in every aspect of life and actively participate in their own development agenda. It is therefore expected that Mugambo FM plays a crucial role in creating awareness about FGM which studies show that it is being practiced by the Meru community.
2.6. Theoretical framework

The Study will be guided by Blummer and Katz’s Uses and Gratifications Theory and the Communitarian Theory

2.6.1. Uses and Gratification Theory

Blumler and Katz’s uses and gratification theory suggests that media users play an active role in choosing and using the media. Users take an active part in the communication process and are goal oriented in their media use. The theorists say that a media user seeks out a media source that best fulfills the needs of the user. Uses and gratifications assume that the user has alternate choices to satisfy their need (Blumler & Katz, 1974). West and Turner (2004) summarize the Uses and gratifications Theory into the following:

i. The audience is active and its media use is goal oriented.
ii. People have various uses (needs) they seek to satisfy through media.
iii. Audience members take initiative to link need gratification to a specific media.
iv. The media compete with other sources for need satisfaction.
v. People have enough self-awareness of their own media use, interests, and motives to be able to provide researchers with an accurate picture of that use.
vi. Value judgments of media content can only be assessed by the audience

This theory is found relevant for this study because community radio is operated in the community, for the community, about the community and by the community. Therefore
the community should produce information that contributes to their advancement, rather than simply consuming information provided by others. The uses and gratifications approach places power in the hands of the audience and is a helpful perspective when trying to understand media usage, exposure, and effects (Ballard, 2011). It is therefore envisaged that to create awareness in FGM and its abandonment, community members must be involved in order to get the root cause of the practice in order to develop effective strategies to deal with the issue.

A gap which exist with Uses and gratification theory is that persuasion is difficult to accomplish. This is because members of a society may have individual needs and rights that may override community development. Arguably communities differ in what their members consider to be communal concerns.

2.6.2. Communitarian Theory

Political theorists Alsdair Macintyre (1984) Michael Sandel (1981) and Charles Taylor (1985) are strong proponents of the first wave communitarian view that contends that individual develops and flourish only within the context of a community. The second wave of the communitarian movement focused on sociopolitical issues emphasizing socio responsibility and was initiated in the 1990s by Amatai Etzioni (1993) and William Galston (1991).

Communitarian theory views the rebuilding of community as a process of social organization involving self-help, institutional integration and consensus building. While the ‘community’ may be a family unit, it is usually understood in the wider sense of
interactions among people in a geographical location, or who have a shared history or interests (Avineri & Avner, 1992).

The linkage of this theory to this study is that since the theory discourages individualism and advocates “communitarianism”, Community Radio have a responsibility to come up with Communication Strategies to help people live together, work together strategies on conflicts/animosity reduction, sharing of information and abandonment of retrogressive cultural practices such as FGM. This can be achieved through programming content, community projects and public forums organized by Community Radio.

2.7. Summary of the Chapter

This chapter focused on literature review, both empirical and theoretical. From the reviewed literature, community radio broadcasting is a form of public broadcasting that is evident in very many countries of the world, both developed and developing. The last two decades has witnessed the growth of community radio in many African countries. The literature also revealed that community radio plays an important role in society growth.

Most of the published studies performed in Kenya in the recent past have focused on the community radio and social cohesion and integration. Limited studies have been done in Kenya in general and Meru in particular about the contribution of community radio stations in creating awareness about FGM and abandonment of the practice. As pointed out earlier, Mugambo FM is one of the community radio stations operating in Tigania West in Meru County. The radio station addresses main issues of public concern such as
health, civic education and agriculture. Based on the gap that exist in community radio stations and FGM awareness in Kenya, this study intend to investigate the role played by Mugambo FM towards FGM awareness.
CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction.

This chapter outlines the areas of study, research design, data collection methods, sample size and sampling procedures, data analysis and presentation and ethical issues that were considered in the study.

3.2 Research Site

The research was carried out in Tigania West constituency of Meru County. The constituency covers an area of 455km$^2$. It has a population of 135,980 persons and 29,810 households. The average farm size is 2.0 Ha and the percentage poverty level is 61% (ESIA study Report, 2013). Mugambo FM radio’s frequencies cover a radius of 30km, and the audience reach is at least 50,000 listeners representing 36% of the population.

3.3 Research Design

The study adopted the Descriptive Survey approach to research. Descriptive studies include surveys and fact-finding enquiries of different kinds. The major purpose of descriptive research is description of the state of affairs as it exists at present. Shukla (2008) observes that descriptive research design is typically concerned with determining the frequency with which an event occurs or the relationship between two variables the role of Mugambo FM and FGM awareness creation. Descriptive research design requires
a clear specification of who, what, when, where, and why and how of the research and requires clear planning with regard to data collection.

3.4 The study Population

The study population was listeners and a manager of Mugambo FM radio station. The target population was chosen carefully to include all gender and age groups. As pointed out earlier, Mugambo FM has an estimated 50,000 listeners and this formed the target population for this study. The manager was targeted because he could give key information about the programs broadcasting including the ones focusing on FGM.

3.5 Sample Design

Eight focus groups focus groups of girls aged 15 years to 18 years were interviewed with a group averaging 15 respondents. Quota sampling was used to select the focus groups. Eighty parents including male and females were be purposively selected and given questionnaires to answer. A manager was interviewed as a key informant.

3.6 Data collection methods

Data was collected through the following techniques;

3.6.1. Key Informant Interviews

This was used as one of the data collection tools for the study. An Interview was conducted with a key informant of the study, that is, a manager of the radio station. The Interview allowed the researcher to get information about FGM practice in the study area
and the role Mugambo FM plays to create awareness meant for the abandonment of the practice. The researcher developed an interview guide with questions regarding the radio programs presented through Mugambo FM and other activities by the radio stations aimed at creating FGM awareness and the abandonment of the practice.

3.6.2 Focus Group Discussions

The researcher used Focus Group Discussions among the girls’ respondents of the study. Focus groups rely on interaction within the group based on topics that are supplied by the researcher (Morgan 1997). Hence the key characteristic which distinguishes focus groups is the insight and data produced by the interaction between participants. The study targeted girl participant’s in the ages of 15-18 years and those comprised of students in secondary schools. Focus group discussions were expected to bring out feelings, attitudes, and perceptions and experiences that may not be revealed in individual interviews.

