



Alternative Rites of Passage Project: Voices from the Community

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Background of the Project

Founded in 1957, Amref Health Africa is an international health development organisation whose core mission is to increase sustainable health access to communities in Africa through solutions in human resources for health, innovative health services and solutions and investments in health, all geared towards a Universal Health Coverage (UHC). With a presence in seven African countries and one hub in Western Africa, Amref prides itself as the leading champion of a people-centred UHC that ensures individuals and communities - who are at the centre of our programmatic work - in Africa access the essential and quality health services they need without suffering financial hardship. Amref Health Africa works to bridge gaps between communities, health systems and governments, lead advocacy for health system reforms in Africa and provide leadership in the NGO community in developing and documenting best practices and training on community health systems. AMREF envisions Lasting Health Change in Africa through increased sustainable health access to communities in Africa through solutions in human resources for health, health services delivery and investments in health.

The documentation of the Alternative Rite of Passage success stories project was commissioned by the Amref End FGM/C Centre of Excellence (COE) with funds from the Peoples Post Code Lottery -UK and the Dutch Postcode Lottery through Amref UK and Amref flying doctors in the Netherlands. The CoE has the mandate of initiating and catalysing multi-sectoral action, collaboration and building partnerships that help accelerate FGM/C abandonment in Africa.



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Foreword



Amref Health Africa in Kenya started working to end Female Genital Cutting/Mutilation in 2009 by rolling out the community-led alternative rite of passage (CLARP) programme in Kajiado. Subsequently, the End FGM/C Centre of Excellence (CoE) was established to spearhead this agenda. Some of the early pioneers of this CLARP programme form the team at the centre, and this includes the Programme Manager, David Kawai and the Global End FGM/C Ambassador Nice Nailantei Lengete.

The CoE, therefore, set out to document lived experiences of women who have undergone the alternative rites to passage programme since its inception and have been successful various spaces in their communities at large. The CLARP beneficiaries have also been supported by some community members who appreciate the programme and have also been captured in this documentation. Through a short video and this photography catalogue, the case stories of CLARP beneficiaries has been compiled for wider advocacy and inspiration on the positive outcomes of the alternative rites of passage. It is our hope that this project will serve as a motivation for scale-up not just in Kajiado County alone but in other counties and countries where efforts are currently underway to reduce female genital mutilation and early child marriages.



Dr. Tammary Esho
Director, Centre of Excellence
AMREF Health Africa



David Kawai
Programme manager,
Centre of Excellence
AMREF Health Africa



Nice Nailantei Lengete
Global End FGM/C
Ambassador



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Initially, there was community resistance to the Alternative Rites of Passage (ARP) Programme. AMREF was able to address this challenge by taking women leaders like me through training on the advantages of ARP. I am now a trainer of trainers and we have been able to use women community groups as key spaces to reach out to mothers who then enroll their daughters to the ARP programme.”

Anastasia Mashindana

— Chair, Enduet Women Group



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“I remember seeing my elder sister after undergoing female genital cutting. She bled for almost two months and was later married off. She wasn't able to complete her primary school education. I was deeply troubled. Luckily for me, I was able to learn about the AMREF led ARP programme. I convinced my parents and they allowed me to join and complete the programme. This allowed me to continue with my education and I am now in university pursuing my dream.”

Lilian Taiyana

– Student, Maasai Mara University



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“Often times, people wonder why I am passionate about girl child education. It is because I see the advantages that an educated mother brings to the community. While growing up, there was little awareness of the health risks that come with female genital cutting and immediate responsibilities of being married at such a young age. Now as mother, grandmother and women leader, I am very determined to end Female Genital Cutting and early child marriages in my community.”

Lucy Nashuu

— *58-year-old retired teacher.*





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“One of the challenges facing the eradication of Female Genital Cutting is often the identity of the woman in the Maasai community. The Maasai consider the woman only within the lens complying with all cultural rites. The ARP has been able to complete these cultural rites but has eradicated the razor blade allowing girls to continue their education and be able to start families at a good age.”

Gertrude Mukala
– Teacher, Kajiado



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“My uncles wanted me to be circumcised according to the Maasai culture and even though my mum was against it that it, she needed my support to stand up against their decision. But as a class six pupil, there was not much that I could do on my own. So when AMREF came up the ARP programme, I took my chance. Being a programme running across the county, my uncles were able to see many other girls taking part and this convinced them that my decision was not unpopular.”