3.6.3. Textual analysis

Secondary source of data included a recorded program on FGM which the researcher analyzed. This enabled the researcher to find out how the programs aired create awareness on FGM and the abandonment of the exercise. The researcher also carried out a textual analysis on a program to determine how the information aired created awareness about FGM.
3.6.4. Questionnaires

The researcher administered questionnaires to selected parents in the study area. The questionnaire were semi-structured and contained questions on the relevance of FGM among the Meru, the use of Mugambo FM in creating awareness of FGM practice, the abandonment practices, the attitudes of the listeners about the programs, the health implications of FGM and peoples knowledge of the law regarding the practice of FGM. The questionnaires were self-administered and translations done whenever necessary and allowed for face-to-face interactions with the respondents for further probing. The essence of having semi structured questions is to allow for a process of interaction between the researcher and the respondent where the latter is given an opportunity to give opinions and ideas on the research questions. Gay (1992) maintains that questionnaires give respondents freedom to express their views or opinion and also to make suggestions.

3.7.1. Validity of the Instruments

Validity is defined as the accuracy and meaningfulness of inferences, which are based on the research results (Mugenda and Mugenda, 1999). In other words, validity is the degree to which results obtained from the analysis of the data actually represents the phenomena under study. Borg and Gall (1989) define validity as the degree to which a test measures what it is intended to measure. They add that content validity of an instrument is improved through expert judgment. The researcher approached the supervisor in order to seek expert judgment on the relevance of the questionnaires, key informant and focus group discussion guide developed. Her recommendations were incorporated in the revised questionnaires.
3.7.2 Reliability of the Instruments

Mugenda and Mugenda (1999) define reliability as a measure of the degree to which a research instrument yields consistent results or data after repeated trial. Therefore reliability is concerned with the consistency of an instrument in obtaining similar results under the same conditions over a period of time. The instruments were tested using test re-test technique. This involved administering the same instrument twice to the same group of respondents in a village in Tigania west constituency. From the two administrations, spearman rank order correlation was calculated. Orodho (2009) states that a co-relation coefficient of about 0.75 should be considered high enough to judge the reliability of the instrument and the researcher adapted this recommendation.

3.8. Ethical considerations

An introductory letter was obtained from the University of Nairobi, School of Journalism and Media Studies and taken to the National Council for Science and Technology for issue of research permit. The researcher then proceeded to the research area for data collection. The respondents were assured of confidentiality of the information they gave and assured that it was meant for academic purpose only. The researcher then carried out the key informant interview, and oversaw the focus group discussions. The questionnaires were also given out and the respondents given enough time to fill them. Another ethical consideration is that the researcher has acknowledged borrowed literature by citing the work to avoid plagiarism.
3.9. Data analysis

Data was analyzed and presented in a detailed report on the various remarks from the focus groups meetings, the parents, the station manager and an FGM script from “Imenyerere” (take care of yourself) programme. The results of the findings were presented in form of tables and charts. Qualitative data was presented in narration form according to the themes of the study.
CHAPTER FOUR

DATA ANALYSIS, INTERPRETATION AND PRESENTATION

4.1. Introduction

In this chapter, the data gathered through questionnaires, focus groups discussions, key informant interview and a Mugambo FM radio programme textual analysis is presented and analyzed. This is followed by discussions of the findings. Prior to the initiation of the survey process, the purpose, the significance and objectives of the study were relayed to the participants. They were also assured that all the information they had provided were solely for the purpose of the study while their identities would remain confidential. All questions asked in the interview and questionnaires pertained only to the respondents’ insights on the awareness of FGM.

4.2. Demographic Profile of the Respondents

A total of 120 girls in eight Focus Group Discussions (FGD) and 80 parents including male and females and one male manager was used for the data gathering process of the study. The parents selected for the study included 40 males and 40 females. Of the girls selected they ranged from 15 to 18 years. The demographic details of the respondents are presented in Table 4.1.
Table 4.3 shows the respondents level of education

<table>
<thead>
<tr>
<th>Gender</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>41</td>
</tr>
<tr>
<td>Female</td>
<td>160</td>
</tr>
<tr>
<td>Total</td>
<td>201</td>
</tr>
</tbody>
</table>

Table 4.1 shows respondent’s gender

<table>
<thead>
<tr>
<th>Age</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>15-18</td>
<td>120</td>
</tr>
<tr>
<td>21-30</td>
<td>13</td>
</tr>
<tr>
<td>31-35</td>
<td>27</td>
</tr>
<tr>
<td>35-40</td>
<td>18</td>
</tr>
<tr>
<td>36-40</td>
<td>14</td>
</tr>
<tr>
<td>Over 40</td>
<td>9</td>
</tr>
<tr>
<td>Total</td>
<td>201</td>
</tr>
</tbody>
</table>

Table 4.2 shows the respondents age

<table>
<thead>
<tr>
<th>Level of education</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary education</td>
<td>37</td>
</tr>
<tr>
<td>Secondary education</td>
<td>152</td>
</tr>
<tr>
<td>College/ university</td>
<td>12</td>
</tr>
<tr>
<td>Total</td>
<td>201</td>
</tr>
</tbody>
</table>

Table 4.3 shows the respondents level of education

4.3.1. FGM Practices in the Community

According to a Key Informant Interview (KII) with a manager working with Mugambo FM, FGM is still practiced in the community although there has been steady decrease of
the practice over the recent period. The manager added that those practicing FGM were either coerced by family or in-laws after marriage while others did it willingly. The responses of the parents were also sought and their responses presented in Table 4.4.

**Table 4.4: Parents responses on whether FGM was still practiced in the community (n=80)**

<table>
<thead>
<tr>
<th>Practice of FGM</th>
<th>Number of parents</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Still practiced</td>
<td>47</td>
<td>59</td>
</tr>
<tr>
<td>Not practiced</td>
<td>31</td>
<td>38</td>
</tr>
<tr>
<td>Not sure</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

Table 4.4 shows that 47 parents (59%) indicated that FGM was still practiced. However, 31 parents (38%) stated the FGM was no longer practiced in the community while 3 parents (3%) indicated that they were not sure whether FGM was still practiced or not.

When asked whether any of their daughters undergone the cut, 23 parents (28%) stated yes while 57 parents (72%) stated no as indicated. The parents also indicated that those wishing to undergo the cut did it willingly with very limited cases of coercion.

Results from Focus Group Discussions (FGD) indicated that FGM was still practiced with the girls in each FGD stating at least 3 girls they know of having undergone the cut. However, the FGDs indicated that only a few families were practicing FGM though very secretly.
The researcher also enquired about FGM practice prevalence rate in the families. This was done by asking the parents their opinions on how many families out of ten practiced FGM. The parents’ responses are presented in table 4.5.

Table 4.5. Parents responses on Number of families out of ten practicing FGM (n=80)

<table>
<thead>
<tr>
<th>No of families out of ten practicing FGM</th>
<th>Number of parents</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>23</td>
<td>29</td>
</tr>
<tr>
<td>2</td>
<td>19</td>
<td>24</td>
</tr>
<tr>
<td>3</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>0</td>
<td>33</td>
<td>41</td>
</tr>
</tbody>
</table>

Table 4.5 show that 23 parents (29%) stated that one family out of ten practiced FGM while 19 parents (24%) stated that 2 families out of ten practiced FGM. Furthermore, 5 parents (6%) indicated that 3 families out of ten practiced FGM. However, 33 parents (41%) were of the opinion that FGM was not being practiced in any family in the community.

4.3.2. Reasons of Practising FGM

The researcher sought to find out the reasons behind FGM practice in the community. A manager of Mugambo FM in the KII responded that majority of girls underwent the cut due to illiteracy of their parents, ignorance of dangers associated with FGM and discrimination of the uncircumcised girls during marriage. Girls in the FGD also majorly
mentioned illiteracy of parents and fear of missing a spouse as the reasons behind FGM practice in the community. The responses of parents on reasons behind FGM practice are presented in table 4.6.

Table 4.6: Parents Responses on the Reasons behind FGM Practice (n=80)

<table>
<thead>
<tr>
<th>Reason</th>
<th>No. of Parents</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upholding culture and traditions</td>
<td>9</td>
<td>11</td>
</tr>
<tr>
<td>Preserving sexual morality</td>
<td>11</td>
<td>14</td>
</tr>
<tr>
<td>To get a husband</td>
<td>38</td>
<td>48</td>
</tr>
<tr>
<td>Social pressure and stigma</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>

Table 4.6 shows that the main reason for FGM practice was so that a girl could get married as stated by 38 parents (48%). Other reasons behind FGM practice included upholding culture and traditions (11%), preserving sexual morality (14%) and social pressure and stigma (6%).

4.4.1. Mugambo FM and FGM Awareness

The researcher sought to find out the radio set ownership by households in the community. A manager with Mugambo FM in KII pointed out that majority of households had radio sets. The responses of also indicated that majority of households had radio sets as shown in Figure 4.1.
Figure 4.1 shows that 96% of parents reported that they had a radio set at home while 5% stated they didn’t have a radio.

The FGD also suggested that majority of families had radio sets at home as all the girls in the FGD stated that they had a radio set at home.

As far as the listening of the radio was concerned, the manager interviewed pointed out that Mugambo FM had huge audience approximated as above 50,000 and the number was still growing as a result of increased area of coverage. The researcher also sought to find out from the parents and girls in the FGD about their listening to Mugambo FM. Majority of parents indicated Mugambo FM as their favourite radio station as presented in the figure 4.2
Figure 4.2 shows that Mugambo FM and Muga FM were the most favourite radio stations among parents as reported by 73 parents (91%) and 67 parents (83%) respectively. Other radio stations preferred by parents were K.B.C. radio stations (60%) and citizen radio (48%). From the FGD, Mugambo FM also emerged as one of the favourite radio stations among the girls. Other FM stations with huge audience among the girls were; Kiss 100, Classic FM and Hot 96. The girls in FGD added that they listened to Mugambo FM with their parents at home and found it entertaining and informing.

4.4.2. Mugambo FM Programmes on FGM and Attitudes of the Community on the programmes

The researcher sought to find out the programmes aired by Mugambo FM that addressed FGM issues. It emerged from all the respondents that the radio programmes tackling
issues on FGM included; “imenyeere’ (take care of yourself), ‘Muturire’ (lifestyle) and other programmes on religious teaching. ‘Imenyeere’ was aired on Wednesdays at 7.30am-8.30am and repeated on Fridays from 8.00pm-9.00pm, while ‘Muturire’ was aired on 7.30 pm-8.30 pm on Saturdays and 9.00pm-10.00pm on Sundays.

The researcher also enquired on whether the programmes on FGM issues were enjoyable. Asked whether they enjoyed listening to the programmes on FGM, majority of the parents responded to the affirmative as presented in table 4.7

Table 4.7: Parents’ responses on whether they enjoyed listening to programmes addressing FGM issues.

<table>
<thead>
<tr>
<th>Do you enjoy listening to programs on FGM issues</th>
<th>No. of parents</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>74</td>
<td>93</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Does not listen</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Table 4.7 shows that 74 parents (93%) enjoyed listening to the programmes, 2 parents (3%) indicated they do not enjoy such programs while 4 parents (5%) stated that they do not listen to the programmes. The parents who stated that they enjoyed listening to the programmes on FGM gave reasons such as;

i. The programmes touched on important health issues including dangers of FGM as well as creating HIV/AIDS awareness.
ii. The programmes were very entertaining based on listeners’ participation and reactions.

iii. The programmes helped them to appreciate the need for FGM abandonment.

iv. Some parents got information to educate their girls on health issues from the programmes.

Nonetheless the parents who stated that they didn’t enjoy listening to programmes on FGM cited their old while those who didn’t listen to the programmes stated they didn’t have a radio set.

The FGD also indicated that the girls enjoyed listening to the programs addressing FGM matters as presented by Mugambo FM. The girls gave the reasons of listening to the programs as the important health issues discussed including dangers of FGM practice, information about alternative rites of passage, the entertainment in the programme and myths about FGM discussed such as failure to get husbands.

The manager through KII pointed out that majority of listeners had positive attitudes to the programmes on FGM. He also indicated that listeners found the programmes reliable and confidence in them based on their participation and reactions. However, he added that minority listeners objected to the programmes especially through short messages (SMs).

4.4.3. Awareness Creation on dangers of FGM practice through Mugambo FM.

The researcher sought to find out the awareness of dangers of FGM from the respondents as created by Mugambo FM. It emerged from the FGD that the girls were aware of the
dangers of FGM through Mugambo FM and also learning from schools. The girls indicated that that the dangers of FGM they learnt from Mugambo FM included; sexual problems, excessive bleeding which can lead to death, risk of HIV/AIDS infection and the likelihood of being arrested because FGM was illegal.