*Joyce Naisola –
Student, Maasai Mara University*

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“I get a sense of profound satisfaction whenever young girls from my community look at me and say they want to be like that teacher from that house who is not circumcised but is successful in life.”

Janet Nashipai
– Teacher, Kajiado



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“My parents, like many others in our community, practiced and supported circumcision of girls. But after attending numerous trainings as part of the ARP programme, they now understood the negative effects of Female Genital Cutting and early child marriages. I believe more community sensitization forums can help change the perceptions and eradicate the practice.”

Doris Sipilon

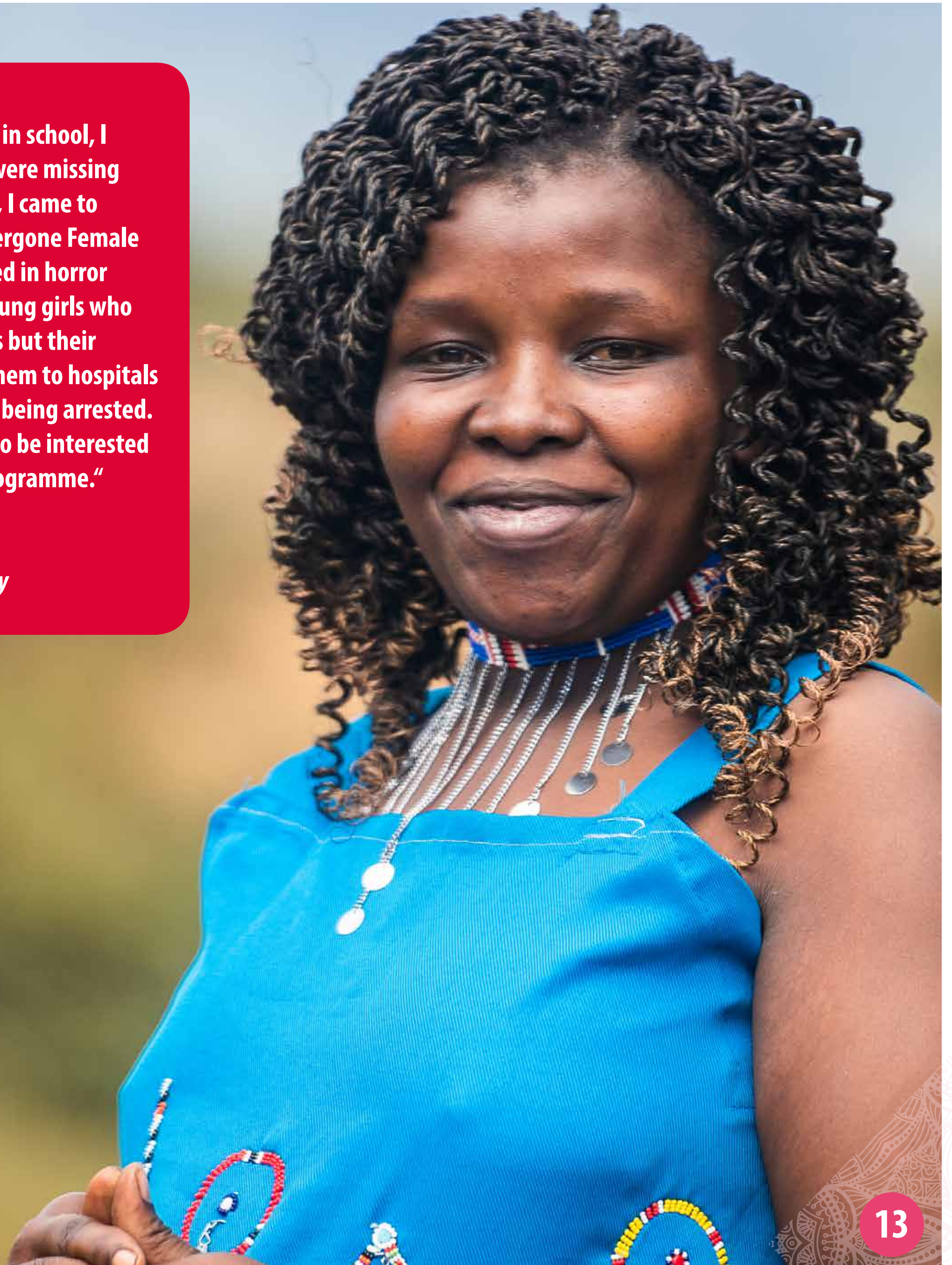
– Trained Teacher, Loitoktok, Kajiado.