The parents’ responses on the dangers of FGM they heard from Mugambo FM are presented in Figure 4.3

**Figure 4.3: Parents Responses on Dangers of FGM they heard from Mugambo FM**

<table>
<thead>
<tr>
<th></th>
<th>Excessive bleeding</th>
<th>Obstruction labour</th>
<th>Sexual problems</th>
<th>HIV/AIDS infection</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of parents</strong></td>
<td>70</td>
<td>27</td>
<td>67</td>
<td>59</td>
</tr>
<tr>
<td><strong>%</strong></td>
<td>88</td>
<td>34</td>
<td>84</td>
<td>74</td>
</tr>
</tbody>
</table>

Figure 4.3 shows that 70 parents (88%) and 67 parents (84%) heard the dangers of FGM practice as excessive bleeding and sexual problems respectively. Furthermore 59 parents (74%) heard the risk of HIV/AIDS infection as danger of FGM practice while 27 parents (34%) also heard obstruction labour as a danger of FGM.
4.4.4. Awareness creation on legislation against FGM practice through Mugambo FM

The researcher sought to find out how Mugambo FM created awareness on anti-FGM laws. The FGD indicated that majority of the girls had not heard about anti-FGM laws from Mugambo FM. However, in three FGD some girls mentioned the children’s Act as one of the laws fighting FGM practice. The parents on the other hand indicated more awareness of anti-FGM with 27 of them (34%) mentioning they had heard about children’s Act from Mugambo FM.

4.4.5. Participation of listeners to Mugambo FM radio programmes on FGM issues

All the respondents indicated that Mugambo FM allowed participation of listeners in the radio programmes. The researcher then enquired how the listeners participated. A manager through KII stated that listeners participated in talk shows through SMs, phone calls, pre-recording of listeners in field and through skits. He added that selected listeners were also invited in their studios when programs on FGM issues were being aired. The FGD also indicated that listeners participated in programs addressing FGM practice through being invited in the studios, dramas, phone calling and sending SMs. However, none of the girls in the FGD had ever participated.

All the parents who listened to Mugambo FM also pointed out that listeners participated in programmes on FGM practice through phone calls, sending SMs, dramas and being invited in the studios. When asked whether they ever participated in the radio programmes on FGM practice, 18 parents (22%) answered yes. Of those who had
participated 3 parents (4%) stated that they had been invited in the studio as elders, 16 parents (20%) stated they had participated through calling while 4 parents (5%) participated through SMs.

4.4.6. Invitations of professionals by Mugambo FM in programmes addressing FGM Practice.

The researcher sought to find out whether Mugambo FM invited professionals in radio programmes addressing FGM issues. The manager in KII pointed out that the radio stations invited such professionals such as; doctors, midwives, teachers, religious leaders, provincial administrators. The manager added that the professionals invited offered free consultancy and that the listeners asked questions on pertinent issues. Furthermore, he added that the listeners appreciated the advices by the professionals and in some cases some listeners followed the experts for individualized attention. The parents and FGD also indicated that professionals were invited in the studio where the listeners could engage them through calling and writing SMs on FGM issues perturbing them.

4.4.7. Textual Analysis of a Programme Addressing FGM Practice

The researcher also analysed an FGM script of a programme by name “Imenyere” (take care of yourself) aired by Mugambo FM in Meru language. In the programme, the presenter spoke with 8 persons in the studio, that is, 2 teenage girls, 2 middle-aged women, a religious leader, a politician, a village elder and a medical officer.
The two teenage girls pointed out that FGM is prohibited in the bible and also by the laws of the country and therefore should not be practiced. They also pointed out that some men preferred non-circumcised girls while others preferred those circumcised girls for marriage. They however said that they only support circumcision for boys and not girls.

One of the middle aged women in the programme stated that the community members were becoming enlightened and therefore the FGM practice was not that rampant. She added that earlier on girls were mostly circumcised at age of 12 years and did it willingly. The second middle aged woman noted that there were no benefits of undergoing FGM and that there is no longer discrimination for or against girls who had not undergone FGM. However, she indicated that some girls were still undergoing FGM albeit secretly and that it was really painful. Furthermore, she pointed out that in some cases girls married uncircumcised were sent back to their parents to be circumcised or circumcised by in-laws by force under the watch of their husbands. Nevertheless, she added that such cases of forcing women to undergo the cut were becoming rare.

The religious leader in the programme stated that FGM is unacceptable and added that the church had been partnering with ‘Njuri Ncheke’ (Meru council of elders) to eradicate the FGM practice completely. Besides, he added that they are conducting seminars to enlighten girls on the dangers of FGM and the need to stay as God created them.

The politician in the radio programme who was the Meru County representative noted that the Meru County leadership was against FGM practice. She also said that FGM is an outdated practice though it was going on in some areas in the county which was forcing
some girls to drop out of school. She supported and advocated for ‘Ntanira na Mugambo’ (initiation through word of mouth) as the alternative rite of passage.

The village elder in the radio programme stated that the government stand was that FGM practice was illegal. However, he noted that some community members were practicing FGM secretly. He appealed to the community members to report those found practicing FGM to authority so that they can be arrested and prosecuted. The elder also stated that majority of girls were no longer willing to undergo FGM and noted that those forced were rescued and taken to ‘Ntanira na Mugambo’ (the alternative rite of passage).

The female medical officer in the programme mainly addressed the dangers of FGM practice. She pointed out that FGM interfere with the delivery canal which contributes to difficult in giving birth. Other dangers mentioned included excessive bleeding and risk of infection with HIV/AIDS. The medical officer added that some girls who have undergone FGM may be forced to undergo caesarian delivery when giving birth since the cut reduces the size of the vagina opening. Otherwise, she noted that natural births for girls who have undergone FGM can be very painful. Finally, the medical officer said that FGM has no health benefit and that it can lead to social stigma for those girls cut among educated girls as FGM is considered retrogressive.

4.4.8. FGM abandonment activities undertaken by Mugambo FM in the community

The researcher sought to find out the FGM abandonment activities in the community and the role played by Mugambo FM. According to the manager through KII, Mugambo FM
collaborated with community based organizations such as ‘Ntanira na mugambo’ (initiation by word of mouth) to focus in fighting against FGM and offer alternative rites of passage for the girls through counseling. The FM radio also collaborated with provincial administration such as chiefs and sub-chiefs and other government agencies such as public health officers in fighting FGM practice. The FGDs indicated that the facilitators of FGM practice abandonment were; CBOs such as ‘Ntanira na Mugambo’, government agencies such as chiefs in and health officials, Mugambo FM and religious leaders. The parents also responded on the facilitators of FGM abandonment activities and their opinions presented in Table

<table>
<thead>
<tr>
<th>Facilitator</th>
<th>No. of Parents</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government agencies</td>
<td>46</td>
<td>58</td>
</tr>
<tr>
<td>NGOs and CBOs</td>
<td>51</td>
<td>64</td>
</tr>
<tr>
<td>Mugambo FM</td>
<td>49</td>
<td>61</td>
</tr>
<tr>
<td>Religious organizations</td>
<td>33</td>
<td>41</td>
</tr>
<tr>
<td>Women groups</td>
<td>17</td>
<td>21</td>
</tr>
</tbody>
</table>

Table 4.8 shows that facilitators of FGM practice abandonment in the community were several including Mugambo FM. For instance, 51 parents (64%) indicated NGOs and CBOs as facilitators of FGM abandonment while 49 parents (61%) stated Mugambo FM. Forty six parents (58%) stated government agencies as facilitators of FGM abandonment.
while 33 parents (41%) and 17 parents (21%) indicated religious organizations and women groups respectively.

4.5. Improving Mugambo FM programs in addressing FGM issues

The researcher enquired from the manager through KII his opinions on what could be done to improve to Mugambo FM radio programmes to make them more appealing in addressing FGM awareness and total abandonment. The manager proposed one measure as involving more testimonials where FGM victims willing to give their experiences could be invited in the studio. Secondly, the manager proposed focus on the villages where FGM was rampant with an aim of creating more awareness. Finally, he proposed investigative journalism where journalist could be sent to remote rural areas to uncover the truth due to the secretive nature of the FGM practice.

4.6. Discussions

The study found out that FGM was still practiced in Tigania West constituency though very secretly. This could be due to the reason that the practice was illegal and hence those practicing it feared arrest. The secrecy in nature of the FGM practice could also explain why there were mixed reactions particularly from the parents with some (59%) admitting that FGM was still practiced, (38%) stating it was no longer practiced while 3% were unsure. However, the findings from all the other respondents including the speakers in the programme in Mugambo FM in the analysed script show that FGM is still practiced though in smaller numbers. The estimated preference rate of FGM practice was 1.5 families in ten families (15%) according to the parents’ responses. This study is therefore consistent with a study by Omondi, (2011) who found that FGM is still practiced among
some communities in Kenya especially in Kisii. A study by Evalia, Abdi and Askew (2008) also found that FGM was still practiced in Meru County with higher prevalence in Tharaka District than Meru North. In Kenya in general, according Demographic Health Survey (DHS) (2008-09), the estimated prevalence of FGM in girls and women (aged 15-49 years) is 27.1%.

The study had also sought to find the reasons behind FGM practice in Tigania West constituency. It was found out that the main reasons why the girls underwent FGM were; illiteracy, ignorance of dangers of FGM and discrimination of uncircumcised girls during marriage. Others included upholding of culture and traditions, preserving sexual morality and social pressure and stigma. This study there agree with some reasons given by RoK, (2007) on why there was continuity of FGM as; rite of passage from childhood to adulthood, source of family honour, controls sexual desires and it is a source of cultural and ethnic identity.

The study found that majority of the community members (95%) in Tigania West Constituency owned a radio set. This is consistent with KDHS (2003) which noted that Kenyans have more access to radio, compared to other media with 81% of urban Kenyan households and 71% of the rural households owning a radio set respectively. The study also found out that Mugambo FM was one of the favourite radio stations among the community members.

Mugambo FM aired two main programmes that addressed FGM issues. The programmes were “Imenyeere” (take care of yourself) and “Muturire” (lifestyle). Female Genital
Mutilation was also addressed in other religious radio programmes aired by Mugambo FM. The study found that the radio programmes touching on FGM were listened and that they were appealing to the audience. This was mainly because they were educative on issues surrounding FGM. For example dangers of practicing FGM, the alternative rites of passage instead of undergoing FM, myths about FGM practice such as chances of not getting a husband and parents got pertinent information in advising their daughters on health issues. The programmes were also found to be entertaining based on participation and reactions of audience and also involving skits and dramas on FGM practice. This study therefore conforms to Solervicens (2007) and Fraser and Estrada (2001) idea that community radios are appealing because their programming is tailored towards the interest of the community.

The study found that Mugambo FM through its programmes created awareness about the dangers of FGM practice. These dangers included; excessive bleeding, sexual problems, risk of HIV/AIDS, problems related to giving birth and the risk of being arrested. The study also found that through Mugambo FM, the community was made aware that FGM was in no way beneficial. This could explain the reason why FGM practice was on an enormous decline. Cheserem (2010) avers that educating people about disadvantages of FGM is important. It helps people to examine their own beliefs and values related to the practice in a dynamic and open way that is not seen as threatening. Thus the continued awareness creation about the dangers of FGM practice by Mugambo FM could go a long way towards abandonment of FGM practice in the community completely.
As far as awareness creation on anti-FGM laws is concerned, the study found that Mugambo FM had done less in its programs. This is because only few respondents were able to mention the particular laws fighting FGM in Kenya. However, the study found that the community knew that practicing FGM was illegal and that could explain the secrecy nature of the practice. For example, in the textual analysis of the FGM script on the ‘Imenyeere’ programme, the village elder was mentioning about FGM being illegal without referring the audience to the particular laws against the practice.

The study found out that Mugambo FM allowed listeners to participate in the programmes focusing on FGM. The participation was in form of phone calls, writing SMSs, being invited in studios, field pre-recorded tapes and skis and dramas. For instance, in the FGM script (appendix IV) there were 7 different participants each approaching FGM practice from a different perspective. This study therefore agrees with Fraser (2001) who asserts that a community radio performs the function of providing an independent platform for interactive discussion about matters of importance to the community. Kumar (2004) also identified community radio as an avenue for participatory communication and as a tool relevant in both economic and social development of African communities. Through participation in the programmes about FGM, it is expected that more awareness would be created as individuals give their divergent experiences and opinions.

The study also found out that Mugambo FM regularly invited professionals such as teachers, lawyers, medical doctors, religious leaders, politicians and provincial
administration in the studio to preside over programmes addressing FGM practice. For example, the FGM Script (appendix IV) shows four professionals invited in a radio programme (*Imenyeere*), that is, a medical doctor, a politician, a religious leader and a village elder from ‘*Njuri ncheke*’. Each provided valuable information about FGM practice based on their career. The professionals invited in the radio programmes also provided an interactive forum where listeners could engage them on questions bothering them about FGM practice.

The study also found out that Mugambo FM collaborated with other stakeholders in the society in FGM abandonment in the community. For instance, Mugambo FM collaborated with a community based organization ‘*Ntanira na Mugambo*’ (initiation through words) which offered an alternative rite of passage for girls through counseling instead of practicing FGM. Mugambo FM also worked together with provincial administration such as chiefs and sub-chiefs and other government agencies such as public health officers in fighting FGM practice. Besides, Mugambo FM collaborated with religious organizations and women groups in fighting FGM practice. Therefore Mugambo FM as a community radio recognized the need to collaborate with important stakeholders of the community in fighting FGM practice.