“One day while teaching in school, I noticed that some girls were missing in class. When I inquired, I came to learn that they had undergone Female Genital Cutting. I watched in horror the suffering of these young girls who developed complications but their parents could not take them to hospitals for treatment for fear of being arrested. This is what pushed me to be interested in the AMREF led ARP programme.”

Sarah Koimerek
– Teacher/ARP Beneficiary



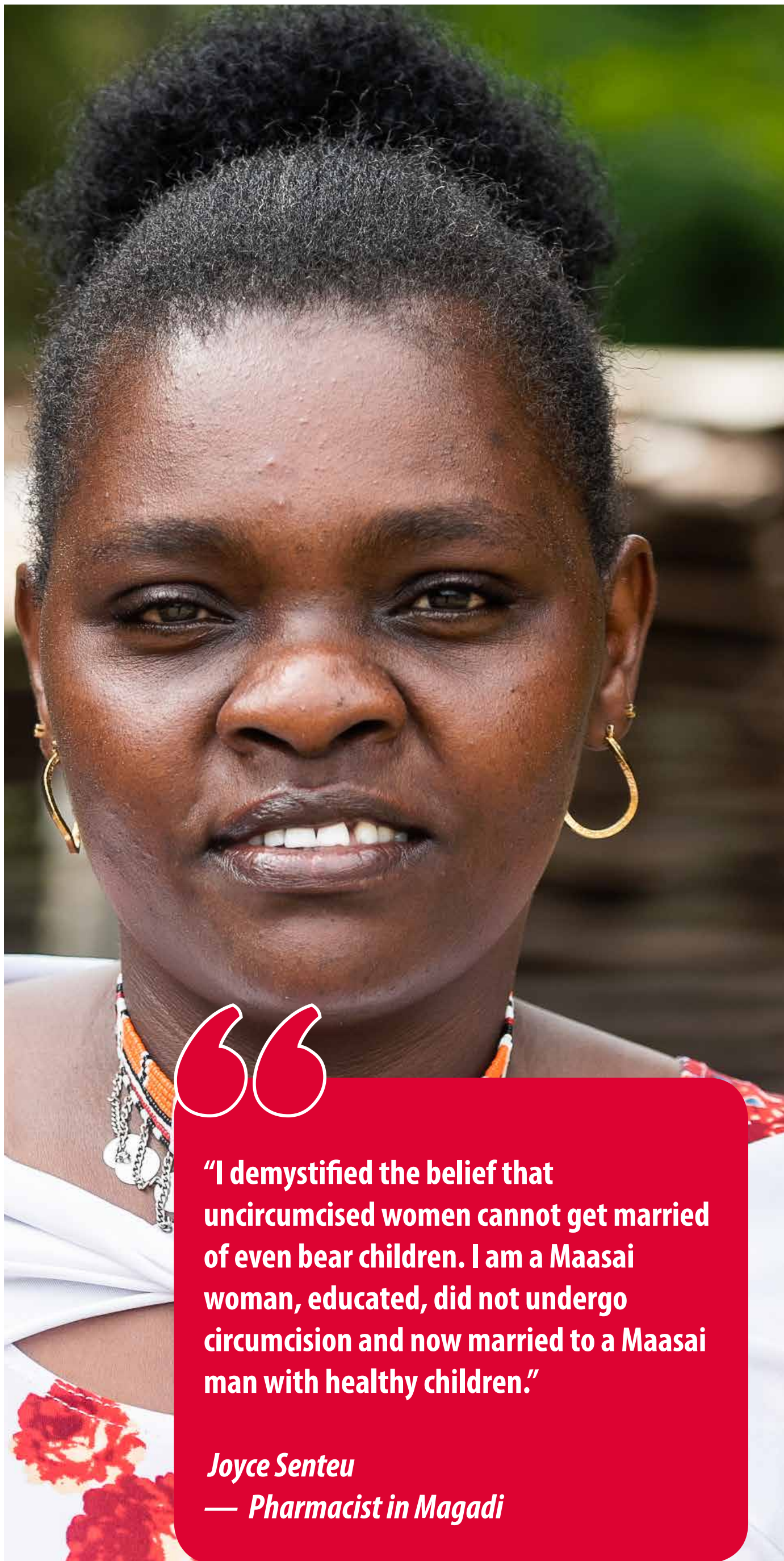


“I heard about the AMREF led ARP training and graduation ceremonies when I was a teacher about 10 years ago. As face of Government at the community level, I am now able to use the force of law to ensure all children [girls and boys] of school-going age attend school and arrest those still practicing Female Genital Cutting. I believe that girls should be protected and their education not interfered by outdated cultural practices.”