Finally, the researcher had sought to find out how Mugambo FM programmes can be improved in order to create more awareness about FGM. The study found out that one measure could be involving testimonials from victims of FGM who could be willing to share their experiences. This could act as warning to girls intending to engage in the
FGM practice. It was also suggested that Mugambo FM should focus on the villages where FGM practice was rampant. Finally it was suggested that Mugambo FM should involve investigative journalists who could venture in rural areas with intention of uncovering the truth about FGM practice. This was due to the secretive nature of the practice.
CHAPTER FIVE

SUMMARY OF FINDINGS, CONCLUSION AND RECOMMENDATIONS.

5.1. Summary of findings

The study was conducted with an aim of achieving the objective of establishing the role of Mugambo FM in creating awareness about FGM. To achieve this objective, analysis of data with regard to the respondents’ response was done. In the analysis of the questionnaires, FGD, KII and textual analysis of an FGM script, it was noted that FGM was still practiced in the study locale although secretly. The reasons given for FGM practice mainly focused on ignorance and retrogressive cultural practices. However, the FGM practice was diminishing and this could be attributed to increased awareness through education and also the role played by media including Mugambo FM.

Majority of the community members owned a radio set and Mugambo FM was one of the favourite radio stations. Therefore Mugambo FM could be used as one vehicle of creating awareness about FGM. Radio Programmes such as ‘Imenyeere’ (take care of yourself) and “Muturire” (lifestyle) aired by Mugambo FM were used to create awareness about FGM. Majority of community members enjoyed listening to the programmes about FGM as they were not only educative and informing but also entertaining. The listeners were educated about the dangers of FGM practice and also why they should abandon the practice completely. Through the programmes addressing FGM, the listeners also learned on legal consequences of practicing FGM such as being arrested and prosecuted.
Mugambo FM allowed participation of the listeners in programmes focusing on FGM. The community participated through calling, writing SMSs, acting in skits and being invited in the studio. Mugambo FM journalist also went to the field to pre-record a sample listeners views on FGM and thereafter present them in the programmes. The participation of the listeners could motivate the community members to listen more as they felt they owned the programmes. This could lead to increase awareness on issues surrounding FGM.

To enhance FGM awareness, Mugambo FM also invited professionals in its studios who included; teachers, medical officers, provincial administration, religious leaders and politicians. The experts provided information based on their careers and hence the community could learn more about FGM and ask questions on issues perturbing them. Some of the listeners could also make follow-ups to the experts on personal issues about FGM. This therefore contributed more awareness of FGM.

5.2. Conclusions

The results of this study show that FGM is still practiced in the locale of study though secretly. This justifies the purpose of this study which was to investigate the role played by Mugambo FM in creating FGM awareness. It is clear from the study that Mugambo FM plays an important role in creating FGM awareness and could be contributing to the reported decline in the practice among other efforts aimed at fighting FGM. It is also apparent that participatory nature of the FGM programmes made them appealing to the audience hence increasing listenership. This hence led to increased awareness of FGM.
Furthermore, invitation of the experts to tackle FGM issues increases awareness thereby promoting FGM practice abandonment. Mugambo FM collaborated with Government agencies, Community based organizations and religious organizations in creating FGM awareness and also fighting the practice. However, other than awareness creation on dangers of FGM, Mugambo FM should also focus more on the anti-FGM laws to put the record straight on real legal consequences of the practice. Moreover, given the secretive nature of the FGM practice, investigative journalism is vital in order to find more about FGM in order to enhance more FGM awareness.

5.3 Recommendations

Based on the research findings, the following recommendations were made;

i. Mugambo FM should invite legal practitioners to enlighten the community members more on laws touching on FGM. This is because other than being aware that FGM practice could lead to arrest, the community members were vaguely aware of the sentence which could attract a fine of not less than two hundred thousand or a jail term of not less than three years, or both.

ii. Mugambo FM should invite willing FGM victims even if it means concealing their identity so that they can narrate their ordeals. This could provide real case studies that could create more FGM awareness.

iii. Given the secretive nature of FGM practice in the society, investigative journalism by Mugambo FM could go a long way in uncovering the hidden cases of FGM practice
5.4. Recommendations for Further Research

This study was done in Tigania West and since Mugambo FM had grown in coverage, another study should be done in different locale in Meru County to compare the opinions of the community members on the role played by the radio station in FGM awareness. Also this study focused only on the role of Mugambo FM in FGM awareness. Therefore other studies should be carried on other social problems that could be facing the community and how Mugambo FM could help in seeking for the solutions through its programmes.
REFERENCES


Retrieved from amarcwiki.amarc.org/upload/.../Community_Radios_in_Kenya.pdf


APPENDIX 1: QUESTIONNAIRE FOR PARENTS

My name is Liza Kawira Nyaga pursuing a Masters degree at The University of Nairobi. I am undertaking a study on The role of Mugambo FM in Female Genital Mutilation awareness in Tigania West Constituency. Your community has been chosen to participate in this research study. All information provided will be kept anonymous and confidential and will only be used for academic purposes only. Please feel free to provide the answers for the question.

Section A: Background Information
1. Gender?
   Male [ ]
   Female [ ]

2. Highest level of education?
   None [ ]
   Primary Education [ ]
   Secondary Education [ ]
   College / University [ ]

3. Religious Definition?
   Protestant [ ]
   Catholic [ ]
   Muslim [ ]
   Other (Specify) ………………………

4. Marital status?
   Single [ ]
   Married [ ]
   Divorced [ ]
   Separated [ ]
   Widowed [ ]

Section B: The practice of FGM in the Community
5. (a) Do you have children?
   Yes [ ]
   No [ ]

(b) If yes, How many
   Girls …………………..
   Boys …………………..

(c) Is FGM still practiced in your community? Yes [ ] No [ ]
(c) How many of your daughters have undergone FGM? …………………………………
   If yes, about how many families out of ten practice it?…………………………
(d) At what age did they undergo FGM? 

(c) If yes, what are the reasons would you subject your girl child to FGM? (you can tick more than once)

- Upholding cultural tradition  
- Preserving sexual morality  
- To get a husband  
- Social pressure (stigma)  
- Other (Specify) ........................................

6. Do women and girls get circumcised willingly or are forced? If forced, by who or what them? If willingly, what are the expected benefits?
................................................................................................................................................
................................................................................................................................................
................................................................................................................................................

7. Are you aware of any dangers associated with FGM on girls?

- Yes  
- No  
If yes how did you learn? (You can tick more than once)

- Personal experiences  
- From Mugambo FM  
- From friends  
- At school  

8. In the community, between a circumcised and uncircumcised woman who is preferred?
................................................................................................................................................