Joseph Mpatai

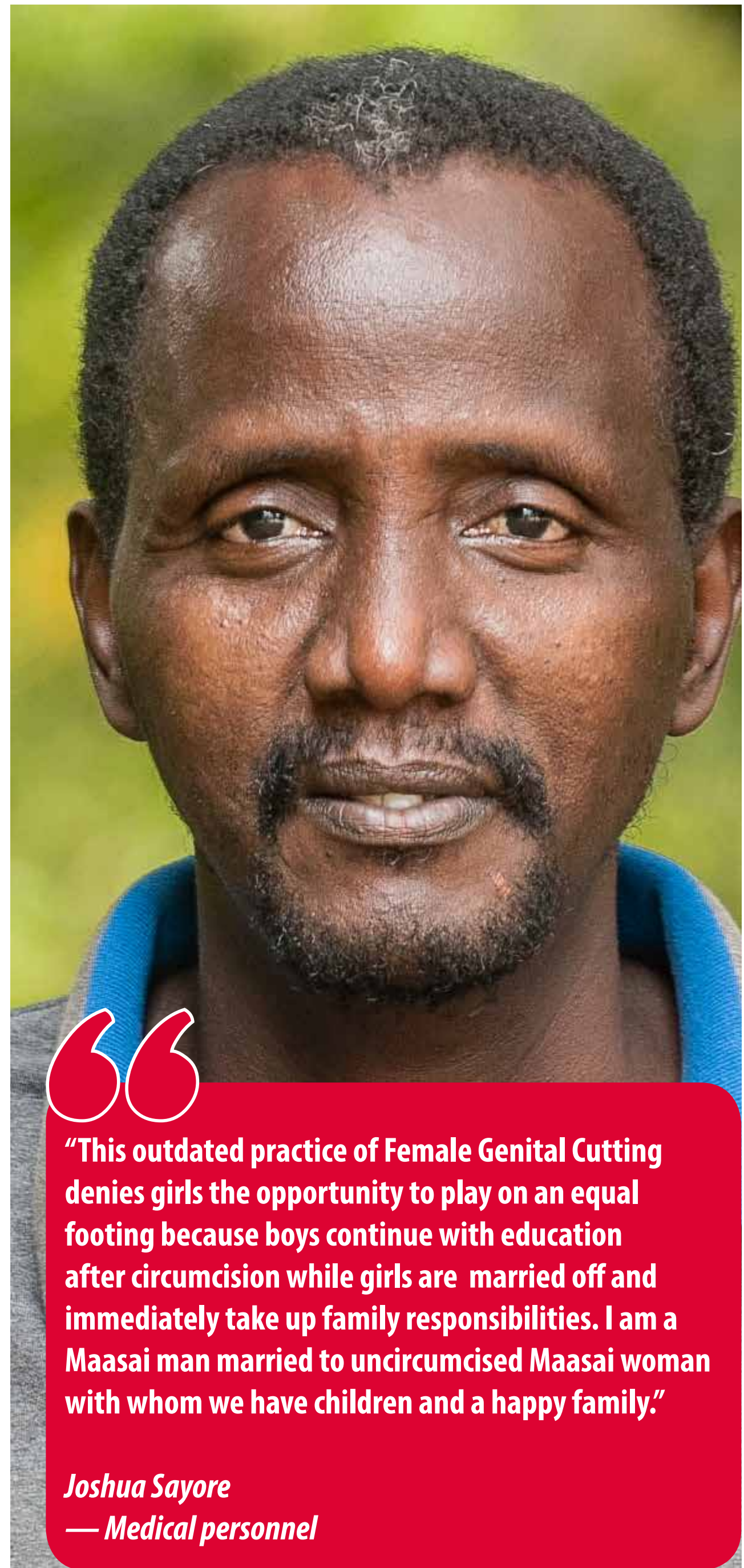
– Senior Chief, Olorika location, Kajiado.





“I demystified the belief that uncircumcised women cannot get married or even bear children. I am a Maasai woman, educated, did not undergo circumcision and now married to a Maasai man with healthy children.”

Joyce Senteu
— Pharmacist in Magadi



“This outdated practice of Female Genital Cutting denies girls the opportunity to play on an equal footing because boys continue with education after circumcision while girls are married off and immediately take up family responsibilities. I am a Maasai man married to uncircumcised Maasai woman with whom we have children and a happy family.”