9. Men who do they prefer?

- Circumcised  
- Uncircumcised  

10. In terms of bride wealth, who between a circumcised and circumcised woman / girl is paid more? Why?
................................................................................................................................................
................................................................................................................................................

SECTION C: Mugambo FM and FGM Awareness

11. Do you have a radio set?

- Yes  
- No  

12. Which are your two favorite stations?

................................................................................................................................................
13. Have you ever listened to Mugambo FM?
   Yes [ ]
   No [ ]

14. How often do you listen to Mugambo FM?
   Daily [ ]
   Twice a week [ ]
   Once a week [ ]
   Once a month [ ]

15. What is the name of the program on Female Genital Mutilation (FGM)?

16. Do you enjoy listening such programs on FGM?
   Yes [ ]
   No [ ]
   Please give reasons for your answer
   ____________________________________________
   ____________________________________________

16. How often do you listen to the program on Female Genital Mutilation?
   Every time it is aired [ ]
   Sparingly (not on regular basis) [ ]

17. Does Mugambo FM allow participation of the listeners to the program on FGM?
   Yes [ ]
   No [ ]
   If yes, how do listeners participate? (you can tick more than once)
   Through calling [ ]
   Through SMS [ ]
   Being invited to the studio [ ]
   Others (specify) [ ]

18. Have you ever participated in Mugambo FM’s programs on FGM?
   Yes [ ]
   No [ ]
   If yes, how?
   ____________________________________________
   ____________________________________________

19. Are there dangers of FGM mentioned in the programs?
   Yes [ ]
   No [ ]
   If yes, which of the following have you ever heard?
   Excessive bleeding [ ]
   Obstructed labour [ ]
   Menstrual disturbance [ ]
   Sexual problems [ ]
20. Have you ever heard of legislative against FGM from Mugambo FM?
   Yes [ ]
   No [ ]
   If yes which of the following have you ever heard? (You can check more than once)
   Anti – FGM law [ ]
   Children’s Act [ ]
   Constitution 2010 [ ]

21. Have you ever heard from Mugambo FM of community members who have been punished for practicing FGM?
   Yes [ ] No [ ]
   If yes, what was the nature of punishment?

22. Does Mugambo FM invite professionals in the program on FGM?
   Yes [ ] No [ ]
   If yes who is usually invited? (You can tick more than once)
   Doctors [ ]
   Mid wives [ ]
   Traditional circumcisers who have abandoned the exercise [ ]
   Teachers [ ]
   Lawyers [ ]
   Others (specify) [ ]
   Briefly state how such professional help in creating awareness on FGM

23. In your opinion, what are the attitudes of the listeners towards the programs on FGM depending on their participation?
   They are eager to listen [ ]
   They have objections to the information [ ]
   They have positive attitudes towards the programs [ ]

24. In your opinion, do the programs aired by Mugambo FM on FGM help in reducing the practice
   Yes [ ] No [ ]
   If yes to what extent
   Great [ ]
   Little [ ]
Section D: FGM Abandonment Approaches in the Community

24. Is there any anti – FGM activity (ies) in your community presently?
   - Yes [ ]
   - No [ ]
   - Don’t Know [ ]

If yes, what are some of the activities of these abandonment approaches?
   - Education and awareness [ ]
   - Alternative rites of passage [ ]
   - Other (Specify) …………………………….

25. Who are the facilitators of FGM abandonment activities in your community?
   - Government Agencies [ ]
   - Non – Governmental organizations [ ]
   - Mugambo FM [ ]
   - Religious organizations [ ]
   - Women Group [ ]
   - Youth Group [ ]

   Other (Specify) …………………………….

Thank you for your cooperation
APPENDIX II: FOCUS GROUP DISCUSSION GUIDE (GIRLS)

1. What are your ages, class, and religion?

2. Has anyone here undergone FGM?

3. Are there nicknames for girls who have not undergone FGM? What are such nicknames?

4. Do you know of anyone who has undergone FGM in your community? If yes, who?

5. At what age did you undergo FGM practiced on girls in your community?

6. Do you support the continued practice of FGM?

7. What do you think are the reasons behind the practice of FGM in your community?

8. Do women and girls get circumcised willingly or are forced? If forced, by who or what forces them? If willingly, what are the expected benefits?

9. Do you have radio set in your homes? What are your favourite programmes (at least two programmes)

10. Have you ever listened to Mugambo FM? How frequently (e.g. daily, weekly, monthly)

11. Which is your favourite program in Mugambo FM? Have you ever listened to program addressing FGM through Mugambo FM? Do you enjoy listening to programs addressing FGM? How are the programs on FGM presented? (e.g. talk shows, drama etc)

12. Are there some dangers associated with FGM that you learnt through Mugambo FM? State such dangers?

13. Do you think Mugambo FM effectively address the issue of FGM including fighting the reasons behind FGM practice in your community?
14. Does Mugambo FM allow for participation of listeners to the programmes? State how. (e.g. listeners calling, sms, participating in the studio, others? Have you ever participated in any way?

15. How do you think are listeners attitudes towards the programs focusing on FGM depending on their participation? Do they like the programs, do they object on information given?

16. Does Mugambo FM invite professionals in the studio during programs about FGM? (e.g. doctors, teachers, lawyers, traditional circumcisers or others) if yes, how valuable are such professionals in fighting FGM practice?

17. Are you aware of the Anti- FGM laws? State them? How did you learn? Did you learn any law through Mugambo FM?

18. Are there some members of community who have been arrested for practicing FGM? How did you get information of the arrest? Did you hear of any arrest through Mugambo FM?

19. Describe FGM awareness and abandonment in your community. (e.g. by the government, NGOs, community based organization, Mugambo FM) are there alternative rite of passage for girls in your community other than FGM? Does Mugambo FM communicate on such other ways of transition for girls?