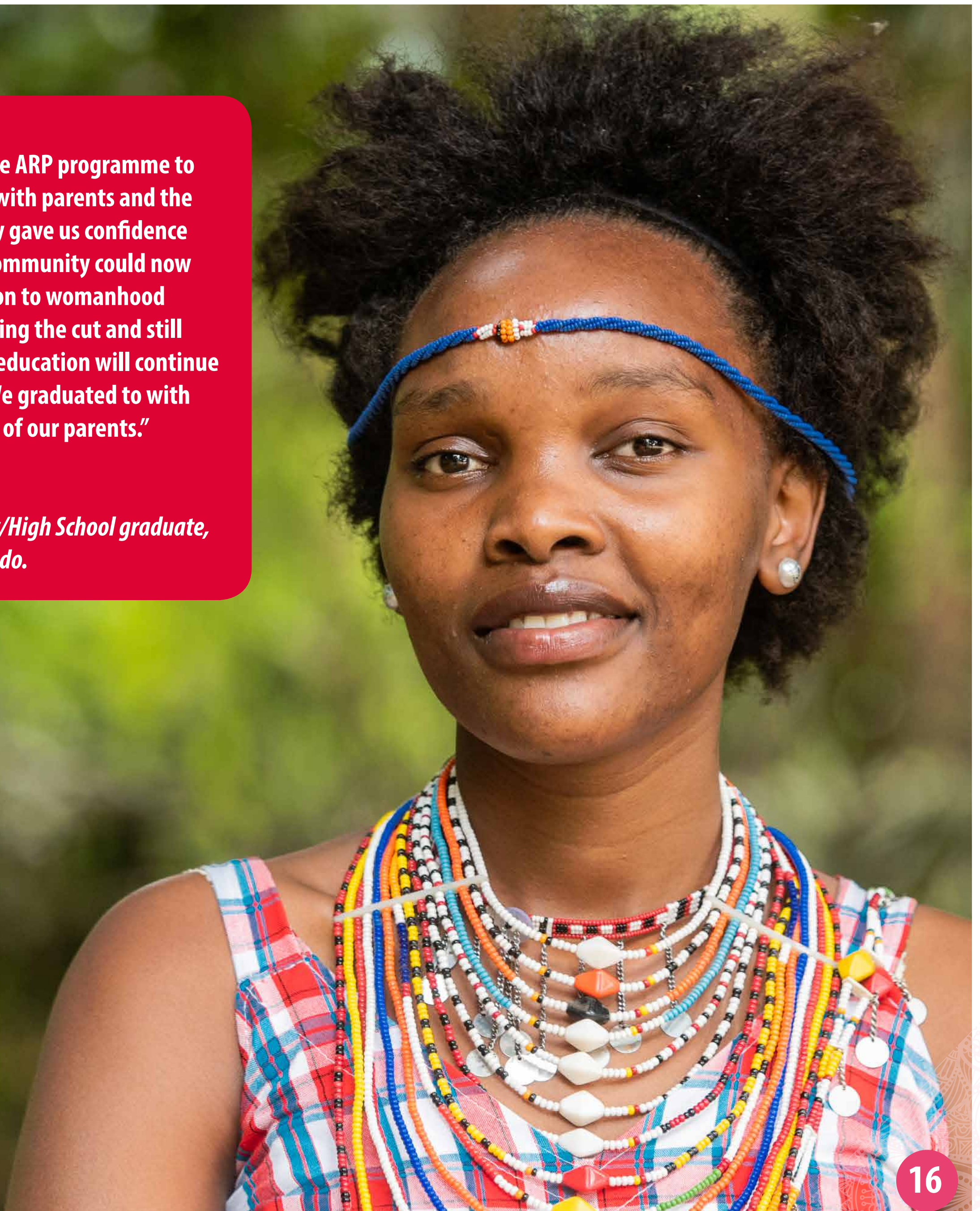
Joshua Sayore
— Medical personnel

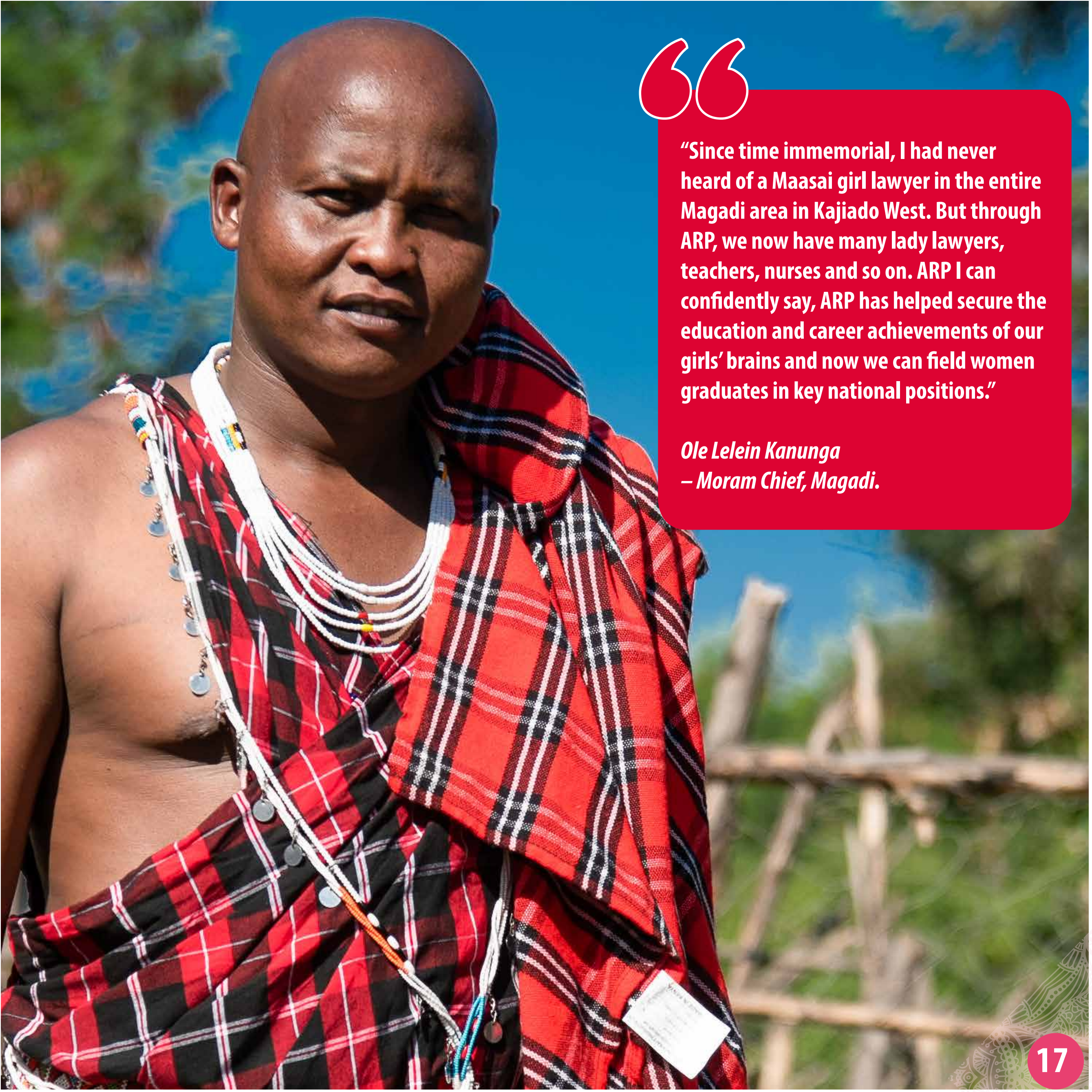
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“The design of the ARP programme to include sessions with parents and the wider community gave us confidence that the entire community could now see our graduation to womanhood without undergoing the cut and still will see that our education will continue uninterrupted. We graduated to with the full blessings of our parents.”

Esther Ntatai

*– ARP Beneficiary/High School graduate,
Ngurumani, Kajiado.*





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“Since time immemorial, I had never heard of a Maasai girl lawyer in the entire Magadi area in Kajiado West. But through ARP, we now have many lady lawyers, teachers, nurses and so on. ARP I can confidently say, ARP has helped secure the education and career achievements of our girls’ brains and now we can field women graduates in key national positions.”

*Ole Lelein Kanunga
– Moram Chief, Magadi.*





This assignment was delivered by Edward Wanyonyi with the Camerafrica Social Change Hub team on behalf of the AMREF Health Africa Centre of Excellence. Camerafrica Social Change Hub designs and implements adaptive and responsive behaviour change communications projects across Africa with a keen focus on bringing out what works from diverse contexts.
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