20. Your opinion, how do you think Mugambo FM programs about FGM should be improved to make them more appealing in addressing FGM awareness and abandonment?
Appendix III: Key Informant Interview Guide

1. What do you think are the reasons behind the persistence of FGM in the community?
2. Do you think women / girls are circumcised willingly or forcibly? If willingly what are the excepted benefits? If forced who or what forces them to be circumcised?
3. Do majority of the community members own radios? Comment on the estimated listeners of Mugambo FM.
4. How do you rate the listening of Mugambo FM by community members compared to other radio stations?
5. Which programs does Mugambo FM use to broadcast about FGM and other matters affecting women? In your opinions are the programs appealing to the general audience of Mugambo FM? What are the attitudes of the listeners on the program? Does the attitude differ with age or sex? Do some listeners object information presented? If so, how do you deal with the objections?
6. How are the programs focusing on FGM presented (e.g. talk shows, drama, e.t.c.)? how does Mugambo FM management make the programs appeal to the listeners?
7. What is the content of the programs addressing FGM? E.g. Do you focus on: reasons for the practice, dangers of FGM, alternative passage of rites, anti-FGM laws?
8. Do you think Mugambo FM effectively address the issue of FGM including fighting the reasons behind FGM practice in the community?
9. Does Mugambo FM allow for participation of listeners to the programmes? Sate how. (e.g. listeners calling, sms, participating in the studio, others) Comment on the participation of the community members.
10. Does Mugambo FM invite professionals in the studio during programs about FGM? (e.g. doctors, teachers, lawyers, traditional circumcisers or others) if yes, how valuable are such professionals in fighting FGM practice?
11. Does Mugambo FM have collaborative activities with the Government, NGOS or other community based organizations in anti-FGM or abandonment of practice? (Specify) what is the attitudes of the community members on the activities meant to eliminate FGM practice.
12. In Your opinion, how do you think Mugambo FM programs about FGM should be improved to make them more appealing in addressing FGM awareness and abandonment?
APPENDIX IV
MUGAMBO JWETU 102.3 FM
FGM SCRIPT

SCRIPT : FGM
TX : WEDNESDAYS 7.30 A.M; REPEATS FRIDAY
8.30 PM
NAME OF PROGRAMME: “IMENYEERE” (TAKE CARE OF YOURSELF)
THEME : “NTANO CIA AANA BA AARI” (FGM)
TX DURATION : 1 hour
PRESENTER : MURUNGI M’MUKINDIA
PRODUCER : MURUNGI M’ MUKINDIA
TRANSLATOR : LIZA NYAGA

SIGNATURE TUNE……………………………………………………………..

PRESENTER: It’s my hope dear listener that you have had a good time. I welcome you to our programme “Imenyeere.” Today we speak on FGM. My name is Murungi M’Mukindia

SIGNATURE TUNE……………………………………………………………..

PRESENTER: With regards to this topic (FGM), we were able to speak to some girls of the age associated with the practice. We also spoke to some women of the older generation.

1st speaker: Teenage girl: FGM should not be practiced.

2nd speaker: Teenage girl: I am 19 years old. Some men prefer circumcised girls others circumcised. Nowadays circumcision of girls is prohibited, even in the Bible, only circumcision of boys is allowed. Personally, I do not advocate for FGM or encourage anyone one to undergo it.
3rd speaker: Middle-aged woman: Earlier on, FGM was rampantly practiced, but nowadays people have become enlightened and have stopped the habit. The church especially has advocated for alternatives rites of passage. Earlier on, girls were mostly cut from the age of 12, and most of them did it willingly. Girls would request their parents to take them to be “cut” however; nowadays this is not the case since people are more enlightened on the dangers of the practice.

4th speaker: middle-aged Woman: There are no benefits of undergoing FGM. Those who shunned the practice earlier on are now more successful in life. Nowadays people undergo circumcision albeit secretly. Some girls really suffer pain. It really doesn’t help because even some of the circumcised girls are not disciplined, while uncircumcised ones are. Some women who are married uncircumcised, are sent away to get circumcised, others are circumcised by their in-laws by force. They are hidden in the house and circumcised under the orders of their husbands. Where I come from the cases are rare; two or three cases which are done secretly.

I do not think FGM is an outdated practice; even those who undergo it do not understand the concept, its benefits or disadvantages.

PRESENER: According to the above speakers, they have pointed out that this practice is outdated and has no benefits to those who undergo it. As we sought more information, we were able to speak to leaders from different sectors like church, government, politics and health. This is what they had to say:

5th SPEAKER: RELIGIOUS LEADER: For a long time the church has fought against FGM. When it appeared like many girls were being forced into the practice, the church partnered with the “Njuri Ncheke” (Meru council of elders) to combat the practice. FGM is not acceptable. It is a waste of time, more so, learning time for the girls. It also shows that people are backward. Health-wise it is not okay hence our reason to denounce it. We are actually conducting seminars to enlighten girls more on the dangers of FGM. As a
church we shall continue to denounce the practice as we want our girls to remain how God created them and grow up well.

**PRESENTER:** That was Rev. Makimba, the bishop Kenya Methodist church, Tigania diocese. He was able to tell us how the church has shunned this practice even by partnering with the “Njuri Ncheke” to end the practice in Meru.

Dear listener, we were also able to speak to a politician and a government official and this is what they had to say;

**6th SPEAKER: A POLITICIAN:** I am Gacheri, County Representative, Thwana Ward.

It is important for people to know what is happening in Meru County and more so, our wards. I would like to say, that in the county, we are against FGM. Nowadays we say the practice is outdated, though there are some areas where the practice is rampant. You hear cases where a girl is told to visit the grandparents, but the underlying intention is to circumcise the girl. As leaders we advocate for alternative rites of passage, through education. It is not necessary to “cut” the girl. In my ward, we realized many girls were undergoing the practice and dropping out of school to get married. We came up with the programme advocating for alternative rite of passage called, “Ntanira na Mugambo” (initiation by word of mouth).

We have cautioned that should anyone circumcise their girl, they will be punished according to the constitutional law.

**7th SPEAKER:** To us FGM is illegal, the government’s stand is that FGM is illegal. We have received reports of cases but have not made any arrests. FGM is outdated. If there is evidence of the practice, it should be reported to us. We have received some claims that some people are practising it but after some negotiation we found them false. FGM is illegal and nowadays it is done under total secrecy. We have interacted with some girls and most of them are against it. Our girls at homes in the villages have shunned the practice. There was a girl we rescued and took her to the ‘Ntanira na Mugambo” advocators, fortunately the girl had not yet undergone the cut.

**PRESENTER:** we sought more information from a medical officer, regarding the effects of FGM from a medical perspective
8th SPEAKER: FEMALE MEDICAL OFFICER: There are no health benefits of FGM. Firstly, during delivery, it is a bit difficult for a circumcised woman, since the birth canal has been tampered with during the operation. The girl also loses a lot of blood in the operation and might get infections. When the wound heals it leaves a scar, which doesn’t stretch as expected during childbirth. These complications may also force a woman to undergo caesarian section births as opposed to the natural ones. The natural births are very painful as the birth canal tears since the “cut” reduces its size. Circumcision can also lead to the woman facing social stigma, especially among the educated girls who do not like associations with circumcised girls as they consider the rite retrogressive. We hope people will listen and stop the practice.

PRESENTER: It is my hope that you have been educated on the dangers of FGM, as evident to the speakers who spoke.

Thank you for listening, until neat time, I wish you a nice time.

SIGNATURE TUNE……………………………………